Form	9	9	0

Return of Organization Exempt From Income Tax

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

0	MB No. 1545-0047
	2014
<u> </u>	
0	pen to Public
	Inspection
	20

►	 Do not enter social security numbers on this form as it may be made public.
	Information about Form 000 and its instructions is at your irs goutform000

		of the Treasury anue Service	► Infor	mation	about Form	990 and	its instructions	is at www.i	rs.gov/f	orm990,		Inspection
			lendar year, or tax ye	ar beg	inning		, 2014	, and endi	ing			, 20
			me of organization							D Employer ide	ntifica	tion number
Β¢	heck if ap	and an his	AVE THE CHILDRE	N FEI	DERATION	. INC.				06-072	6487	1
Γ	Addre	** 0	ing business as									
+	chang	·	imber and street (or P.O. bo	x if mail i	s not delivered t	o street ad	dress)	Room/suite		E Telephone nu	mber	
-	-		01 KINGS HIGHWA	Y EAS	ST			400		(203) 22	1 – 4	000
-	Final	return/ Ci	ty or town, state or province			ign postal	code			(
+-	termin Amen	wood F	AIRFIELD, CT 06			•				G Gross receip	ots \$	701,852,389.
-	_ return Applic	cation F Na	ame and address of principal	_	CAROL	YN MT	VES			H(a) is this a gro	up retur	
ـــــ	_ pendi	ing [01 KINGS HIGHWA					т 06825		Subordinates H(b) Are all subore		cluded? Yes No
1	Tax-ex	empt status:		501(c) (sert no.)	4947(a)(1)		27			. (see instructions)
			.SAVETHECHILDRE	فتضفص						H(C) Group exem	nption nu	umber 🕨
-				rust	Association	Othe	ar 🕨	L Year	of format	ion: 1932 M		
	art l				<u> </u>					······································	~~~~~	
			cribe the organization's r	nission	or most signif	icant acti	vities: SAVE	THE CHI	LDREN	IS AN IN	TL.	NONPROFIT
ä			PMENT ORG. WHOS									
and	}		RLD TREATS CHIL									
Activities & Governance	2	Check this	box 🕨 🔄 if the organ	ization	discontinued	its opera	ations or dispose	ed of more ti	han 25%	of its net asset	ts.	
60			voting members of the g								3	35.
65			independent voting men								4	34.
tiec	5	Total numb	per of individuals employ	ed in ca	alendar year 20	014 (Part	V, line 2a)				5	1,493.
ť	6	Total numb	per of volunteers (estimate	e if nece	essary)	•					6	244.
Ac	7a	Total unrel	ated business revenue fro	om Part	VIII, column (C), line 1	2		••••		7a	1,788.
			ted business taxable inco								7b	0
									T	Prior Year	1	Current Year
a.	8	Contributio	ons and grants (Part VIII, I	ine 1h)					E	32,049,85	59.	645,033,598.
Revenue			ervice revenue (Part VIII, I							9,743,81	13.	10,727,445.
eve	10	Investmen	t income (Part VIII, colum	n (A), li	nes 3, 4, and	7d)	•••••		•	12,658,04		9,569,924.
R	11	Other reve	nue (Part VIII, column (A), lines	5, 6d, 8c, 9c,	10c. and	11e)		•	3,390,30		2,273,511.
			ue - add lines 8 through							57,842,01		667,604,478.
			similar amounts paid (Pa							38,543,54		481,302,940.
	14	Benefits pa	aid to or for members (Pa	rt IX, co	lumn (A), line	4)		• • • • •			0	0
s	15	Salaries, o	ther compensation, empl	oyee be	nefits (Part IX	, column	(A), lines 5-10)		1	.06,464,21	4.	99,569,098.
Expenses	16a	Profession	al fundraising fees (Part I	, X, colun	nn (A), line 11	ie)			·	6,222,52		6,938,561.
ad x	Ь	Total fund	aising expenses (Part IX,	column	(D), line 25)	▶ 3	7,569,716					
ш	17	Other expe	nses (Part IX, column (A), lines 1	11a-11d, 11f-2	24e)			1	.02,596,18	36.	83,729,918.
	18	Total expen	nses. Add lines 13-17 (m	iust equ	al Part IX, colu	лт (A),	line 25)		6	53,826,46	50.	671,540,517.
	19		ess expenses. Subtract lin							4,015,55	56.	-3,936,039.
ces										ining of Current	Year	End of Year
Assets or Balances	20	Total asset	s (Part X, line 16)						. 3	16,482,26	55.	286,553,255.
		Total liabili	ties (Part X, line 26)						. []	18, 514, 94		95,928,724.
Net /	22	Net assets	or fund balances. Subtra	act line :	21 from line 20	D			. 1	.97,967,32	24.	190,624,531.
	rt li		ure Block									
Un	der per	nalties of per	ury, I declare that have ex lete. Declaration of preparer	amined	this return, incl	uding acc	ompanying sched	ules and state	ements, a	and to the best o	f my k	nowledge and belief, it is
	5, 60116		ice. Deciarajon prepage	1/	an oncer is ba	Sed Off all	anormation of whi	on preparer i	las any k	nowledge.	·	
Sia			MM	<u>e</u> L						8	14	115
Sig He		Signa	ture of officer	\$	01.5	C	C		~~	Date		•••
110	10		CHUL ISVAV	(dor	n, hi	CF_	<u>financi</u>	al or	<u> Gi</u> Ca	x		
		Г Туре	or print name and title		A							
Paio	ł	1	preparer's name	7	A Preparer's	Ignature	XIII	Date	1/201	Check	1	TIN
	parer	MARY-E		<u> </u>	my "in	-yny	ATONIA	7 0/1	4/201			P00431862
	Only	Firm's nam		6						Firm's EIN 🕨		
			ess DONE FINANCIA					-2608		Phone no.	360-	522-3200
			this return with the prepa				tions)	<u></u>	<u></u>	<u></u>	<u></u>	X Yes No
For	Pape	rwork Redu	uction Act Notice, see th	e separ	ate instruction	ns.						Form 990 (2014)

JSA 4E1010 1.000 1237AH 2219

SAVE	THE	CHILDREN	FEDERATION,	INC.	
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<pre>If "res" describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program arrives?, If "res" describe these changes on Schedule O. Describe the organization's program service accomptishments for each of its three largest program services, as measure expenses. Section 501(c)(2) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expenses \$</pre>	Pa	rt III Statement of Program Service Accomplishments
BANE THE CHILDREN ("SCUB") IS AN INTERMATIONAL MONPORT CHILDREN'S BELIEF AND DEVELOPMENT ORGATIZATION WORDS MISSION IS TO TO ADDITEST DREAMTRADGUS IN THE WAY THE WORLD THEATS CHILDREN, AND TO ACHIEVE IMMEDIATE AND LASTING CHANGE IN THEIR LIVES. Did the organization undertake any significant program services during the year which were not listed on the prior From 900 or 900-E27. IVes If "Yes," describe these new services on Schedule O. IVes [X] Dd the organization cases conducting, or make significant changes in how it conducts, any program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service. Complements of respond. a (Code:)(Expenses \$00_114,122, including grants of \$109,222,070_)(Revenue \$031,232_) DERESENTES - SAVE THE CHILDREN RESPONDED TO 103 BUMMNITARIAN FTRSES IN SCONTRIES IN 2014, DIRECTLY RESPONDED TO 103 BUMMNITARIAN PEOPLE INCLUDING 5.9 MILLION CHILDREN. (SEE SCHEDULE 0) INTLLION CHILDREN ACOUND THE WORLD CHILDREN THE START IN LIFE WITH OUR HEALTH AND NUTRITION PROGRAMS. (SEE SCHEDULE C)		
RESIEF AND DEVELOPMENT ORGANIZATION WROSE MISSION 13 TO INSPIRE REAKTRADUGIS IN THE NAY THE WORLD FREATE CHILDREN, AND TO ACLIEVE IMMEDIATE AND LASTING CHANGE IN THEIR LIVES. Did the organization undertake any significant program services during the year which ware not listed on the prior from 990 of 980-EZ7. If "Ks," describe these new services onducting, or make significant changes in how it conducts, any program services?. If "Ks," describe these changes on Schedule O. Did the organization cases conducting, or make significant changes in how it conducts, any program service, as measure expresses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to of the total expresses, and forevenue, if any, for each program service reported. a (Code:) (Expenses \$		
BREAKTRROUGS IN THE WAY THE WORLD TREATS CHILDREN, AND TO ACHIEVE UMMEDIATS AND LASTING CHANCE IN THEIR LIVES. Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 or 980-627		
IDMEDIATE AND LARTING CHARGE IN TIERIA LIVES. Did the organization udentate any significant program services during the year which were not listed on the in "Yes," describe these onducing, or make significant changes in how it conducts, any program services?. If "Yes," describe these changes on Schedule O. Did the organization ceses conducting, or make significant changes in how it conducts, any program services, as measure services?. If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measure services. Queet in the organization service accomplishments for each of its three largest program services, as measure services. a (Code:) (Expenses \$		
Did the organization undertake any significant program services during the year which were not listed on the prior Form 900 or 990-E27		
prior Form 990 or 990 cf 27,		IMMEDIATE AND LASTING CHANGE IN THEIR LIVES.
services?,		prior Form 990 or 990-EZ? Yes X
expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot the total expenses, and revenue, if any, for each program service reported. a (Code:) (Expenses \$		services?
EMERGENCIES - SAVE THE CHILDREN RESPONDED TO 103 HUMANITARIAN CRISES IN 53 COUNTRIES IN 2014, DIRECTLY REACHING 10.8 MILLION PEOPLE INCLUDING 5.9 MILLION CHILDREN. (SEE SCHEDULE O)	1	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot
PEOPLE INCLUDING 5.9 MILLION CHILDREN. (SEE SCHEDULE O) COde:)(Expenses \$ 144,880,525, including grants of \$ 109,629,520,)(Revenue \$ 58,509,) HEALTH & NUTRITION - SAVE THE CHILDREN DIRECTLY HELPED 24.8 MILLION CHILDREN AROUND THE WORLD GET A HEALTHY START IN LIFE WITH OUR HEALTH AND NUTRITION PROGRAMS. (SEE SCHEDULE O) c (Code:)(Expenses \$ 111,425,228, including grants of \$ 21,303,343,)(Revenue \$ 1,536,226,) EDUCATION - IN 2014, SAVE THE CHILDREN'S EDUCATION PROGRAMS REACHED 11.6 MILLION CHILDREN AROUND THE WORLD. (SEE SCHEDULE O) d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 119,427,618, including grants of \$ 109,455,607,)(Revenue \$ 221,657,) e Total program services xpenses ▶ 601,928,194. xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	a	
PEOPLE INCLUDING 5.9 MILLION CHILDREN. (SEE SCHEDULE 0) COde:)(Expenses \$ 144,980,526, including grants of \$ 105,920,520,)(Revenue \$ 58,500,) HEALTH & NUTRITION - SAVE THE CHILDREN DIRECTLY HELPED 24.8 MILLION CHILDREN AROUND THE WORLD GET A HEALTHY START IN LIFE WITH OUR HEALTH AND NUTRITION PROGRAMS. (SEE SCHEDULE 0) Code:)(Expenses \$ 111,425,228, including grants of \$ 91,303,343,)(Revenue \$ 1,536,226,) EDUCATION - IN 2014, SAVE THE CHILDREN 'S EDUCATION PROGRAMS REACHED 11.8 MILLION CHILDREN AROUND THE WORLD. (SEE SCHEDULE 0) d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 119,427,618, including grants of \$ 109,455,607,)(Revenue \$ 221,057,) Table program services (Describe in Schedule O.) ATTACHMENT 1 Comparison of the services (Describe in Schedule O.) ATTACHMENT 1 Comparison service (Describe in Schedule O.) ATTACHMENT 1 Comparison service (Describe in Schedule O.) AT	(CRISES IN 53 COUNTRIES IN 2014, DIRECTLY REACHING 10.8 MILLION
b (Code:)(Expenses \$)(Revenue \$		
c (Code:) (Expenses \$	l	HEALTH & NUTRITION - SAVE THE CHILDREN DIRECTLY HELPED 24.8 MILLION CHILDREN AROUND THE WORLD GET A HEALTHY START IN LIFE WITH
EDUCATION - IN 2014, SAVE THE CHILDREN'S EDUCATION PROGRAMS REACHED 11.8 MILLION CHILDREN AROUND THE WORLD. (SEE SCHEDULE O) d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 139,427,618. including grants of \$ 100,455,607.)(Revenue \$ 221,097.) e Total program service expenses ► 601,928,194.		
d Other program services (Describe in Schedule O.) ATTACHMENT 1 (Expenses \$ 139,427,618. including grants of \$ 100,455,607.)(Revenue \$ 221,097.) e Total program service expenses ► 601,928,194.	H	EDUCATION - IN 2014, SAVE THE CHILDREN'S EDUCATION PROGRAMS
(Expenses \$ 139,427,618. including grants of \$ 100,455,607.) (Revenue \$ 221,097.) e Total program service expenses ► 601,928,194.	-	
(Expenses \$ 139,427,618. including grants of \$ 100,455,607.) (Revenue \$ 221,097.) e Total program service expenses ► 601,928,194. 601,928,194. Earn 990.0	•	
(Expenses \$ 139,427,618. including grants of \$ 100,455,607.) (Revenue \$ 221,097.) e Total program service expenses ► 601,928,194. 601,928,194. Earn 990.0	-	
e Total program service expenses ► 601,928,194.		
e Total program service expenses ► 601,928,194.		
	SA	
UZD/AB ZZT9 V L4-68 Z573569 DA		1237AH 2219 V 14-6F 2523569 PA
1237AH 2219 V 14-6F 2523569 F		1237AH 2219 V 14-6F 2523569 F

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Pari	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part.III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I,	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
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	X	
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	X	
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	1		
	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	Х	
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	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		Χ
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E,	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			1
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	X	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
SA		Form	990 ((2014)

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Part	V Checklist of Required Schedules (continued)		•	
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u>X</u>
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,	n Heinstein An tri stati		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b	X	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		•	
	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34	· X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	ļ		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			U.
	Part VI	37		<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		v	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	L

Form 990 (2014)

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Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V	. <u>.</u> .		. X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	<u>}</u>		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 1, 493	3		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	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? If "No" to line 3b, provide an explanation in Schedule O	3b		X
	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	
		Τα		
	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).	1		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5</u> c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
	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	A9683	Х
	Did the organization receive any funds, directly of indirectly, to pay premiums on a personal benefit contract?	7f		X
		7g		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			and a second
	sponsoring organization have excess business holdings at any time during the year?	8		SAME
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		20125555
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12		1000	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	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		Å	
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
		13a		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand		AND CONTRACT	<u></u>
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
<u>)</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
, 1.000		Form	990	•
	1237AH 2219 V 14-6F 2523569		PÆ	AGE

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Form 990 (2014)

Part	90 (2014) SAVE THE CHILDREN FEDERATION, INC.	06-0726	487	F	ege 6
		ough 7b below,	and	for a	"No
	Check if Schedule O contains a response or note to any line in this Part VI				X
Sect	ion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 35		lati diji	14.
	If there are material differences in voting rights among members of the governing body, or if the governing				an.
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			r dist l	
b	Enter the number of voting members included in line 1a, above, who are independent	1b 34	aja. E	1.00	
2	Did any officer, director, trustee, or key employee have a family relationship or a business rela	ationship with		한편	
	any other officer, director, trustee, or key employee?		2	Х	
3	Did the organization delegate control over management duties customarily performed by or une	der the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other	r person?	3	┝───	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was file	ed?	4	<u> </u>	Х
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets?	5	ļ	X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to ele	ect or appoint		ſ	
	one or more members of the governing body?		7a	<u> </u>	Х
b	Are any governance decisions of the organization reserved to (or subject to approval b	y) members,			
	stockholders, or persons other than the governing body?		7b	ļ	X
8	Did the organization contemporaneously document the meetings held or written actions unde	rtaken during	i		l .
	the year by the following:		문자		
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot I	be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	<u> </u>	Х
iecti	on B. Policies (This Section B requests information about policies not required by the Inte	ernal Revenue	Code	0.) Yes	
				Tes	No X
	Did the organization have local chapters, branches, or affiliates?		10a	<u> </u>	<u>^</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of s			ł	
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b	Х	
1a		ing the form? .	11a	<u>^</u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		10	v	ļ
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	<u>. X</u>	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests the	nat could give		х	
	rise to conflicts?		12b		<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the po	olicy? If "Yes,"		x	
	describe in Schedule O how this was done		12c		
3	Did the organization have a written whistleblower policy?		13	X	
4	Did the organization have a written document retention and destruction policy?		14	X	
5	Did the process for determining compensation of the following persons include a review and		otra Tati	2143.8 1 1	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			11.11	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation			v	
а	The organization's CEO, Executive Director, or top management official		15a	·X	
a b	The organization's CEO, Executive Director, or top management official		<u>15a</u> 15b		
	The organization's CEO, Executive Director, or top management official		<u>15a</u> 15b		
b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	arrangement	<u>15a</u> 15b		v
b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	arrangement	<u>15a</u> 15b		X
b	The organization's CEO, Executive Director, or top management official	arrangement	<u>15a</u> <u>15b</u> 16a		x
b 6a	The organization's CEO, Executive Director, or top management official	arrangement o evaluate its safeguard the	15a 15b 16a		X
b 6a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	arrangement o evaluate its safeguard the	<u>15a</u> <u>15b</u> 16a		X
b 6a b	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	o evaluate its safeguard the	15a 15b 16a		X
b 16a b <u>Sect</u> 17	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	arrangement o evaluate its safeguard the	15a 15b 16a 16a 16b		
b 16a b <u>Sect</u> 17	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	arrangement o evaluate its safeguard the 	15a 15b 16a 16a 16b		
b 16a b <u>Sect</u> 17 18	The organization's CEO, Executive Director, or top management official	arrangement o evaluate its safeguard the 990-T (Section edule O)	15a 15b 16a 16a 16b	x	only
b 16a b <u>Sect</u> 17 18	The organization's CEO, Executive Director, or top management official	arrangement o evaluate its safeguard the 990-T (Section edule O)	15a 15b 16a 16a 16b	x	only
b 16a b <u>5ect</u> 17 18	The organization's CEO, Executive Director, or top management official	e arrangement o evaluate its safeguard the 990-T (Section edule O) s, conflict of int	15a 15b 16a 16b 501(0	x	only
b 16a b	The organization's CEO, Executive Director, or top management official	e arrangement o evaluate its safeguard the 990-T (Section edule O) s, conflict of int	15a 15b 16a 16b 501(0	x	only

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Page 7

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
Section A.	Check if Schedule O contains a response or note to any line in this Part VII

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 current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any	erage (do not check more than one urs per box, unless person is both an					an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)CAROLYN S. MILES	55.00									
TRUSTEE/PRESIDENT / CEO	1.00	X		Х				439,753.	0	20,638.
(2)CYNTHIA AUGUSTINE	1.00							-		
TRUSTEE	0	X						0	0	(
(3)SUSAN DECKER	1.00									
TRUSTEĘ	0	Х						0	0	(
(4) JOAQUIN DUATO	1.00									
TRUSTEE	0	Х				_		0	0	(
_(5)RANDALL EISENBERG	1.00									
TRUSTEE	1.00	Х						0	0	(
(6) DEBRA FINE	1.00									
TRUSTEE	0	X						0	0	(
(7) JENNIFER GARNER	1.00	x						0	0	(
TRUSTEE	1.00	<u>^</u>								
(8) PHILIP·H. GEIER, JR. TRUSTEE	-1.00	x						0	0	(
(9)JEFFREY GOLDSTEIN	1.00							0		
TRUSTEE	0	х						0	0	(
(10)CHARLOTTE GUYMAN	1.00									
TRUSTEE	1.00	х						0	0	(
(11)BILL HABER	1.00					_				
TRUSTEE	0	х						0	0	(
(12)JOHN HAYES	1.00									
TRUSTEĖ	0	х						0	o	(
(13)AUSTIN HEARST	1.00									
TRUSTEE	1.00	х						0	0	(
(14)ERNIE HERRMAN	1.00									
TRUSTEE	0	x						0	0	(

SAVE THE CHILDREN FEDERATION, INC. 06-0726487 Page 8

Part VII Section A. Officers, Directors, T		у⊏п	ipio			and F	ligi	1		/ees (co	(F)
(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles	s pe 1 a d	ition more rson irect	than o is both or/truste	an ee)	(D) Reportable compensation from the	(E) Reporta compensati relate organizat	on from d	(۲) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		from the organization and related orğanizations
5) DR. LARRY HOROWITZ TRUSTEE	1.00	X								0	
6) BRAD IRWIN	1.00										
TRUSTEE 7) LINDA KOCH LORIMER	1.00	X			_			C) 	0	
TRUSTEE 3) FREDA LEWIS-HALL	0	X					_	C	·	0	•
TRUSTEE	0	x						C)	О	
9) JOAN LOMBARDI	1.00										
TRUSTEE D) MARK V. MACTAS	1.00	X							/		
VICE CHAIR	0	X						C)	0	
1) DAVID J. MASTROCOLA TRUSTEE	1.00	x						l r		0	
2) HENRY MILLER (THRU 2/14)	1.00										
TRUSTEE	0	X						C)	0	
3) TOM MOSER TRUSTEE	0	x)	O	
4) ANNE MULCAHY	1.00										
CHAIR 5) TOM MURPHY	1.00	X	$\left \right $							0	
CHAIR EMERITUS	0	X						C)	0	
1b Sub-total 439,753. 0 20,638. c Total from continuation sheets to Part VII, Section A 4,843,786. 0 588,589. d Total (add lines 1b and 1c) 5,283,539. 0 609,227.											
 Total number of individuals (including but no reportable compensation from the organization Did the organization list any former of 	ion 🕨	163	3								Yes
 employee on line 1a? If "Yes," complete Sche For any individual listed on line 1a, is the organization and related organizations of 	dule J for suc sum of rep greater than	ch ind portat \$15	lividu ble c 50,0	ual com 00?	 pen ˈ <i>lf</i>	satior "Yes	n a ,"	nd other compen complete Schedu	sation from	the	3
individual 4 X 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 4 X 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 co compensation from the organization. Report											
year.	. sempensui	5.1 101									
(A) Name and business a	ddress		_	_	_			(B) Description of se	ervices	Co	(C) ompensation
ATTACHMENT 3											
					_	<u>.</u>	+				

SAVE THE CHILDREN FEDERATION, INC.

Form 990 (2014) Part VII Section A. Officers, Directors, Tru	istees. Ke	v Fn	nplo	ove	es.	and H	lia	hest Compensat	ed Employe	es (co	Page 8	
(A) Name and title	(B) Average hours per week (list any hours for related	(do box, office	not c unle er an	(0 Pos heck sspe d a d	C) sition more erson lirect	e than o is both or/trust	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation related organization (W-2/1099-M	e from ns	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	mer	(W-2/1099-MISC)			organization and related organizations	
26) BRADLEY C. PALMER TRUSTEE	<u>1.00</u> 0	X						0		0	(
27) BEA PEREZ	1.00											
TRUSTEE 28) CHARLES R. PERRIN TRUSTEE	0 1.00 0	X X						0		00		
29) JUDITH REICHMAN, M.D. TRUSTEE	1.00	x						0		0	(
30) DR. ANDREA L. RICH (THRU 8/14) TRUSTEE	1.00	x						0		0	(
31) COKIE ROBERTS VICE CHAIR	1.00 0	X						0		0	C	
32) SUNIL SANI	1.00											
TRUSTEE 33) RICHARD J. SCHNIEDERS TRUSTEE	$\begin{array}{r}1.00\\1.00\end{array}$	X						0		0	(
34) PERNILLE SPIERS-LOPEZ TRUSTEE	1.00	x						0		0		
35) HELENE R. SULLIVAN (THRU 2/14) TRUSTEE	1.00 0	Х						0		0	C	
36) AMELIA VICINI TRUSTEE	1.00 0	Х					ľ	0		0	C	
1b Sub-total c Total from continuation sheets to Part VII, Se	ection A		•••			• •						
d Total (add lines 1b and 1c)												
2 Total number of individuals (including but not reportable compensation from the organization		163		d at	0006) who	re	ceived more than	\$10 0,000 of			
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu	er, directo <i>ile J for suc</i>	r, or ch ind	tru ividu	istee <i>ial</i> ,	e,	key e	mpl	loyee, or highest	compensate	ed [Yes No 3 X	
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual.	ater than	\$15	0,0	00?	lf	"Yes,	" C	complete Schedul	e J for su	ch	4 X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue cor	npen	satio	on f	rom	any	unr	elated organizatio	on or individu	al	5 X	
Section B. Independent Contractors			-							-		
 Complete this table for your five highest com compensation from the organization. Report co year. 											s tax	
(A) Name and business add	(A) Name and business address										(C) Compensation	
•												
2 Total number of independent contractors (in more than \$100,000 in compensation from the				ited	l to	those	l ə lis	sted above) who	received		ent weeks	

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SAVE THE CHILDREN FEDERATION, INC.

(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles r and	Pos neck s pe	erson lirect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	other compensation
	related organizations below dotted line)	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
) DAVID WESTIN TRUSTEE	1.00	x						C	0	
) DONA DAVIS YOUNG TRUSTEE	<u> 1.00</u> 0	x						0	0	
) CARLOS CARRAZANA EXECUTIVE VP AND COO	56.00 0			х				323,651.	0	29,44
) MICHAEL KLOSSON VP, POLICY AND DHR	53.00			х				245,483.	0	15,38
) THOMAS KRIFT VP, STRATEGIC OPERATIONS	49.00			X				213,659.	0	41,46
VP & CHIEF HR OFFICER	42.00			x				179,053.	0	24,34
 KENNETH MURDOCH VP & CHIEF INFO OFFICER DIANA MYERS 	65.00 0 69.00			х				224,054.	0	29,33
VP, INTERNATIONAL PROGRAMS) SUSAN RIDGE	45.00			x				244,326.	0	15,20
VP, MKTG AND COMMUN.	9.00			х				254,213.	0	29,17
									46,88	
VP, US PROGRAMS b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c) Total number of individuals (including but not	ection A	• • • • • <u>•</u>	•••	•••	•••	 		245,526.	\$100.000 of	
Did the organization list any former offic employee on line 1a? If "Yes," complete Sched	n ► cer, directo ule J for suc	1 <u>63</u> or, or ch ind	} tru ividu	iste ual	e,	key e	emp	loyee, or highes	t compensated	Yes N 3
For any individual listed on line 1a, is the organization and related organizations gr <i>individual</i> Did any person listed on line 1a receive or for services rendered to the organization? <i>If "Y</i> section B. Independent Contractors	eater than	\$15 mpen	i0,0 • • satio	00? • • on 1	P If ••• from	′″Yes ₁any	;" • • un	complete Schedu	le J for such	4 · X
Complete this table for your five highest com compensation from the organization. Report of year.										
(A) Name and business address								(B) Description of se	ervices ((C) Compensation
							1	<u> </u>		

SAVE THE CHILDREN FEDERATION, INC. 06-0726487

Form 990 (2014) Part VII Section A. Officers, Directors, Tru	istoos Ka	. Em				and 1	منا	host Component	od Emplo	1000 (00	Page
(A) Name and title	(B) Average hours per week (list any hours for	(do r box, office	not ch unless r and	(C Posi eck s pei a d	C) ition more rson irect	e than c is both or/trust	one an ee)	(D) Reportable compensation from the	(E) Report compensat relate organiza	able ion from ed	(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		from the organization and related organizations
18) ROBERT D. THOMPSON VP, RESOURCE DEVELOPMENT	50.00 0			x				326,057.		0	35,716
9) RICHARD K. TROWBRIDGE, JR. VP FINANCE & CFO	55.00 0			x				248,220.		0	41,724
0) GRETCHEN WAGNER VP GENERAL COUNSEL(THRU 11/14)	47.00 0			x				254,278.		0	38,390
1) BRIAN WHITE ACTING GENERAL COUNSEL	44.00 0			x				150,375.		0	8,143
2) ANDREA WILLIAMSON SECRETARY	45.00 1.00			х				125,695.		0	18,119
3) GERALD W. ANDERSON ACT. AVP, POLICY & HUMAN RESP	GERALD W. ANDERSON 47.00							0	17,664		
4) DAVID A. OOT SR ADVISOR, HEALTH & NUTRITION	40.00 0				х			199,137.		0	14,414
DANIEL N. STONER41.00AVP, EDUCATION & CHILD DEV0X169,475.									0	38,833	
6) DANA L. LANGHAM AVP, CHIEF CORP DEV OFFICER	AVP, CHIEF CORP DEV OFFICER 0 X 187,797. C								О	14,54	
7) CAROLYN A. LOFTUS AVP, DIR, PROGRAM SUPPORT	42.00					х		186,710.		0	37,635
8) PETER M. OYLOE CHIEF OF PARTY, INTEG NUTRTION	35.00 0					Х		194,249.		0	14,299
 1b Sub-total c Total from continuation sheets to Part VII, See d Total (add lines 1b and 1c)	imited to th		isted				re	ceived more than	\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu	er, directo	r, or	trus								Yes N
4 For any individual listed on line 1a, is the s organization and related organizations gre individual	ater than	\$15 • • • •	0,00		If 	"Yes,	," (complete Schedul	le J for	such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye Section B. Independent Contractors											5 X
 Complete this table for your five highest component compensation from the organization. Report converse. 											s tax
(A) - Name and business add	ſess						(B) Description of services			Co	(C) mpensation
2 Total number of independent contractors (in more than \$100,000 in compensation from the				ted	to	thos	e li:	sted above) who	received		

SAVE THE CHILDREN FEDERATION, INC. 06-0726487

(A) Name and title	(B) Average hours per week (list any hours for	box, office	not che unless rand a	perso a dire	re than o n is both ctor/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	organization and related organizations
<pre>) JANINE L. SCOLPINO AVP, MASS MARKET FUNDRAISING</pre>	50.00 0				x		203,500.		0 41,52
D) NANCY A. TAUSSIG AVP, FOUNDATION PARTNERSHIPS	42.00 0				X		212,128.		0 17,18
									•
									•
b Sub-total c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	ection A								
2 Total number of individuals (including but not reportable compensation from the organizatio	limited to t		listed			о ге	ceived more than	\$100,000 of	
B Did the organization list any former offic employee on line 1a? If "Yes," complete Sched.									Yes I 3
For any individual listed on line 1a, is the organization and related organizations grain individual	eater than	\$15	0,00	0?	lf "Yes	s,"	complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y Section B. Independent Contractors									5
Complete this table for your five highest com compensation from the organization. Report o year.									
(A) Name and business add	Iress						(B) Description of se	ervices	(C) Compensation
									•

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		Check if Schedule O co	ontains a reenor	ise or note to ar	v line in this Part \	////				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from under section 512-514		
3	1a	Federated campaigns	1a	466,108.						
	b	Membership dues								
	C	Fundraising events		2,384,665.		Alternation				
	d	Related organizations		196,978,964.						
	e f	Government grants (contributions, gifts,		190,970,904.	turin manager A	North Contractor and				
	•	and similar amounts not included		445,203,861.						
	g	Noncash contributions included i		107,600,123.		A State of the space	Winner			
	h	Total. Add lines 1a-1f	<u></u>	Business Code	645,033,598.					
	_	THE DOD OFFICE COMPAGE			10,169,580.	10,169,580.				
	2a ⊾	•FEE FOR SERVICE CONTRACTS MGMT FEE FROM AFFILIATED		624200 624200	557,865.	557,865.				
	b c	HOLL FILL FROM REFINIALED	<u></u>							
	d									
	e	• • • • • • • • • • • • • • • • • • •								
	f	All other program service rev	enue	L						
	g	Total. Add lines 2a-2f			10,727,445.					
	3	Investment income (inc and other similar amounts).	cluding dividen		2,550,932.			2,550,9		
	4	Income from investment of		L .	0					
	5	Royalties	<u></u>		0					
			(i) Real	(ii) Personal			All and All an	The second		
	6a	Gross rents					and and the			
	b c	Less: rental expenses								
		Net rental income or (loss) Gross amount from sales of assets other than inventory	d Net rental income or (los a Gross amount from sales of	d Net rental income or (loss)			0		ningeneren	(c) Arthrough (2010) (comparison of the state of the s
	d 7a			(i) Securities	(ii) Other					
			40,849,000.	50,609.		- Andrews				
	b	Less: cost or other basis								
		and sales expenses 33,83	33,837,213.	43,404.						
	c d	Gain or (loss)	7,011,787.	7,205.	7,018,992.			7,018,9		
	8a	Gross income from fundra			1101013321					
	va	events (not including \$2	-		AND NORMANNA P					
		of contributions reported on	line 1c).				67 V.0000			
		See Part IV, line 18		79,354.		And south states				
	b	·Less: direct expenses Net income or (loss) from fu			-271,738.			-271,7		
	с 9а	Gross income from gaming	•		2/11/130.					
	Ju	See Part IV, line 19					k Ab			
	b	Less: direct expenses					na zoroda			
	C	Net income or (loss) from g		· · · · · · •	0					
1	0a	Gross sales of invento		17,990.			anar Yana Mani			
	b	returns and allowances , a Less: cost of goods sold b		<u> </u>		Weinstein States of				
		Net income or (loss) from sal	es of inventory	🕨	1,788.		1,788.			
		Miscellaneous Reven	ue	Business Code			na _d ata ang bang bang bang bang bang bang bang			
1	1a	CONTRACT FEE REVENUE		624200	1,546,044.			1,546,0		
	b	SC MEMBER EQUITY COST REC	OVERY	624200	772,556.			772,5		
	C J	OTHER		624200	224,861.			224,8		
	d e	All other revenue		· · · · · · · •	2,543,461.		inger Then and	i wana ina ina ina ina ina ina ina ina ina		
1		Total revenue. See instructio			667,604,478.	10,727,445.	1,788.	11,841,6		

Form 990 (2014) SAVE THE CHILDREN FEDERATION, INC. 06-0726487 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). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations 28,007,839. 28,007,839 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 453,295,101. 453,295,101 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 5,950,982. 3,035,001 1,963,824. 952,157. 6 Compensation not included above, to disgualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 13,186. 13,186. 67,286,649. 48,976,602. 7,938,057. 10,371,990. 7 Other salaries and wages 8 Pension plan accruals and contributions (include 531,430. 341,509. 3,459,499 2,586,560. section 401(k) and 403(b) employer contributions) 23,630,304. 15,831,936. 3,681,970. 4,116,398. 9 Other employee benefits 193,821. 193,658 163. 11 Fees for services (non-employees): 10,977,885. 10,977,885. a Management 28,653. 230,066. 103,039. 98,374. b Legai 50. 525,410. 587,209. 61,749. c Accounting 230,704. 230,704. d Lobbying 5,973,218. 5,973,218. e Professional fundraising services. See Part IV, line 17, f Investment management fees 1,290,986. 49,392. 1,241,189. 405. g Other. (If line 11g amount exceeds 10% of line 25, column 10,409,028. 8,213,559. 638,683. 1,556,786. (A) amount, list line 11g expenses on Schedule O.). 1,311,158. 1,311,158. 2,622,316. 12 Advertising and promotion 5,624,524. 9,356,206. 2,700,298. 1,031,384. 404,499. 1,768,628. 918,692 445,437. 14 Information technology. 15 Royalties 3,878,895. 1,049,512. 766,031. 5,694,438. 16 Occupancy 655,582. 9,331,063. 8,054,529. 620,952. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 720. 9,157. 332,830. 322,953. Conferences, conventions, and meetings 19 20 Interest 2,307,681. 877,927. 958,501. 471,253. 22 Depreciation, depletion, and amortization 521,470. 659,685. 64,946. 73,269. 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 85,788. 19,742,461. 19,604,502. 52,171. aOTHER PROJECT COSTS

696. 892,628. 926,236. 32,912. bCREDIT_CARDS 138,957. 14,120. 333,916. 180,839. c MEMBERSHIPS 6,928,580. 3,169,583. 272,267. 3,486,730. dOTHER_____ e All other expenses _____ 32,042,607. 37,569,716. 671,540,517. 601,928,194. 25 Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here | if following SOP 98-2 (ASC 958-720) JSA Form 990 (2014)

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SAVE THE CHILDREN FEDERATION, INC.

Part	Х	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	<u>ırt X</u>	<u></u>	X
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	42,426,853.	1	22,663,651
	2	Savings and temporary cash investments	37,524,482.	2	22,075,001
	3	Pledges and grants receivable, net	67,072,912.	3	66,041,162
	4	Accounts receivable, net	(4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.		1.14	a de la composición d Esta de la composición
		Complete Part II of Schedule L		5	
		Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	n andra Maria Maria Maria Maria Maria Maria	6	ing the product of th
ssets	7	Notes and loans receivable, net	C	7	
S	8	Inventories for sale or use	11,338,314.	8	3,328,371.
1		Prepaid expenses and deferred charges	6,194,019.	9	6,266,542.
1	0 a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 22, 416, 299.			
	b	Less: accumulated depreciation	9,651,374.		9,030,184.
1·	1	Investments - publicly traded securities	39,316,087.	11	36,176,308.
1:	2	Investments - other securities. See Part IV, line 11	86,953,508.	12	96,590,453
1	3	Investments - program-related. See Part IV, line 11	C	13	
1	4	Intangible assets		14	
1	5	Other assets. See Part IV, line 11	16,004,716.	15	24,381,583.
1		Total assets. Add lines 1 through 15 (must equal line 34)	316,482,265.	16	286,553,255.
1	7	Accounts payable and accrued expenses	26,062,809.	17	31,551,160.
1	8	Grants payable	84,812,910.	18	56,584,125.
1		Deferred revenue	518,710.	19	177,599
20	0	Tax-exempt bond liabilities	0	20	
ຽ <mark>ສ</mark> 2 ⁻		Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
<u>=</u> 2:		Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and	a da		
-1		disqualified persons. Complete Part II of Schedule L	0		
2:		Secured mortgages and notes payable to unrelated third parties	0		
24		Unsecured notes and loans payable to unrelated third parties	0	24	(
2		Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	7 100 510		7 615 940
	•	of Schedule D	7,120,512.	25	7,615,840. 95,928,724.
_ 20			110, 514, 941.	26	95,920,124.
s		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.	litera de la composición de la composicinde la composición de la composición de la composición de la c		
ម្ព័ 27	7	Unrestricted net assets	126,687,480.	27	125,610,696.
r 21	8	Temporarily restricted net assets	42,029,482.	28	35,111,277.
29 29	9	Permanently restricted net assets	29,250,362.	29	29,902,558.
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ន្ឋ 30	0	Capital stock or trust principal, or current funds		30	
6 S	1	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets		Retained earnings, endowment, accumulated income, or other funds		32	
Tax 3:		Total net assets or fund balances	197,967,324.	33	190,624,531.
34	4	Total liabilities and net assets/fund balances	316,482,265.	34	286,553,255.

Form 990 (2014)

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	SAVE	THE	CHILDREN	FEDERATION,	INC
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	90 (2014)	_			Pa	je 12		
Par	XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI					X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		667 , 6				
2	Total expenses (must equal Part IX, column (A), line 25)	2	(671 , 5				
3	Revenue less expenses. Subtract line 2 from line 1	3		-3,9				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		197,9	67 , 3	24.		
5	Net unrealized gains (losses) on investments	5		-4,0	96,9	62.		
6	Donated services and use of facilities	6				0		
7	Investment expenses	7				0		
8	8 Prior period adjustments							
9	Other changes in net assets or fund balances (explain in Schedule O)	9		6	90,2	208.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				•			
	<u>33,</u> column (B))	10		190,6	24,5	31.		
Part						_		
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			i ta ta j				
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplair	n in					
	Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npilec	or					
	reviewed on a separate basis, consolidated basis, or both:					4.		
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were aud							
	separate basis, consolidated basis, or both:							
	Separate basis X Consolidated basis Both consolidated and separate basis			1. 1994	4 14 47 - 2.			
с	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight							
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?							
	If the organization changed either its oversight process or selection process during the tax year, o							
	Schedule O.							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t fort	h in			Į		
- •	the Single Audit Act and OMB Circular A-133?							
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo	the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3b	X			
					000			

Form 990 (2014)

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SCHEDULE A		Public Cha	arity Status a	nd Pu	blic S	Support	OMB No. 1545-0047					
(Form 990 or 990-EZ)			ganization is a section 947(a)(1) nonexempt c			ion or a section	2014					
Department of the Treasury			Attach to Form 990 or				Open to Public 90. Inspection					
Internal Revenue Service			(Form 990 or 990-EZ)	and its in	structions	s is at www.irs.gov/form9	tification number					
Name of the organization SAVE THE CHILDRI							-0726487					
			organizations must	complet	to this n	art.) See instructions						
The organization is not							• •••••••					
	•		ation of churches desc	-	-							
). (Attach Schedule E.		30011011							
			organization described		on 170/b)/1)/ A)/iii)						
	-		-			in section 170(b)(1)(A)	(iii). Enter the					
hospital's nam	-	-	conjunction mar a no	opnarae								
			a college or universi	tv owne	d or one	erated by a governme	ntal unit described in					
		Complete Part II.)		.,	p.							
			rnmental unit describe	ed in sec	tion 170	(b)(1)(A)(v).						
	· –	-				overnmental unit or fro	m the general public					
)(1)(A)(vi). (Comp	•	••	Ŭ							
			b)(1)(A)(vi). (Complet	e Part II.))							
9 🗌 An organizatio												
receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its												
support from	gross inves	tment income an	d unrelated busines	s taxable	e incom	e (less section 511	tax) from businesses					
acquired by th	e organizatio	on after June 30, 1	975. See section 509	(a)(2). (0	Complete	e Part III.)						
10 An organizatio	on organized	and operated excl	usively to test for publ	ic safety.	. See seo	ction 509(a)(4).						
	-	•	•	•		e functions of, or to car	• • •					
one or more p	ublicly suppo	orted organizations	described in section	509(a)(1	l) or sect	tion 509(a)(2). See sec	tion 509(a)(3). Check					
the box in line	s 11a throug	h 11d that describe	es the type of suppor	ting orga	inization	and complete lines 11e	, 11f, and 11g.					
a 🔄 Type I. A su	pporting org	anization operated	l, supervised, or conti	olled by	its supp	orted organization(s), f	typically by giving					
the supporte	ed organizatio	on(s) the power to	regularly appoint or	elect a m	najority c	of the directors or trust	ees of the supporting					
		omplete Part IV, S										
•	•• • •					s supported organizatio						
	-		-	the sam	ne persor	ns that control or mana	age the supported					
		-	, Sections A and C.									
	-					on with, and functional	y integrated with,					
	•		ns). You must comple		-							
						ection with its support						
		-				oution requirement and	an attentiveness					
			omplete Part IV, Sect				Ture III					
	-		tionally integrated sup			hat it is a Type I, Type II tion	, туре ш					
							[]					
			orted organization(s).	• • • • •			•••••					
(i) Name of supported of		(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Amount of monetary	(vi) Amount of					
.,	•		(described on lines 1-9		ur governing	support (see	other support (see					
			above or IRC section (see instructions))	docu	ment?	instructions)	instructions)					
				Yes	No							
(A)							···· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·					
(A)												
(B)												
·/												
(C)												

Total			
For Paperwork Reduction Act Notice, s Form 990 or 990-EZ.	see the Instruction	ns for	

(D)

(E)

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Schedule A (Form 990 or 990-EZ) 2014

SAVE THE CHILDREN FEDERATION, INC.

Schedule A (Form 990 or 990-EZ) 2014

 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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	529,965,504.	588,082,249.	559,696,304.	632,049,859.	645,033,598.	2,954,827,514.				
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0				
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0				
4	Total. Add lines 1 through 3	529,965,504.	588,082,249.	559,696,304.	632,049,859.	645,033,598.	2,954,827,514.				
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										
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.	n an			na na sua di su Manimali di Balancia		38,262,048.				
	tion B. Total Support				<u></u>		2,916,565,466.				
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total				
7	Amounts from line 4	529,965,504.	588,082,249.	559,696,304.	632,049,859.	645,033,598.	· · · · · · · · · · · · · · · · · · ·				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,315,698.	2,307,523.	1,804,115.	2,235,066.	2,550,932.					
9	Net income from unrelated business activities, whether or not the business is regularly carried on					1,788.	· 1,788.				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) • ATCH• 1 • • • •	1,236,455.	1,289,219.	3,575,655.	3,390,303.	2,543,461.	12,035,093.				
11	Total support. Add lines 7 through 10	· · · · · · · · · · · · · · · · · · ·	<u>Contraction of the second sec</u>			12	2,978,077,729. 40,264,514.				
12 13	Gross receipts from related activities, etc. (First five years. If the Form 990 is f organization, check this box and stop here	or the organiza	tion's first, secor	nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)				
<u>Sec</u>	tion C. Computation of Public Sup	· · · · · · · · · · · · · · · · · · ·				<u></u>					
14	Public support percentage for 2014 (I						97.93%				
15	Public support percentage from 2013						99.29%				
16a	331/3% support test - 2014. If the c	-					ore, check				
b	this box and stop here. The organization qualifies as a publicly supported organization										
172		•									
174	 7a 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 										
b	 b 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 										
18 	Private foundation. If the organization instructions	n did not check	a box on line 13	8, 16a, 16b, 17a	, or 17b, check	this box and se	e ►□				
					5	Schedule A (Form	990 or 990-EZ) 2014				

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Page **2**

Schedule A (Form 990 or 990-EZ) 2014

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 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.)

Sele.	tion A. Public Support	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	ndar year (or fiscal year beginning in)	(u) 2010		(0) 2012	(4) 2010	(0) 2011	(i) rotai
1	Gifts, grants, contributions, and membership fees						
2	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						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b.						
	Public support (Subtract line 7c from			- Adam (Adam)			
Ū	line 6.)				한 가지 않는		
Sec	tion B. Total Support			l	I	1	
	ndar year (or fiscal year beginning in) >	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6		<u> </u>				
	Gross income from interest, dividends,						
- u	payments received on securities loans,						
	rents, royalties and income from similar						
,				<u></u>			
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
1	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
2	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
						s a section 501(c	:)(3)
4	First five years. If the Form 990 is for	the organizatio	n's first, second.	third, fourth, or	fifth tax year a		
4	First five years. If the Form 990 is for	•			•	-	
	First five years. If the Form 990 is for organization, check this box and stop here.				•	-	
Sect	First five years. If the Form 990 is for organization, check this box and stop here. tion C. Computation of Public Sup	port Percenta			<u></u>	-	
Sect	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2014 (line 8,	port Percenta column (f) divide	age ed by line 13, colun	nn (f))			%
6	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2014 (line 8, Public support percentage from 2013 Sche	port Percenta , column (f) divide dule A, Part III, lir	age ed by line 13, colun ne 15	nn (f))		15	
Sect 5 6 Sect	First five years. If the Form 990 is for organization, check this box and stop here tion C. Computation of Public Sup Public support percentage for 2014 (line 8, Public support percentage from 2013 Sche tion D. Computation of Investmen	port Percenta , column (f) divide dule A, Part III, lir nt Income Per	age ad by line 13, colun he 15 centage	nn (f))		15 16	► % %
Sect 6 6 7	First five years. If the Form 990 is for organization, check this box and stop here. tion C. Computation of Public Sup Public support percentage for 2014 (line 8, Public support percentage from 2013 Sche tion D. Computation of Investment Investment income percentage for 2014 (line	port Percenta , column (f) divide dule A, Part III, lin t Income Per ne 10c, column (age ad by line 13, colun ae 15 centage f) divided by line 1	nn (f))		15 16 17	► % %
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(B) (4a Was "Yes b Did				
"Yes b Did	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. s any supported organization not organized in the United States ("foreign supported organization")? If	3c	, i.e.i dej.	
	s" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	n 1925 - N	
des	the organization have ultimate control and discretion in deciding whether to make grants to the foreign ported organization? If "Yes," describe in Part VI how the organization had such control and discretion spite being controlled or supervised by or in connection with its supported organizations.	4b	•	
und to e	the organization support any foreign supported organization that does not have an IRS determination ler sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) poses.	4c		
ans nun (iii)	the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," swer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and ElN nbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, the authority under the organization's organizing document authorizing such action, and (iv) how the action s accomplished (such as by amendment to the organizing document).	5a		
	be I or Type II only. Was any added or substituted supported organization part of a class already signated in the organization's organizing document?	5b	ere.	. :
6 Did any ben sup	ostitutions only. Was the substitution the result of an event beyond the organization's control? The organization provide support (whether in the form of grants or the provision of services or facilities) to yone other than (a) its supported organizations; (b) individuals that are part of the charitable class mefited by one or more of its supported organizations; or (c) other supporting organizations that also opport or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in</i> <i>t VI.</i>	5c		
con	the organization provide a grant, loan, compensation, or other similar payment to a substantial ntributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent ntrolled entity with regard to a substantial contributor? <i>If</i> "Yes," <i>complete Part I of Schedule L (Form 990).</i>	7		
	the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? Yes," complete Part I of Schedule L (Form 990).	8	a subspi	
disc	s the organization controlled directly or indirectly at any time during the tax year by one or more qualified persons as defined in section 4946 (other than foundation managers and organizations described section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	dis. Ti p.T	
	one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which supporting organization had an interest? <i>If</i> " <i>Yes</i> ," <i>provide detail in Part VI.</i>	9b		
	a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit m, assets in which the supporting organization also had an interest? <i>If</i> " <i>Yes</i> ," <i>provide detail in</i> Part VI .	9c		
(reg	is the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) garding certain Type II supporting organizations, and all Type III non-functionally integrated supporting anizations)? If "Yes," answer (b) below.	10a	a ta	
	the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to termine whether the organization had excess business holdings.)	10b		
A 29 2.000	Schedule A (Form	990 o	990-E	Z) 20

Eartive Supporting Organizations (continued) Yes No. 11 Has the organization accepted a gift or contribution from any of the following persons? Image: Control Contron Control Control Control Control Contron Control Control Control		le A (Form 990 or 990-EZ) 2014			Page 5
11 Has the organization accepted a gift or contribution from any of the following persons? A person who directly or influency controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? A Jather on the organization obsectived in (a) above? A abit of the comparization obsectived in (a) above? Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization adirectors or trustees at all times during the taxyear? If "No, describe in Part VI. Did the directors, trustees, or membership of one or more supported organization advector or controlled the organization and vhat conditions. If any, apported organization advector dorganization advector organization advectore organization advectore organization advector organization advec	Part	V Supporting Organizations (continued)		1	
 a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? If "Yes" to a, b, or c, provide defail in Part VI. c. A 35% controlled entity of a person described in (a) above? If "Yes" to a, b, or c, provide defail in Part VI. c. The person described in (a) above? If "Yes" to a, b, or c, provide defail in Part VI. c. A 35% controlled the organizations and the supported organization's directors or trustees at all times during the tax year? If "No," describe heapport in dynamization's directors or controlled the organization is activities. If the organization is directors or trustees at all times during the tax year? If "No," describe heapport and organization have the powers to again it and or tax person describe how the powers to appoint ador or paintaction's directors or trustees at all times during the tax year? If No, "describe heappoint ador organization have the powers to appoint ador or controlled the supporting organization and what controlled the supporting organization or paintaction's directors or trustees when the tax year. c) Did the organization's directors or trustees when the controlled or managed the supporting organization's apported organization's directors or trustees of each of the organization's apported organization's directors or trustees of each of the supporting organization's apported organization's directors or trustees and annount of support provided during the prior tax year, (2) a copy of the form 90 th tax wears or trustees when any of the organization's apported organization's directors or trustees and on indiccion. To the extern to previously acch chore and the supporting organization's directors or trustees and on only of the organization's directors or trustees and on indiccion? If No, "explain in Part VI how the organization's apported organization's directors ore tr				Yes	No
below, the governing body of a supported organization? b A family member of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide defail in Part VI. Section B. Type I Supporting Organizations Yes No controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide defail in Part VI. Section B. Type I Supporting Organizations Yes No controlled the organization software the organization fame fan one supported organization, describe how the powers to appoint or elect at least a majority of the organization fame fan one supported organization, describe how the powers to appoint and/or remove directors or trustees at all times during the supported organization operate for the benefit of any supported organization of the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization of the "standing" of the organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization operate for the benefit of any supported organization? If "so', "standin h Part Whow providing such benefit carted out the purposes of the supported organization? If "so', "standin here were a majority of the organization's directors or trustees during the tax year also a majority of the directors or mategoment of the supporting organization were a majority of the organization's directors or trustees during the tax year allo a majority of the directors or mategoment of the supporting organization were a majority of the organization's directors or trustees at an alloting the prior the supporting organization was wald in the same persons that controlled origin parts were any of the organization's directors or trustees of the date of onlifeation, and the supported organization and (3) copies of the supporting organi					19
b A family member of a person described in (a) above? If "Yes" to a, b, or c, provide dotait in Part VI. 11b Section B. Type I Supporting Organizations Yes 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all trues during the tax year? If 'No, 'describe hor Part VI how the supported organization's directors or trustees at all trues during the tax year? If 'No, 'describe hor Part VI how the supported organization and more than one supported organization, describe how the powers to applicit ador or restrictions, If any, applied to such powers during the lex year. 1 2 Did the organization is activities or restrictions, If any, applied to such powers during the lex year. 1 2 Did the organization for the benefit or any supported organization (s) that operated, supporting organization. 2 2 Did the organization granization's activities were analogity of the directors or trustees were analogity of the directors or trustees during the tax year. (1) were analogity of the organization's supported organization's were during the director and the supporting organization was weaked in the same persons that controlled or managed the arganization's supported organization's buy etal. (2) a copy of the Form 380 that was most freeority filed as of the difft month of the organization's supported organization's weeked organization's (2) a copy of the Form 380 that was most freeority filed as of the differation, and (3) copies of the organization's activities describing the type and amount of support provivoded during the prior tax year. (1) a writen note desc	а			1	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -
C A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 116 Section B. Type I Supporting Organizations Yes No Tregularly appoint or elect at least a majority of the organization's directors or trustees at all times during the taxyear? If "No," describe in Part VI how the supported organization directors or trustees at all times during the taxyear? If "No, "describe in Part VI how the supported organization apported organization, describe how the powers to appoint and/or remove directors or trustees at all times during the taxyear? If "No," describe in Part VI how the supported organization apported organization, describe how the powers to appoint and/or remove directors or trustees at all times during the supported organization parate for the benefit of any supported organization of the "supported organization" If "so," resplain IP art Whow providing such benefit caried out the purposes of the supported organization of the supported organization Supervised, or controlled the supporting Organizations Yes No The supporting Organizations Yes No The supporting Organizations Yes No The analogithy of the organization's directors or trustees during the support of organization the supporting organization was vasiled in the same persons that controlled or manage the supporting Organizations The organization's officers, or trustees either (1) apporting or explored organizations the organization's officers, or furstees either (1) apporting organizations the organization's directors, or trustees either (1) apporting organizations the organization's officers, or trustees either (1) apporting Organizations the organization's officers, or trustees either (1) apporting organizations the organization's officers, directors, or trustees either (1) apporting organization's supported organization's modernet policis and indidenting the use of the organization		below, the governing body of a supported organization?	11a		L
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Section B. Type I Supporting Organizations Yes No Description Two," describe hard how the power to any transfer the analysis of the organization and the supported organization and the support of the directors or trustees of each of the organization and the support provided during the prior tax year. (2) a copy of the form 400 that we most incently field as of the disc of influences of and the the form 400 that we most incently field as of the disc of influences of and the the and 400 that the supported organization and (1) supported organization and (2) a	C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
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Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		•
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or	6		
maintenance of property held for production of income (see instructions)	7		
7 Other expenses (see instructions)			-
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) Section B - Minimum Asset Amount	8	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a	·	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		•
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	es pagina changes (
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	ladinia, dimila	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		•
7 Check here if the current year is the organization's first as a non-functional instructions)	y-integ	grated Type III supporting of	organization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2014

Sched Part	ule A (Form 990 or 990-EZ) 2014 V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organizat	tions (continued)	Page
	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		
2	Amounts paid to perform activity that directly furthers exe		ed	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purple	oses of supported organi	zations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is resp	onsive	
	(provide details in Part VI). See instructions.	•		
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	<u></u>		
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6		· · ·	
2	Underdistributions, if any, for years prior to 2014			Prince Britter
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			e de la composición d
а				
b				
с				
d				
e	From 2013		li di tang	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			· · · ·
h	Applied to 2014 distributable amount	1.00		
i	Carryover from 2009 not applied (see instructions)		· · · · · · · · · · · · · · · · · · ·	
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section			
	D, line 7: \$			
а	Applied to underdistributions of prior years			
b				
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if		<u> </u>	
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			e a la seconda de la second
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.		in the second	
8	Breakdown of line 7:			
a				
b			and and a second se Second second	
d	Excess from 2013			
е	Excess from 2014		- <u>-</u>	A (Earm 000 at 000 EZ) 201

Schedule A (Form 990 or 990-EZ) 2014

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Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. 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).

SCHEDULE A, PART II -	OTHER INCOM	E			ATTACHMENT	1
DESCRIPTION	2010	2011	2012	2013	2014	TOTAL
MISCELLANEOUS RECEIPTS	655,074.	447,772.	1,475,721.	233,969.	224,861.	3,037,397.
FUNDRAISING INCOME	35,243.	20,105.		2,824.		58,172.
COURSE AND SEMINAR FEES	100,155.					100,155.
SC MEMBER EQUITABLE COST RECOV	445,983.	800,097.	1,263,597.	1,373,556.	772,556.	4,655,789.
CONTRACT FEE INCOME		21,245.	529,772.	534,813.	1,546,044.	2,631,874.
INSURANCE CLAIMS RECOVERY			306,565.	1,245,141.		1,551,706.
TOTALS	1,236,455.	1,289,219.	3,575,655	3, 390, 303	2,543,461.	12,035,093.

Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No. 1545-0047
or 990-PF) Department of the Treasury Internal Revenue Service	 Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/fit 	form990.	2014
Name of the organization	n	Employe	r identification number
SAVE THE CHILDE	EN FEDERATION, INC.		
		06-0	726487
Organization type (ch	eck one):		
Filers of:	Section:		
Form 990 or 990-EZ	\mathbf{X} 501(c)(⁰³) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private found	dation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
·	4947(a)(1) nonexempt charitable trust treated as a private foundatio	on	

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.

501(c)(3) taxable private foundation

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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) (2014)

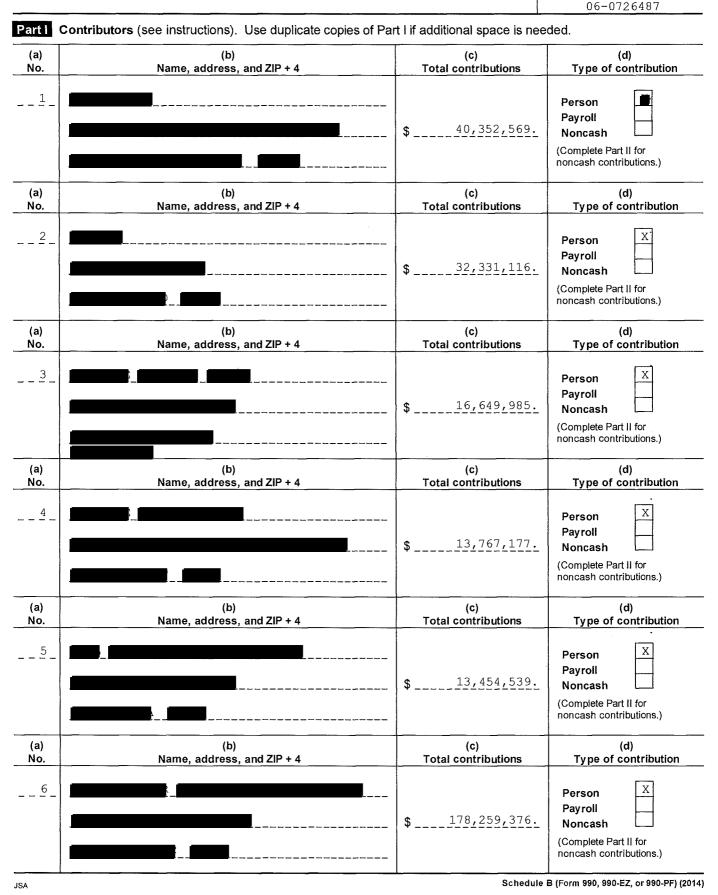
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Name of organization SAVE THE CHILDREN FEDERATION, INC.

Page **2**

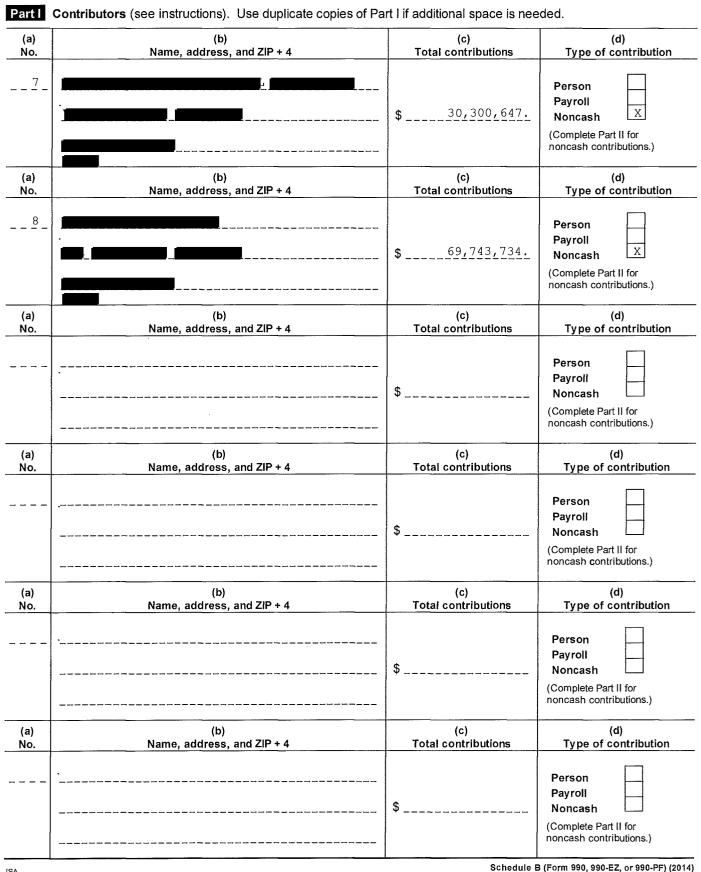
Employer identification number



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Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization SAVE THE CHILDREN FEDERATION, INC.



Page 2

Employer identification number 06-0726487

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization SAVE THE CHILDREN FEDERATION, INC.

Page 3

Employer identification number 06-0726487

art II Nonca	ash Property (see instructions). Use duplicate copies	of Part II if additional space is nee	aea.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7		\$30,300,647.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8		\$69,743,734.	_VAR
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date reçeived
		 \$	

JSA 4E1254 1.000 1237AH 2219 Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

	(Form 990, 990-EZ, or 990-PF) (2014) rganization SAVE THE CHILDREN FEDER			Page Employer identification number
	Generation SAVE INE CHILDREN FEDER	AITON, INC.		06-0726487
Part III	Exclusively religious, charitable, etc., that total more than \$1,000 for the ye following line entry. For organizations of contributions of \$1,000 or less for the Use duplicate copies of Part III if additio	ear from any one o completing Part III, year. (Enter this in	contributor. Compl enter the total of <i>e.</i> formation once. Se	ribed in section 501(c)(7), (8), or (10 ete columns (a) through (e) and the x <i>clusively</i> religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, and	ZIP + 4	Relation	ship 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) Transfe		
	Transferee's name, address, and	ZIP + 4	Relation	ship 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) Transfe	er of gift	
	Transferee's name, address, and	ZIP + 4	Relation:	ship 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) Transfe	er of gift	
	Transferee's name, address, and	ZIP + 4	Relations	ship of transferor to transferee

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign	and Lobbying	Activities	OMB No. 1545-0047
,,	For Organizations Exempt From Inco	ne Tax Under sectio	n 501(c) and section 527	2014
Department of the Treasury Internal Revenue Service	 Complete if the organization is described b Information about Schedule C (Form 990 or 		o Form 990 or Form 990-EZ. tions is at <i>www.irs.gov/form</i> 9	
	rered "Yes," to Form 990, Part IV, line 3, or Form rganizations: Complete Parts I-A and B. Do not com		(Political Campaign Activities), then
	er than section 501(c)(3)) organizations: Complete	Parts I-A and C below. D	o not complete Part I-B.	
-	ations: Complete Part I-A only.	000 EZ Det VI line 47	(Labbuing Astivities) then	
	rered "Yes," to Form 990, Part IV, line 4, or Form rganizations that have filed Form 5768 (election u			te Part II-B.
	rganizations that have NOT filed Form 5768 (elect			
If the organization answ Tax) (see separate instru	vered "Yes," to Form 990, Part IV, line 5 (Proxy	/ ⊤ax) (see separate in	structions) or Form 990-EZ,	Part V, line 35c (Proxy
	5), or (6) organizations: Complete Part III.			
Name of organization			Employer identil	ication number
	EN FEDERATION, INC.		06-0726	
	te if the organization is exempt under			ation.
	otion of the organization's direct and indirect			
	ures			
3 Volunteer hours.	•••••••		••••••	
Part I-B Comple	te if the organization is exempt under	section 501(c)(3).		
	t of any excise tax incurred by the organization		5▶\$	
	t of any excise tax incurred by organization n			
	n incurred a section 4955 tax, did it file Form			
	made? ,			. Yes No
b If "Yes," describe	in Part IV.			
	ete if the organization is exempt under			•
	t directly expended by the filing organization			
	t of the filing organization's funds contribute			
527 exempt func	tion activities		▶\$	
line 17b	nction expenditures. Add lines 1 and 2. E		···· ▶\$	
5 Enter the names organization mad the amount of pe	anization file Form 1120-POL for this year? , addresses and employer identification num de payments. For each organization listed, e olitical contributions received that were pro- gregated fund or a political action committee	ber (EIN) of all section nter the amount paion nptly and directly de	on 527 political organization I from the filing organizat livered to a separate politi	ion's funds. Also enter cal organization, such
(a) Name	(b) Address	(c) EIN	funds. If none, enter -0	(e) Amount of political ontributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)		_		•
(2)		_		
(3)				
(4)				
(5)				
(6)				·
For Paperwork Reduction	on Act Notice, see the Instructions for Form 990	or 990-EZ.	Schedule C	; (Form 990 or 990-EZ) 2014

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c Total lobbying expenditures (add lines 1a and 1b)	
---	--

d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (ad	d lines 1c and 1d)				
f	Lobbying nontaxable amount. Enter th	e amount from the following table in both				
	columns.	- -				
	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.	Brahel	- Alerander		
	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.			, jana sabaha	
	Over \$17,000,000	\$1,000,000.			<u></u>	1.1
g	Grassroots nontaxable amount (enter 25	5% of line 1f)				
h	Subtract line 1g from line 1a. If zero or le	ess, enter -0				
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-				
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	ation file Form	1 4720		
	reporting section 4911 tax for this year?				Yes	No

reporting section 4911 tax for this year?

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
2a Lobbying nontaxable amount							
b Lobbying ceiling amount (150% of line 2a, column (e))							
c Total lobbying expenditures							
d Grassroots nontaxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))							
f Grassroots lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2014

2523569

(b) Affiliated

group totals

(a) Filing

organization's totals

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred.)

1a Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying)

Part II-A	Compl	ete il	f the	orga
	section	n 501	(h)).	-

B Check ►

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's A Check ► name, address, EIN, expenses, and share of excess lobbying expenditures).

if the filing organization checked box A and "limited control" provisions apply.

Sche	dule C (Form 990 or 990-EZ) 2014		00	-072	5407	F	Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d Foi	m 576	8		
For			a)	(b)			
For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.					Amount		
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						en e E
a L	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				n en	
b	Paul stall of management (include compensation in expenses reported on lines 1c through 1)?	<u> </u>	x	linn e e		•	
c d	Media advertisements?		X				
u e	Mailings to members, legislators, or the public?		X				
f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?	X				184	,048.
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X					,298
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X					,943
i		X		96,156			
i	Other activities? Total. Add lines 1c through 1i	<u> </u>		<u> </u>			,445
, 2а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	552,445			
b	If "Yes," enter the amount of any tax incurred under section 4912	1-1-1-1-1				•	
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912						
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ľ	X		and a start		
Ра	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5), or :	sectio	า		
						Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				1		
2							
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				-		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."					3, is	
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou						
	political expenses for which the section 527(f) tax was paid).						
а	Current year			2a			
b	Carryover from last year			2b			
С	Total			2c		•	

3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		[
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	_

Supplemental Information Part IV

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information. .

SEE PAGE 4

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Schedule C (Form 990 or 990-EZ) 2014 Part IV Supplemental Information (continued)	Page 4
SCHEDULE C, PART II-B, LINE 1G, H, AND I	
SAVE THE CHILDREN FEDERATION, INC. (SCUS) ORGANIZED EVENTS, ENGAGED IN	
DIRECT CONTACT WITH LEGISLATORS OR THEIR STAFF, AND PUBLISHED MATERIALS	
RELATED TO THE FOLLOWING FEDERAL LEGISLATION IN 2014:	
* 21ST CENTURY GLOBAL HEALTH TECHNOLOGY ACT (H.R. 1515);	
* FY14, FY15 AND FY16 APPROPRIATIONS;	
* SAFE IN SCHOOLS ACT (H.R. 3158);	
* SENATE CHILD CARE AND DEVELOPMENT BLOCK GRANT REAUTHORIZATION (S.	
1086);	
* STRONG START FOR AMERICA'S CHILDREN ACT OF 2013 (H.R. 3461/S. 1697);	
* PEPFAR STEWARDSHIP AND OVERSIGHT ACT OF 2013 (H.R. 3177);	
* ACCELERATING ACTION IN MATERNAL AND CHILD HEALTH ACT (S. 2853);	
* SOCIAL IMPACT BOND (H.R. 4885);	
* THE PAY FOR PERFORMANCE ACT (S.2691)	
* AGRICULTURE ACT OF 2014 (THE FARM BILL) (H.R. 2642);	
* FY15 STATE-FOREIGN OPERATIONS APPROPRIATIONS BILL	
* HUMANITARIAN ASSISTANCE FACILITATION ACT (H.R. 3526);	
* SYRIAN HUMANITARIAN RESOLUTION OF 2014 (S. RES. 384);	
* THE INTERNATIONAL CONFLICTS OF CONCERN ACT (H.R. 4223);	
* CHILD CARE AND DEVELOPMENT BLOCK GRANT ACT OF 2014 (S.1086);	
* EDUCATION FOR ALL ACT OF 2013 (H.R. 2780);	
* GLOBAL FOOD SECURITY ACT OF 2014 (S. 2909/H.R. 5656)	
SCUS ALSO PROVIDED FUNDING FOR LOBBYING EFFORTS IN A NUMBER OF STATES	

RELATED TO EDUCATION PROGRAMS (E.G. HOME VISITATION AND AFTERSCHOOL

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Schedule C (Form 990 or 990-EZ) 2014

Part IV Supplemental Information (continued)

Page 4

LITERACY), EMERGENCY PREPAREDNESS, AND CHILDREN'S HEALTH ISSUES, AS

FOLLOWS:

* ALABAMA: SENATE BILL 143 AND ALABAMA HOUSE BILL 166 (EDUCATION PROGRAM

FUNDING);

- * ARKANSAS: HOUSE BILL 1159 (EDUCATION PROGRAM FUNDING);
- * COLORADO: FY 2013-2014 BUDGET (EDUCATION PROGRAM FUNDING);
- * CONNECTICUT: HOUSE BILL NO. 6704 (CHILDREN'S HEALTH ISSUES);
- * GEORGIA: HOUSE BILLS 138, 181, AND 382 AND SENATE BILL 12 (CHILDREN'S

HEALTH ISSUES);

- * IOWA: SF 473, PRESCHOOL EXPANSION AND SSB 1199, LEGISLATION TO STUDY SOCIAL IMPACT BONDS
- * KANSAS: SENATE BILL 171 (EDUCATION PROGRAM FUNDING);
- * LOUISIANA: HOUSE BILL 1 (EDUCATION PROGRAM FUNDING);
- * MAINE: HP1229/LD 1719 (CHILDREN'S HEALTH ISSUES);
- * MISSISSIPPI: FISCAL YEAR 2014 BUDGET (EDUCATION PROGRAM FUNDING) AND HB
- 798 (CHILDREN'S HEALTH ISSUES);
- * NEVADA: BASN210 (EDUCATION PROGRAM FUNDING);
- * NEW HAMPSHIRE: SB 69, THE SOCIAL IMPACT BOND COMMISSION
- * OREGON: HOUSE BILL 2649(CHILDREN'S HEALTH ISSUES);
- * SOUTH CAROLINA: HOUSE BILL 3710 (EDUCATION FUNDING) AND SENATE BILLS

191 AND 599 (CHILDREN'S HEALTH ISSUES);

* TENNESSEE: SENATE BILL 1302 /HOUSE BILL 1163 (EMERGENCY PREPAREDNESS),

HOUSE BILL 2343 (CHILDREN'S HEALTH ISSUES), AND HOUSE BILL 502 (EDUCATION PROGRAM FUNDING);

* TEXAS: HOUSE BILLS217, 275, 277, AND 1018 AND SENATE BILLS 376, 1785,

Page 4

Schedule C (Form 990 or 990-EZ) 2014

.

Part IV Supplemental Information (continued)

AND 1786 (CHILDREN'S HEALTH ISSUES); AND

* WASHINGTON: WASHINGTON'S EARLY START ACT (HB 1491 AND SB 5452) &

PROPOSITION 1B IN SEATTLE

* WEST VIRGINIA: HOUSE BILL 2014 (EDUCATION PROGRAM FUNDING).

SCUS TRACKS ALL EXPENSES RELATED TO THESE LOBBYING ACTIVITIES, AND THOSE EXPENSES ARE REFLECTED IN SECTION II-B OF THIS SCHEDULE.

SCHEDULE C, PART II-B, LINE 1F

SCUS MADE A GRANT TO SAVE THE CHILDREN ACTION NETWORK, A PORTION OF WHICH WAS USED TO SUPPORT LOBBYING ACTIVITIES.

	CHEDULE D Form 990) ► 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.					OMB No. 1545-0047
(FO						2014
		2b.	Open to Public			
	artment of the Treasury nal Revenue Service	Information about Schedule	Attach to Form 990. D (Form 990) and its instruction	ctions is at www.irs.g	gov/form990.	Inspection
	e of the organization		<u> </u>		Employer identifica	
SAV	VE THE CHILDRE	N FEDERATION, INC.			06-072648	37
Pa		tions Maintaining Donor Adv			Accounts.	
	Complete	if the organization answered				
			(a) Donor advise	d funds	(b) Funds and	other accounts
1		nd of year				
2 3	-	f contributions to (during year) f grants from (during year)				
4		t end of year.				•
5		on inform all donors and donor	advisors in writing that	the assets held in	n donor advised	
		nization's property, subject to the				Yes No
6	-	on inform all grantees, donors, a				
	-	purposes and not for the bene				
		issible private benefit?	<u> </u>		<u> </u>	Yes No
Pa		tion Easements. if the organization answered	"Ves" to Form 990 Pa	art IV line 7		
1		servation easements held by the				
-		n of land for public use (e.g., rec			f a historically im	portant land area
		of natural habitat	, ,		f a certified histo	
	Preservatio	n of open space				
2		through 2d if the organization he	eld a qualified conservat	ion contribution in <u>t</u>		
		ast day of the tax year.				End of the Tax Year
а		onservation easements		F F F F	2a	
b	-	tricted by conservation easements		1	2b 2c	
c d		vation easements on a certified rvation easements included in (o			20	
u		isted in the National Register.	• •		2d	
3		rvation easements modified, trar				ization during the
					, <u>.</u>	0
4		where property subject to conse	rvation easement is locat	ed 🕨		
5		ation have a written policy re				
		orcement of the conservation ea				Yes I No
6	Staff and voluntee	r hours devoted to monitoring, ir	specting, and enforcing	conservation ease	ments during the	year
7	Amount of ovnono	es incurred in monitoring, inspec	ting and anforcing cons	oruction accoment	a during the year	
'	►\$		and emotioning cons	ervation easement	is during the year	
8	Does each conser	vation easement reported on lin	e 2(d) above satisfy the	requirements of sec	tion 170(h)(4)(B)(i)
)(4)(B)(ii)?				
9	In Part XIII, descri	be how the organization reports	conservation easements	in its revenue and	expense statemer	nt, and
		d include, if applicable, the text o		anization's financia	al statements that	describes the
De		ounting for conservation easeme tions Maintaining Collections		ourse or Other	Similar Acceto	· · · · · · · · · · · · · · · · · · ·
Pa		if the organization answered			Similar Assets.	
		= 7			venue statemen	t and balance sheet
Ta	works of art, hist	n elected, as permitted under Sl orical treasures, or other simila vide, in Part XIII, the text of the fo	ar assets held for publi	c exhibition, educ	ation, or researc	h in furtherance of
ь.						
b	works of art, hist	n elected, as permitted under a orical treasures, or other simila	ar assets held for publi	c report in its rev c exhibition, educa	venue statement ation, or researc	the in furtherance of
	public service, pro	vide the following amounts relat	ing to these items:			
	(i) Revenue inclu	ded in Form 990, Part VIII, line 1			ト	
		d in Form 990, Part X				
2		n received or held works of a				al gain, provide the
~		required to be reported under S in Form 990, Part VIII, line 1				•
a b		Form 990, Part X				
For		Act Notice, see the Instructions fo				edule D (Form 990) 2014
JSA 4E12	68 1.000					
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Sche							Page 2
Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical	Treasures,	, or Oth	er Similar Asse	ts (continued)
3 a	collection items (check all that app		d 🗌 Loa	n or exchang	e program	IS	
		rations					
-			and explain how	, they furthe	r the ora-	anization's evemn	t nurnose in Part
4				a they furthe	a the orga		
5		on solicit or receive (ionations of art hi	etorical troas		thar similar	
9							
Da							
rai		•			Swerea		o, i arciv, into o,
			<u>, into 21.</u>				
1a	Is the organization an agent, truste	e. custodian or othe	er intermediarv fo	- contribution	s or other	assets not	
14						r	Yes No
h	If "Yes " explain the arrangement i	n Part XIII and com	lete the following	able:			
~	n ree, explain the analigement,					Amount	
с	Beginning balance			10	:		
	• •					10-14 10-14	
		1			1		
f							
2.a						ccount liability?	Yes No
-							· · · · · · · · · · · · · · · · · · ·
1 01							(e) Four years back
1a	Beginning of year balance					107,564,982.	89,333,802.
							15,991,237.
			· · · · ·				
-		3,628,220.	16,923,781	. 12,323	3,762.	-1,300,932.	6,703,783.
d							
					,		
•	•	2,180,000.					
f			56,000	. 55	5,861.	2,381,187.	86,378.
-							<u> </u>
				J, ()	,		
b			-				
c							
			0 0%.				
3a	• -			at are held ar	nd adminis	stered for the	
	organization by:						Yes No
	(i) unrelated organizations						3a(i) X
							3a(ii) X
b							3b
4	Describe in Part XIII the intended u	uses of the organiza	tion's endowment	funds.			L
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection times (check all that apply): a b b collection times (check all that apply): a collection to the organization's collections and explain how they further the organization's osempt purpose in Part XII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be old to raise functions rather than to be maintained as part of the organization's collection? cor reported an amount on Form 900, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part XIII and complete the following table: d d Amount d Beginning balance d Contrastion shurp the year. d If Yea," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. d Contrastion include an amount on Form 900, Part X, line 21, for secrow or custodial account liability? d Yea, "applain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. d Contrastion should any cancel and explanation. d Contrastion should any cancel any explanation. d Contrastive explanatin Part XIII. Check here if the explanation has been pro						
	Complete if the organiza				11a. See	e Form 990, Par	
	Description of property	(a) Cost or (inves	iment)		(C) Accu deprec	ciation (C	1) Book value
1a	Land			1,600.			1,600.
b							
с				538,810.			283,166.
d	Equipment		20	,301,456.	12,24	5,437.	8,056,019.
	Other				88	5,034.	689,399.
Tota	I. Add lines 1a through 1e. (Column	(d) must equal Forn	n 990, Part X, colui	mn (B), line 1	0(c).) <u></u>		9,030,184.
							ule D (Form 990) 2014

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Page 3

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		•
Closely-held equity interests		
Other		
(A) COMMON COLLECTIVE TRUST FUNDS	24,737,258.	FMV
(B) PUBLIC EQUITY - HEDGE FUNDS	40,301,623.	FMV
(C) HEDGE FUNDS	30,433,283.	FMV
(D) REAL ESTATE INVESTMENT TRUSTS	374,989.	FMV
(E) PRIVATE EQUITY	743,300.	FMV
	743,300.	F MV
(F)		· · · · ·
(G)		P
(H)	0.0 500 450	and the second
al. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	96,590,453.	
art VIII Investments - Program Related. Complete if the organization answered "Y	es" to Form 990,	Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation:
		Cost or end-of-year market value
1)		
2)		······································
3)		
4)		
5)		
6)		
7)		
8)	4) 1, m mm m	
9)		
tal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		
art IX Other Assets.		······
	es" to Form 990	Part IV, line 11d. See Form 990, Part X, line 15.
		(b) Book value
(a) Descrip 1) BENEFICIAL INTEREST IN		
		1 702 00
2) PERPETUAL TRUST		1,723,90
		159,30
4) CHARITABLE GIFT ANNUITIES		159,30
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN		159,30 2,845,85
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN		159,30 2,845,85
4)CHARITABLE GIFT ANNUITIES 5)DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI")		159,30 2,845,85 17,651,21
4)CHARITABLE GIFT ANNUITIES 5)DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7)DUE FROM SCUS HEAD START		159,30 2,845,85 17,651,21
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN		159,30 2,845,85 17,651,21 1,946,92 54,38
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN")	15.)	159,30 2,845,85 17,651,21 1,946,92 54,38
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X		159,30 2,845,85 17,651,21 1,946,92 54,38
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y 		159, 30 2,845,85 17,651,21 1,946,92 54,38 ► 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X,
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 	es" to Form 990,	159, 30 2,845,85 17,651,21 1,946,92 54,38 ► 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X,
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 	es" to Form 990, (b) Book valu	159,30 2,845,85 17,651,21 1,946,92 54,38 <▶
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 	(b) Book valu	159,30 2,845,85 17,651,21 1,946,92 54,38 24,381,56 Part IV, line 11e or 11f. See Form 990, Part X, e 558.
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 	es" to Form 990, (b) Book valu	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558.
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 	(b) Book valu 2,236,5 5,139,2	159,30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297.
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 	(b) Book valu	159,30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297.
 4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 	(b) Book valu 2,236,5 5,139,2	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297.
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 7)	(b) Book valu 2,236,5 5,139,2	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297.
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 7) 8)	(b) Book valu 2,236,5 5,139,2	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297.
7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 7) 8) 9)	(b) Book valu 2,236,3 5,139,2 239,5	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297. 985.
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 7) 8)	(b) Book valu 2,236,5 5,139,2	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297. 985.
4) CHARITABLE GIFT ANNUITIES 5) DUE FROM SAVE THE CHILDREN 6) INTERNATIONAL ("SCI") 7) DUE FROM SCUS HEAD START 8) DUE FROM SAVE THE CHILDREN 9) ACTION NETWORK ("SCAN") tal. (Column (b) must equal Form 990, Part X, col. (B) line art X Other Liabilities. Complete if the organization answered "Y line 25. (a) Description of liability 1) Federal income taxes 2) ACCRUED SEVERANCE 3) POST RETIREMENT BENEFITS OTHER 4) THAN PENSION 5) LOAN PROGRAM FUND ASSETS HELD 6) IN TRUST BY OTHER 7) 8) 9)	(b) Book valu 2,236, 5,139,2 239,2 7,615,8 t of the footnote to	159, 30 2,845,85 17,651,21 1,946,92 54,38 24,381,58 Part IV, line 11e or 11f. See Form 990, Part X, e 558. 297. 385. 340. he organization's financial statements that reports the

SAVE	THE	CHILDREN	FEDERATION,	INC.	

Schedu	le D (Form 990) 2014		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	687,388,881.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -4,096,962.		
b	Donated services and use of facilities 2b 11,505,381.		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) 2d 15,892,565.	ea lu	
е	Add lines 2a through 2d	2 e	23,300,984.
3	Subtract line 2e from line 1	3	664,087,897.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	. 5	· · · · · · · · · · · · · · · · · · ·
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,051,000.		
b	Other (Describe in Part XIII.) 4b 2,465,581.		
с	Add lines 4a and 4b	4c	3,516,581.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	667,604,478.
Part		rn.	-
<u> </u>	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	693,206,527.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a ,	Donated services and use of facilities		
b	Prior year adjustments	5 F.	
c	Other losses 2c		
d	Other (Describe in Part XIII.) Add lines 2a through 2d		05 400 000
e		2e	25,492,200.
3	Subtract line 2e from line 1	3	667,714,327.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) 4b 2,775,190.		2 006 100
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	4c	3,826,190.
5		5	671,540,517.
Part	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	rt V 1	ine 4 [.] Part X line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

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JSA

SCHEDULE D, PART V, LINE 4

THE POLICY GOVERNING THE INVESTMENT OF SCUS'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 SCUS'S BOARD OF TRUSTEES (4.5% FOR 2014 AND 2013 OF THE ENDOWMENT'S MOVING AVERAGE FAIR VALUE OVER THE PRIOR 12 QUARTERS FROM JUNE 30 OF THE PREVIOUS FISCAL YEAR IN WHICH THE DISTRIBUTION IS PLANNED (E.G. AVERAGE OF BALANCES JULY 1, 2010 – JUNE 30, 2013 FOR 2014); AND TO SUPPORT SCUS 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.

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), 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, SCUS IS ALSO EXEMPT FROM STATE AND LOCAL INCOME TAXES. HEAD START APPLIED FOR EXEMPTION FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE CODE AND RECEIVED ITS TAX DETERMINATION LETTER ON MAY 9, 2013, WHICH WAS EFFECTIVE RETROACTIVELY TO OCTOBER 24, 2011. EFFECTIVE MARCH 11, 2014, THE INTERNAL REVENUE SERVICE DETERMINED THAT SCAN IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(4) OF THE CODE.

THE ORGANIZATION FOLLOWS GUIDANCE OF ACCOUNTING STANDARDS CODIFICATION

Schedule D (Form 990) 2014 SAVE THE CHILDREN FEDERATION, INC. Part XIII Supplemental Information (continued)

(ASC) 740, 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 TAKEN IN A TAX RETURN. THE ORGANIZATION BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS.

SCHEDULE D, PART XI, LINE 2D RELATED ENTITY REVENUE 16,482,824 SALE OF FIXED ASSETS 26,329 CURRENCY GAIN/LOSS (116,588) RECLASS OF RENTAL EXPENSES (500,000)

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SCHEDULE D, PART XI, LINE 4B	
MANAGEMENT FEES FROM HEAD START	557,685
SPECIAL EVENT EXPENSES	(351,092)
CATALOG EXPENSES	(16,202)
GRANT TO SUBSIDIARY	2,275,190
TOTAL	2,465,581

SCHEDULE D, PART XII, LINE 2DSALE OF FIXED ASSETS26,329RELATED ENTITY EXPENSES14,957,677CATALOG EXPENSES16,202SPECIAL EVENT EXPENSES351,092

Schedule D (Form 990) 2014

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Schedule D (Form 990) 2014 SAVE	THE CHILDREN FEDERATION, INC.	06-
Part XIII Supplemental Information	n (continued)	
FOREIGN EXCHANGE GAIN	(1,364,481)	
TOTAL	13,986,819	
SCHEDULE D, PART XII, LINE 4E	3	
GRANT TO SUBSIDIARY	2,275,190	
RECLASS OF RENTAL EXPENSES	500,000	
TOTAL	2,775,190	

Schedule D (Form 990) 2014

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SCHEDULE F	Statement of Activities Outside the United St	ates	OMB No. 1545-0047	
(Form 990)	Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, Attach to Form 990.	15, or 16.	2014	
Department of the Treasury Internal Revenue Service	 Attach to Form 990. Information about Schedule F (Form 990) and its instructions is at www.irs.gov/f 		Open to Public Inspection	
Name of the organization		Employer ide	entification number	
SAVE THE CHILDRE	EN FEDERATION, INC.	06-072	6487	
	nformation on Activities Outside the United States. Complete if the org Part IV, line 14b.	anization a	inswered "Yes" on	
assistance, the gr	Does the organization maintain records to substantiate the amount of its grant antees' eligibility for the grants or assistance, and the selection criteria used to be?	award the		
-	. Describe in Part V the organization's procedures for monitoring the use the United States.	e of its gra	nts and other	
3 Activities per Reg	ion. (The following Part I, line 3 table can be duplicated if additional space is ne	eded.)		

(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	1.	1.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	2,054,586.
(2) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	GRANTS TO SCI	7,306,230.
(3) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	RELIEF AND DEVELOPMENT	9,298,830.
(4) EAST ASIA AND THE PACIFIC			GRANTMAKING	GRANTS TO SCI	56,421,983.
(5) EUROPE		2.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	1,937,539.
(6) EUROPE			GRANTMAKING	GRANTS TO SCI	11,465,458
(7) MIDDLE EAST AND NORTH AFRICA		2,	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	873,567.
(8) MIDDLE EAST AND NORTH AFRICA			GRANTMAKING	GRANTS TO SCI	79,032,734
(9) NORTH AMERICA		1.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	93,448.
(10) NORTH AMERICA			GRANTMAKING	GRANTS TO SCI	427,656.
(11) RUSSIA/INDEPENDENT STATES			GRANTMAKING	GRANTS TO SCI	1,313,730.
(12) SOUTH AMERICA			GRANTMAKING	GRANTS TO SCI	4,945,038.
(13) SOUTH ASIA	1.	11.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	8,979,088.
(14) SOUTH ASIA			GRANTMAKING	GRANTS TO SCI	80,096,937.
(15) SUB-SAHARAN AFRICA	1.	11.	PROGRAM SERVICES	RELIEF AND DEVELOPMENT	6,123,031.
(16) SUB-SAHARAN AFRICA			GRANTMAKING	GRANTS TO SCI	133,909,077.
(17) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	FOOD AID - GUATEMALA	2,883,333.
3a Sub-total b Total from continuation	3.	28.			407,162,265.
b Total from continuation sheets to Part I					46,747,084.
c Totals (add lines 3a and 3b)	3.	28,			453,909,349.
For Paperwork Reduction Act Notice, see	the Instructions	s for Form 990.		Schedule	F (Form 990) 2014

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 4E1274 1.000 1237AH 2219 V 14

SCHEDULE F (Form 990) Statement of Activities Outside the United > Complete if the organization answered "Yes" on Form 990, Part IV, line 1 > Attach to Form 990. > Information about Schedule F (Form 990) and its instructions is at www.irs		5, or 16.	OMB No. 1545-0047 2014 Open to Public Inspection
Name of the organization		Employer iden	tification number
SAVE THE CHILDRE	N FEDERATION, INC.	06-0726	487
	nformation on Activities Outside the United States. Complete if the org. Part IV, line 14b.	anization an	swered "Yes" on
•	Does the organization maintain records to substantiate the amount of its grants antees' eligibility for the grants or assistance, and the selection criteria used to e?	award the	X Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(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) SOUTH ASIA			GRANTMAKING	FOOD AID - PAKISTAN	46,372,096.
(2) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		374,988.
_(3)		l 			·····
(4)					
_(5)					
(6)					
(7)					•
(8)					
(9)					
(10)					
(11)					-
(12)					•
(13)					
(14)					
(15)					
(16)					•
(17)					
3a Sub-total					
b Total from continuation sheets to Part I					
<u>c Totals (add lines 3a and 3b)</u>					
For Paperwork Reduction Act Notice, se	ee the Instruction	ns for Form 990.		Schedule	e F (Form 990) 2014

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA 4E1274 1.000 1237AH 2219

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

1	(a) Name of organization	(b) IRS code 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	SUPPORT PROG	45,665,262.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT PROG	36,110,995.	WIRE			
(3)			SOUTH ASIA	SUPPORT PROG	32,780,267.	WIRE			
(4)			EAST ASIA/PACIFIC	SUPPORT PROG	31,422,219.	WIRE			
(5)			SOUTH ASIA	SUPPORT PROG	25,374,706.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT PROG	14,116,929.	WIRE			
(7)			SUB-SAHARAN AFRICA	SUPPORT PROG	12,966,275.	WIRE			
(8)			EAST ASIA/PACIFIC	SUPPORT PROG	12,819,895.	WIRE			
(9)			EUROPE	SUPPORT PROG	9,273,613.	WIRE	ted bleve an en et diste et		
(10)			EAST ASIA/PACIFIC	SUBGRANT TO	8,285,399.	WIRE			
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	7,466,078.	WIRE			
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG	6,620,568.	WIRE	www.www.weiter.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu.com.edu		
(13)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	5,885,248.	WIRE			
(14)			SUB-SAHARAN AFRICA	SUPPORT PROG	5,615,696.	WIRE			
(15)			SUB-SAHARAN AFRICA	SUPPORT PROG	5,518,555.	WIRE			
(16)			SOUTH ASIA	SUPPORT PROG	5,020,821.	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
 3 Enter total number of other organizations or entities

SAVE THE CHILDREN FEDERATION, INC.

Page **2**

Schedule F (Form 990) 2014

Part II		sistance to Organization			-	-		ed "Yes" on F	orm 990,
	Part IV, line 15, for an	y recipient who received	more than \$5,000.	Part II can be	duplicated if add	itional space is	s needed.		(i) Mathead of
1	(a) Name of organization	(b) IRS code section and EIN	(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,

1	(a) Name of organization	(b) IKS code section and EIN (if applicable)	(c) Region	grant	cash grant	cash disbursement	non-cash assistance	of non-cash assistance	(book, FMV, appraisal, other)
(1)	X		SUB-SAHARAN AFRICA	SUPPORT PROG	5,013,344.	WIRE			
4.7	NUMBER OF STREET		SOB BAIRICAN AFRICA	BOTTOKI TROG	5,015,511.	ning			
(2)			SUB-SAHARAN AFRICA	SUPPORT PROG	4,413,819.	WIRE			
(3)			SUB-SAHARAN AFRICA	SUPPORT PROG	4,150,179.	WIRE			
(4)	$\underline{\lambda}$		MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	3,572,027.	WIRE			
(5)			MIDDLE EAST/NORTH AFRICA	SUPFORT PROG	3,571,051.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT PROG	3,438,062.	WIRE	·····		
(7)			SOUTH ASIA	SUPPORT PROG	3,153,721.	WIRE			
(8)			SOUTH AMERICA	SUPPORT PROG	3,142,586.	WIRE			
(9)			CENTRAL AMERICA/CARIBBEA	SUPPORT PROG	2,637,233.	WIRE			
(10)			EAST ASIA/PACIFIC	SUPPORT PROG	2,503,518.	WIRE			
(11)			EAST ASIA/PACIFIC	SUPPORT PROG	2,476,776.	WIRE	110		
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG	2,215,920.	WIRE			
(13)			CENTRAL AMERICA/CARIBBEA	SUPPORT PROG	2,191,185.	WIRE			
(14)			SUB-SAHARAN AFRICA	LIVELIHOOD A	2,101,839.	WIRE			
(15)			SUB-SAHARAN AFRICA	SUPPORT PROG	1,977,404.	WIRE			
(16)			EUROPE	SUPPORT PROG	1,947,425.	WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
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Schedule F (Form 990) 2014

Page **2**

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

1	(a) Name of organization	(b) IRS code 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	SUPPORT PROG	1,784,761.	WIRE	1.01		
(2)			SOUTH ASIA	SUPPORT PROG	1,642,356.	WIRE			
(3)			SUB-SAHARAN AFRICA	SUPPORT PROG	1,542,849.	WIRE			
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	1,355,409.	WIRE			
(5)			SUB-SAHARAN AFRICA	SUPPORT PROG	1,341,879.	WIRE			
(6)			SOUTH ASIA	SUBGRANT TO	1,291,856.	WIRE			
(7)			SOUTH AMERICA	SUPPORT PROG	1,193,771.	WIRE			
(8)			SUB-SAHARAN AFRICA	SUPPORT PROG	1,132,929.	WIRE			
(9)			RUSSIA/INDEPENDENT STATE	SUPPORT PROG	1,126,551.	WIRE			
(10)			SOUTH ASIA	ACCESS TO ED	952,024.	CHECK			
(11)			SUB-SAHARAN AFRICA	SUPPORT PROG	828,445.	WIRE			
(12)			SOUTH ASIA	EDUCATION AC	823,380.	WIRE			
(13)			SUB-SAHARAN AFRICA	PROMOTE RESI	792,166.	WIRE			
(14)			SOUTH ASIA	ACCESS TO ED	728,697.	CHECK			
(15)			CENTRAL AMERICA/CARIBBEA	SUPPORT PROG	715,882.	WIRE			
(16)			SOUTH ASIA	GLOBAL FUND	715,461.	CHECK			

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Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code 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	PROMOTE RESI	708,429.	WIRE			
(2)			EAST ASIA/PACIFIC	RETURN OF FU	706,411.	WIRE			
(3)			CENTRAL AMERICA/CARIBBEA	SUBGRANT TO	619,721.	WTRE			
(4)			EAST ASIA/PACIFIC	SUPPORT PROG	599,361.	WIRE			
(5)			SOUTH ASIA	GLOBAL FUND	593,458.	CHECK			
(6)	$\underline{\mathbb{A}}$		SOUTH AMERICA	SUPPORT PROG	588,458.	WIRE			·
(7)			SUB-SAHARAN AFRICA	SCI POOLED C	585,000.	WIRE			
(8)			SOUTH ASIA	PROJECT ACTI	544,622.	CHECK			
(9)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	514,146.	WIRE			
(10)			SUB-SAHARAN AFRICA	SUPPORT PROG	484,876.	WIRE			
(11)		A A	NORTH AMERICA	SUPPORT PROG	427,656.	WIRE			
(12)			EUROPE	LIVELIHOOD A	422,211.	WIRE			
<u>(13)</u>			SUB-SAHARAN AFRICA	SUBGRANT TO	414,747.	WIRE			
(14)			SUB-SAHARAN AFRICA	SUPPORT PROG	364,905.	WIRE			
(15)			MIDDLE EAST/NORTH AFRICA	EMERGENCY RE	350,000.	WIRE		-	
(16)			CENTRAL AMERICA/CARIBBEA	SUBS FOR SC	348,942.	WIRE			

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Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code 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)			EUROPE	LIVELIHOOD A	345,848.	WIRE			
1.7			ECROPE	DIVEDINOUD A	545,640.	MIRE			
(2)			SOUTH ASIA	GLOBAL FUND	307,884.	CHECK	····		
(3)			SUB-SAHARAN AFRICA	FOOD SECURIT	306,147.	WIRE			
(4)			SUB-SAHARAN AFRICA	LIVELIHOOD A	288,413.	WIRE			
(5)			SUB-SAHARAN AFRICA	HEALTH ACTIV	283,176.	WIRE			
(6)			EUROPE	EMERGENCY RE	280,719.	WIRE			
(7)			EAST ASIA/PACIFIC	SUPPORT PROG	264,902.	WIRE	×		
(8)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	262,201.	WIRE			
(9)			SOUTH ASIA	ACCESS TO ED	250,718.	WIRE			
(10)			EUROPE	CHILD PROTEC	235,721.	WIRE			· · · · · · · · · · · · · · · · · · ·
1.4/			LUNOFE	CRIED FROILC	235,121.	MIND			
(11)			EAST ASIA/PACIFIC	EMERGENCY WA	228,626.	WIRE			
(12)			SUB-SAHARAN AFRICA	FOOD SECURIT	221,889.	WIRE			
(13)			EAST ASIA/PACIFIC	SUPPORT PROG	207,375.	WIRE			
,				DOLLONI LKOG	201,313.	- Markey			
(14)			MIDDLE EAST/NORTH AFRICA	INDIA FLOOD	194,791.	WIRE			
(15)			RUSSIA/INDEPENDENT STATE	SUPPORT PROG	187,179.	WIRE			
(16)			SOUTH ASIA	ESTABLISHING		CHECK			
CHERNEL AND			Soooin vorv	1 DOTUDOTOUTING	100,010.	1 CHECK	L	L	L

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by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

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•·· · · · · · · · · ·	Part IV, line 15, for any re	Cipient who receiv		airnican Dei	auplicated if adult	ional space I			
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)	A Ar Ar		SOUTH ASIA	EMERGENCY RE	169,639.	WIRE			
(2)	<u>NAA</u>		SOUTH ASIA	EMERGENCY HE	166,208.	WIRE			
(3)			SOUTH ASIA	NEWBORN HEAL	157,288.	WIRE			
(4)	<u>AA</u>	<u>A. A.</u>	EUROPE	SUPPORT PROG	153,475.	WIRE			
(5)		<u></u>	EUROPE	EDUCATION	146,646.	WIRE			- 011 ⁰ - 77 101
(6)	<u>raal</u>		SOUTH ASIA	EDUCATION AW	143,367.	WIRE			
(7)	<u>ANANA</u>	<u>. 268, 26</u>	SOUTH ASIA	PROJECT ACTI	124,431.	CHECK			
(8)			SOUTH ASIA	GLOBAL FUND	124,047.	CHECK			
(9)	<u> </u>		SOUTH ASIA	PSYCHOSOCIAL	123,212.	CHECK			
(10)			CENTRAL AMERICA/CARIBBEA	FOOD SECURIT	119,779.	WIRE		-	
(11)			EUROPE	NUTRITION AC	118,147.	WIRE	82 7 Mar		
(12)			SOUTH ASIA	MATERNAL/NEW	117,481.	WIRE			
(13)			MIDDLE EAST/NORTH AFRICA	SCI POOLED C	115,000.	WIRE			
(14)			CENTRAL AMERICA/CARIBBEA	SUBGRANT TO	110,145.	WIRE			
(15)			SUB-SAHARAN AFRICA	LIVELIHOOD A	109,104.	WIRE			
(16)			SOUTH ASIA	PROJECT ACTI	103,351.	CHECK			

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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)			SOUTH ASIA	ACTIVITIES A	100,510.	WIRE			
(2)			SOUTH ASIA	REIMBURSEMEN	98,907.	CHECK			
(3)			NORTH AMERICA	HEALTH ACTIV	93,448.	WIRE			
(4)			SOUTH ASIA	PROJECT ACTI	91,061.	WIRE			
(5)			EUROPE	SUPPORT PROG	90,945.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT PROG	87,631.	WIRE			
(7)			SOUTH ASIA	PROJECT ACTI	82,868.	CHECK			
(8)			EUROPE	CHILD HEALTH	81,480.	WIRE			
<u>(9)</u>			SOUTH ASIA	GLOBAL FUND	78,498.	CHECK	······································		
<u>(10)</u>			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	76,715.	WIRE			
(11)			CENTRAL AMERICA/CARIBBEA	SUPPORT PROG	75,391.	WIRE			
(12)			SOUTH ASIA	EMERGENCY FL	73,912.	WIRE			
(13)			SOUTH ASIA	PROJECT ACTT	73,237.	WIRE	•		
<u>(14)</u>			SUB-SAHARAN AFRICA	HEALTH ACTIV	71,695.	WIRE			
<u>(15)</u>			CENTRAL AMERICA/CARIBBEA	RURAL VALUE	70,951.	CHECK			
(16)			SOUTH ASIA	ACTIVITIES	63,777.	CHECK			

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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)	XXX		SOUTH ASIA	PROJECT ACTI	60,093.	CHECK			
(2)			SUB-SAHARAN AFRICA	LIVELIHOOD A	57,399.	WIRE			
(3)			SOUTH ASIA	PROJECT ACTI	52,005.	CHECK			
(4)			SOUTH ASIA	HEALTH ACTIV	50,354.	WIRE			
(5)	<u>XXX</u>		EUROPE	EDUCATION AC	49,800.	WIRE			
(6)			SUB-SAHARAN AFRICA	IMPROVED HEA	47,594.	WIRE			
(7)			SOUTH ASIA	PROJECT ACTI	46,868.	CHECK			
<u>(8)</u>			SOUTH ASIA	ACTIVITIES	46,294.	WIRE			
(9)			SOUTH ASIA	SUBGRANT TO	45,550.	WIRE			
(10)			EUROPE	MALARIA PREV	44,117.	WIRE	·····		
(11)			EUROPE	CHILDHOOD AC	43,047.	WIRE			
(12)			SOUTH ASIA	PROJECT ACTI	41,669.	CHECK			
(13)			SOUTH ASIA	ESTABLISHING	41,466.	CHECK			
(14)			SUB-SAHARAN AFRICA	HEALTH ACTIV	41,131.	WIRE			
(15)			SUB-SAHARAN AFRICA	SUPPORT PROG	40,832.	WIRE			
(16)			EAST ASIA/PACIFIC	SUPPORT PROG	40,678.	WIRE		<u> </u>	L

Page **2**

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1 '	Part IV, line 15, for any re (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)			CENTRAL AMERICA/CARIBBEA	SUPPORT PROG	40,000.	WIRE			
(2)			SUB-SAHARAN AFRICA	HEALTH ACTIV	39,930.	CHECK			
(3)			EUROPE	MALARIA PREV	39,396.	WIRE		-	
(4)			SOUTH ASIA	PROJECT ACTI	40,523.	CHECK			
(5)			SOUTH ASIA	PROJECT ACTI	37,021.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUPPORT PROG	35,071.	WIRE	· · · · · · · · · · · · · · · · · · ·		
(7)			SOUTH ASIA	SCI POOLED C	35,000.	CHECK			
(8)			EUROPE	HUMANITARIAN	33,405.	WIRE			
(9)			SUB-SAHARAN AFRICA	TECH_SUPPORT	32,043.	WIRE			
(10)			CENTRAL AMERICA/CARIBBEA	SUBGRANT TO	30,500.	WIRE			
(11)			SOUTH ASIA	PROJECT ACTI	30,134.	CHECK			
(12)			SOUTH ASIA	PROJECT ACTI	29,630.	CHECK			
(13)			SUB-SAHARAN AFRICA	SUPPORT PROG	29,604.	WIRE			
(14)			EUROPE	TECH SUPPORT	29,055.	WIRE			
(15)			EAST ASIA/PACIFIC	HUMANITARIAN	28,857.	WIRE			
(16)			SOUTH ASIA	PROJECT ACTI	27,349.	CHECK			· .

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Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code 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	SUBGRANT TO	27,246.	WIRE			
(2)			EUROPE	MALARIA PREV	25,713.	WIRE			
(3)	<u>.a.a.a.a</u>		EAST_ASIA/PACIFIC	SCI POOLED C	25,000.	CHECK			
(4)	<u>AXXX</u>	<u>An An A</u>	SOUTH ASIA	LIVELIHOOD A	23,486.	WIRE		i	
(5)	<u>XXXXX</u>		EUROPE	CARE FOR HIV	23,265.	WIRE			
(6)	<u>A A A A</u>		SUB-SAHARAN AFRICA	SUBGRANT TO	22,329.	WIRE		-	
(7)			SOUTH ASIA	EMERGENCY RE	20,538.	WIRE			
(8)		<u>265. 265. 2</u>	EAST ASIA/PACIFIC	EDUCATION_AC	19,536.	WIRE			
<u>(9)</u>			SOUTH ASIA	GLOBAL FUND	18,622.	CHECK	·····		
(10)			SOUTH ASIA	SUPPORT HEAL	18,570.	WIRE		1]
(11)			SUB-SAHARAN AFRICA	SUPPORT PROG	18,173.	WIRE			
(12)		<u>iais aits a</u>	MIDDLE EAST/NORTH AFRICA	EDUCATION AC	16,480.	WIRE			
<u>(13)</u>	$\overline{}$		CENTRAL AMERICA/CARIBBEA	SUPPORT WATE	16,377.	CHECK			
<u>(14)</u>			MIDDLE EAST/NORTH AFRICA	MULTIPLE SUB	15,991.	WIRE			
(15)			CENTRAL AMERICA/CARIBBEA	SUBGRANT SC	14,791.	WIRE			
(16)		White Maria	EAST ASIA/PACIFIC	SUPPORT PROG	13,957.	WIRE			

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1	Part IV, line 15, for any re (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)		R. Internet	EUROPE	EMERGENCY RE	12,117.	WIRE			
(2)			MIDDLE EAST/NORTH AFRICA	ENSURE THAT	11,594.	WIRE			
(3)			MIDDLE EAST/NORTH AFRICA	NEWBORN/MATE	11,533.	WIRE			
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT HEAL	8,410.	WIRE			
(5)			MIDDLE EAST/NORTH AFRICA	ENSURE THAT	8,036.	WIRE			
(6)			CENTRAL AMERICA/CARIBBEA	EDUCATION AC	7,500.	WIRE			
(7)			EUROPE	TECH SUPPORT	6,851.	WIRE			
(8)			SOUTH ASIA	HEALTH ACTIV	5,960.	WIRE			
(9)			SUB-SAHARAN AFRICA	SUPPORT PROG			36,891.	CONSULTANTS	FMV
(10)			CENT, AMERICA/CARIBBEAN	SUPPORT PROG			2,347,670.	FOOD, SHOES	FMV
(11)			CENT. AMERICA/CARIBBEAN	SUPPORT PROG	een beend teeledad been		9,377.	TOOTHBRUSHES	FMV
(12)			CENT. AMERICA/CARIBBEAN	SUPPORT PROG			5,373.	FOOTBALLS	FMV
(13)			EAST ASIA/PACIFIC	SUPPORT PROG			4,026,303.	PLASTIC TARP	FMV
(14)			EAST ASIA/PACIFIC	SUPPORT PROG			1,050,071.	HEALTH ITEMS	FMV
(15)			EAST ASIA/PACIFIC	SUPPORT PROG			978,887.	FOOTBALLS, P	FMV
(16)			EAST ASIA/PACIFIC	SUPPORT PROG			18,042.	CONSULTANTS	FMV

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Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1	(a) Name of organization	(b) IRS code 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)
ARR .	APR ARE ADD AT	. Alle. Alle							
(1)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			9,407,375.	FOOD	FMV
		r Albert Albert							
(2)	an an an a	h. Afh. Afh	MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			533,661.	FOOD	FMV
					·····				
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			425,605.	FOOD	FMV
				00110101 11000				1005	
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			297,956.	FOOD	FMV
T. Contraction	All All All All	and antisetantee antisetantee	MIDDLE EADI/ NORTH APRICA	JULIONI PROG			251,550.	1000	INV
(5)	dis dis dis d	k dh dh	MIDDLE EAST/NORTH AFRICA	SHOE DISTRIB			141 700	TOMS SHOES	FMV
			MIDDLE EAST/NORTH AFRICA	SHOE DISTRIB			141,733.	TOMS SHOES	PMV
(6)	전에서 전환 지방 지방								
(0)			SOUTH AMERICA	SUPPORT PROG		++	20,223.	ALBENDAZOLE	FMV
(7)									
(7)			SOUTH ASIA	SUPPORT PROG	······		4,079,002.	FOOD	FMV
	Alle Alle Alle]
(8)	dalah dalam da National dalam d		SOUTH ASIA	SUPPORT PROG			2,947,295.	FOOD	FMV
	San Yang Anger Ang								
(9)			SOUTH ASIA	SUPPORT PROG			2,223,592.	FOOD	FMV
(10)			SOUTH ASIA	SUPPORT PROG			554,698.	SHOES, PHARM	FMV
(11)	And Carlos And And		SOUTH ASIA	SUPPORT PROG			535,717.	TOMS SHOES	FMV
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG			19,571,190.	PLUMPY NUT	FMV
(13)	Charles Andrew Alexandre Alexandre		SUB-SAHARAN AFRICA	SUPPORT PROG			2,623,585.	FOOD	FMV
						\			
(14)	an An An A		SUB-SAHARAN AFRICA	SUPPORT PROG			1,974,841.	FOOD	FMV
(15)			SUB-SAHARAN AFRICA	SUPPORT PROG			958,332.	FOOD	FMV
					·····				
(16)			SUB-SAHARAN AFRICA	SUPPORT PROG			629,986.	FOOD	FMV

Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (i) Method of . (b) IRS code section and EIN (if applicable) (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description of non-cash 1 (a) Name of (c) Region valuation (book, FMV. cash disbursement non-cash arant cash grant organization assistance assistance appraisal, other) (1) SUB-SAHARAN AFRICA SUPPORT PROG 43,913. PHARMACEUTIC FMV (2) SUB-SAHARAN AFRICA SUPPORT PROG THEREPEUTIC FMV 5,400. (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	89.
	Enter total number of other organizations or entities.	118.
-		

Schedule F (Form 990) 2014

(14)

(15)

(16)

SAVE THE CHILDREN FEDERATION, INC.

Schedule F (Form 990) 2014 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III

(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)
							other)
(1) FOOD FOR INDIGENTS - PAKISTAN	SOUTH ASIA	1363366.			46,372,096.	FOOD COMM.	FMV
(2) FOOD FOR INDIGENTS - GUATEMALA	CENT. AMERICA/CARIBBEAN	81500.			2,883,333.	FOOD COMM.	FMV
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
10)							
11)							
12)							
13)							
14)							
15)							
16)							
17)					₽ = 11,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
18).							

SAVE THE CHILDREN F	EDERATION, INC.
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Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	Νο
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; do not file with Form 990)	Yes	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 Yes	No No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	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 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; do not file with Form 990)	X Yes	Νο

Schedule F (Form 990) 2014

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Schedule F (Form 990) 2014

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Schedule F (Form 990) 2014

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 US (SCUS) HAS THE MAJORITY OF ITS INTERNATIONAL PROGRAMS IMPLEMENTED BY SAVE THE CHILDREN INTERNATIONAL (SCI), A LONDON BASED NON-PROFIT, THAT WAS CREATED BY THE 29 SAVE THE CHILDREN MEMBERS WORLDWIDE. SOME FINANCIAL CONTROLS SET UP TO OVERSEE SCI ARE AS FOLLOWS:

--REVIEW SCI INTERNAL AUDIT TEAMS' AUDITS, AUDIT FINDINGS AND AUDIT CLEARING, PARTICULARLY TO IDENTIFY AND TRACK AUDIT POINTS OF SPECIFIC INTEREST, ESPECIALLY AS THEY IMPACT SCUS FUNDS. OFTEN DO JOINT AUDITS AND JOINT RISK ASSESSMENTS AND AUDIT PLANNING.

--FOCUSED TIMELY FRAUD REPORTING WITH JOINT ZERO TOLERANCE POLICY.

--HEAD OF SCI INTERNAL AUDIT TEAM REPORTS OUT TO SCUS AUDIT COMMITTEE 1-2 TIMES PER YEAR.

--A COMPREHENSIVE JOINT AWARD MANAGEMENT SYSTEM THAT TRACKS ALL AWARDS BETWEEN MEMBERS AND SCI FROM THE PROPOSAL STAGE THROUGH CLOSE-OUT.

--MONTHLY REVIEW OF SCUS FUNDS BUDGET V ACTUAL VARIANCES IN SCI COS. --QUARTERLY FINANCIAL DATA RECONCILIATIONS.

--MONTHLY, QUARTERLY, ANNUAL FINANCIAL STATEMENTS AND REPORTS FROM SCI, PLUS SCI GLOBAL ASSURANCE (INTERNAL AUDIT) PAPERS SHARED WITH SCUS MANAGEMENT.

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).

--EXTERNAL AUDIT REPORTS OF SCI, INCLUDING THE FOREIGN RECIPIENT AUDIT DONE ANNUALLY FOR USAID, WHICH IS REVIEWED BY SCUS.

--IN 2014, THREE JOINT BOARD MEMBERS (PERRIN, PALMER AND SPIERS-LOPEZ). THE CHAIR OF THE SCI BOARD, CHARLIE PERRIN, SERVES ON THE SCUS BOARD AND AUDIT COMMITTEE.

--MULTIPLE JOINT TRAININGS BETWEEN SCUS AND SCI, INCLUDING COUNTRY OFFICE (CO) STAFF ARE DONE THROUGHOUT THE YEAR THAT COVERED SUCH TOPICS AS: RISK MITIGATION; US GOVERNMENT GRANTS AND CONTRACTS RULES, REGULATIONS AND COMPLIANCE; SUBGRANT MANAGEMENT; TIMEKEEPING AND EFFORT REPORTING; BUDGETING AND TIMELY SPENDING; COST ALLOCATION; PROCUREMENT POLICIES; ALLOWABLE COSTS; PRIOR APPROVALS; DONOR REPORTING AND RECEIVABLES COLLECTION; AND CASH MANAGEMENT.

--PROGRAM REVIEWS BY SCUS PROGRAM TECHNICAL STAFF.

--SCUS REVIEW OF THE SCUS COMMODITIES AND SPONSORSHIP PROGRAMS BEING IMPLEMENTED IN SCI COUNTRY OFFICES.

--ACCESS BY SCUS MANAGEMENT TO SCI AUDIT & FINANCE CMTE PAPERS.

--REGULAR MEMBER MEETINGS PROVIDING A FORUM TO CHALLENGE SCI PRACTICES.

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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).

--FORMATION OF WORKING/LEADERSHIP GROUPS, WHICH SCUS ARE PART OF, E.G. SAFETY AND SECURITY, AWARD MANAGEMENT, WHICH GIVE SCUS EXPOSURE TO CHANGES AND DEVELOPMENTS WITHIN SCI AND PROVIDE OPPORTUNITIES TO CONTRIBUTE, INFLUENCE AND CHALLENGE SCI PRACTICES.

--EXTERNAL AUDIT IN 2014 BY KPMG OF THE SCI HEAD OFFICE IN LONDON PLUS 13 COUNTRY OFFICES (AFGHANISTAN, BANGLADESH, ETHIOPIA, JORDAN, LEBANON, MALAWI, MYANMAR, NEPAL, NIGER, PHILIPPINES, SOMALIA, SYRIA AND YEMEN). THESE COVERED OVER 60% OF THE TOTAL SCI EXPENDITURE AND OVER 76% OF SCUS GRANTS. KPMG REVIEWS THE RESULTS OF THE AUDIT OF SCI WITH THE SCUS AUDIT COMMITTEE.

--THE CHAIR AND VICE CHAIR OF THE SCUS AUDIT COMMITTEE UNDERTAKE PERIODIC COMMUNICATIONS WITH BOTH THE CHAIR OF THE SCI AUDIT AND FINANCE COMMITTEE AND THE CHIEF FINANCIAL OFFICER OF SCI.

--THE KPMG MANAGEMENT LETTER OF SCI IS SHARED AND REVIEWED BY SCUS MANAGEMENT

SCHEDULE F, PART III, COLUMN C THE NUMBER OF RECIPIENTS FOR FOOD AND FREIGHT ASSISTANCE IN GUATAMALA, AND PAKISTAN INCLUDE DIRECT AND INDIRECT FOOD PROGRAM BENEFICIARIES, WHICH ARE ESTIMATED THROUGH PROGRAM MONITORIING, FOOD DISTRIBUTION RECORDS AND PROJECT DOCUMENTATIONS.

I	Suppleme	ntal Information	Regarding	a Fundrai	ising or Gaming	Activities	OMB No. 1545-0047
SCHEDULE G		the organization answ	•	-	• •		
(Form 990 or 990-EZ)		organization entered	l more than \$	15,000 on Fo	rm 990-EZ, line 6a.		∠⊎ 14
Department of the Treasury Internal Revenue Service	► information a	Attach bout Schedule G (Form	to Form 990 990 or 990-E			s.gov/form990.	Open to Public Inspection
Name of the organization						Employer identificati	on number
SAVE THE CHILDRE						06-072648	
	ng Activities. Con				"Yes" to Form 9	90, Part IV, line	17.
Form 990	-EZ filers are not						
1 Indicate whether	the organization rai	sed funds through	any of the	following	activities. Check a	all that apply.	
a 🔀 Mail solicitati	ons	е	X Solid	citation of	non-government g	rants	
	email solicitations	f			government grants	5	
c X Phone solicit		g	X Spe	cial fundra	ising events		
d X In-person sol	licitations						
2a Did the organizati	ion have a written o	r oral agreement v	with any inc	dividual (in	cluding officers, d	irectors, trustees _г	
	listed in Form 990						X Yes No
b If "Yes," list the te	en highest paid ind	ividuals or entities	(fundraise	ers) pursua	ant to agreements	under which the	fundraiser is to be
compensated at le	east \$5,000 by the	organization.					
		T					1
(I) Name and addre - or entity (fun		(ii) Activity	custody c	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			· ··
1 DONOR CARE CEN	ITER, INC.	PROF'L					
BARBERTON, OHI	0	SOLICITOR	Х		319,215.	623,216.	-304,001.
2 GRASSROOTS CAM	MPAIGNS, INC	PROF'L					
BOSTON, MA		SOLICITOR	Х		245,009.	471,681.	-226,672.
3 DONORWORX, INC	2.	PROF'L					
BETHESDA, MARY	LAND	SOLICITOR		X	305,390.	592,962.	-287,572.
4 DEVELOPING AWA	ARENESS, INC	PROF'L					
AUSTIN, TEXAS		SOLICITOR		X	1,339,871.	3,032,277.	-1,692,406.
5 DIRECT POINT G	GROUP, INC.	FUND.					
OAKVILLE, ON		COUNCIL		X	4,734,370.	357,816.	4,376,554.
6 EPSILON DATA M		FUND.					
LAFAYETTE, COI		COUNCIL		X	815,359.	103,973.	711,386.
7 DONOR SERVICES		PROF'L					
LOS ANGELES, C	CALIFORNIA	SOLICITOR		X	741,088.	131,270.	609,818.
8 MERKLE		FUND.					
COLUMBIA, MARY		COUNCIL		X	73,533.	92,613.	-19,080.
9 CHARITY DYNAMI	ICS LLC	FUND.	1				
AUSTIN, TEXAS	·	COUNCIL		X	391,104.	119,840.	271,264.
10 PAMELA POLAND		FUND.	1		05 400	60 G 5	00.100
NEW YORK, NY		COUNCIL		X	85,498.	63,015.	22,483.

5,588,663. 9,050,437 3,461,774. Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN,

IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, VI, UT, VT, VA, WA, WV, WI, WY,

2523569

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D	

SAVE THE CHILDREN FEDERATION, INC. 06-0726487 . Schedule G (Form 990 or 990-EZ) 2014 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events ILLUMIN. GALA LIVC - SPRING 8. (add col. (a) through col. (c)) (total number) (event type) (event type) Revenue 1,272,401. 465,070. 726,548. 2,464,019. 1 Gross receipts 2 Less: Contributions 1,229,201. 715,394. 2,384,665. 440,070. 3 Gross income (line 1 minus 43,200. 25,000. 11,154. 79,354. 4 Cash prizes 5 Noncash prizes Expenses 6 Rent/facility costs 7 Food and beverages Direct 8 Entertainment 270,082. 9 Other direct expenses 63,119. 17,891. 351,092 10 Direct expense summary. Add lines 4 through 9 in column (d) 351,092 ► ► -271,738 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant /enue (c) Other gaming (a) Bingo bingo/progressive bingo col. (a) through col. (c)) Rev 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No No No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? Yes b If "No," explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2014

No

No

Schedule G (Form 990 or 990-EZ) 2014 Pag 11 Does the organization conduct gaming activities with nonmembers? Yes 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes 13 Indicate the percentage of gaming activity conducted in: Yes	e 3 Vo
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?	10
formed to administer charitable gaming?	
13 Indicate the percentage of gaming activity conducted in:	10
	~
	<u>%</u> %
 b An outside facility	-70
records:	
Name ▶	
Address ►	
15 a Does the organization have a contract with a third party from whom the organization receives gaming	
revenue?	10
amount of gaming revenue retained by the third party ► \$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Address ►	
16 Gaming manager information:	
Name ▶	
Gaming manager compensation ► \$	
Description of services provided ►	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
	lo
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 🕨 \$	
Part IV Supplemental Information. 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 provide any additional information	
(see instructions).	
SCHEDULE G, PART I, LINE 2B	
IN 2014, \$3,481,438 IN ADDITIONAL REVENUE WAS GENERATED FROM DONORS	
ACQUIRED FROM CANVASSING CAMPAIGNS IN 2009 TO 2013 (THROUGH PUBLIC	
OUTREACH, GRASSROOTS, DONORWORX, APPCO, QUANTUM DIALOGUE AND DEVELOPING	
AWARENESS.)	

PAYMENT FIGURES REPORTED IN COLUMN (V) REPRESENT TOTAL COMPENSATION PAID

Schedule G (Form 990 or 990-EZ) 2014

	SAVE THE CHILDREN FEDERATION, INC.	06-0726487
Sched	ule G (Form 990 or 990-EZ) 2014	· Page 3
11	Does the organization conduct gaming activities with nonmembers?	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other enti	
	formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted 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 bool records;	ks and
		-
	Name N	
	Name ▶	
	Address ►	
15 a	Does the organization have a contract with a third party from whom the organization receives	gaming
	revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the
	amount of gaming revenue retained by the third party \blacktriangleright $_$	
С	If "Yes," enter name and address of the third party:	
	Name ►	
	Address ►	
16	Gaming manager information:	
10		
	Name ▶	•
	Gaming manager compensation ► \$	
	Description of services provided ►	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	anada ta
а		
h	retain the state gaming license?	
Ň	or spent in the organization's own exempt activities during the tax year > \$	
Par		s (iii) and (v), and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	
	(see instructions).	
UP	FRONT TO THE FUNDRAISER DURING THIS TAX YEAR. THE FIGURES REPORTED IN	
COL	UMN (IV) FOR DONORWORX, GRASSROOTS AND DEVELOPING AWARENESS REFLECT	
INI	TIAL REVENUE RESULTS BUT DO NOT REFLECT TOTAL LIFETIME VALUE OF	
CON	TRIBUTIONS THAT WILL BE GENERATED AS A RESULT OF THE FUNDRAISER'S 2014	
(77) M	DATCNS	
UAIM	PAIGNS.	

THE LIFETIME VALUE IS A NET PRESENT VALUE ESTIMATE OF CURRENT AND FUTURE

Schedule G (Form 990 or 990-EZ) 2014

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	SAVE THE CHILDREN FEDERATION, INC. 06-0726487
Sched	lule G (Form 990 or 990-EZ) 2014 Page 3
11	Does the organization conduct 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 conducted in:
а	The organization's facility 13a %
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?
h	revenue? Yes No If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the
b	amount of gaming revenue retained by the third party \blacktriangleright \$
с	If "Yes," enter name and address of the third party:
Ū	
	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 🕨 \$
Part	Supplemental Information. 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 provide any additional information
	(see instructions).
INCO	OME, BY VENDOR. IT ASSUMES A MONTHLY TERMINATION RATE BASED ON
HIS	TORICAL AVERAGES WITH A 1.03% INCREASE IN PAYMENT ADDED TO EACH YEAR
_	
OF S	THE PROJECTED REVENUE AND A 2.4% DISCOUNT RATE.
AS A	A RESULT OF 2014 EXPENDITURES, INCREMENTAL REVENUE WILL BE ACQUIRED
EX.CT	H SUBSEQUENT YEAR FROM THESE CANVASSING RECURRING MONTHLY
CON	TRIBUTORS. TOTAL PROJECTED LIFETIME REVENUE FOR THE CANVASSING

	SAVE THE CHILDREN FEDERATION, INC. 06-0726487
Sched	ule G (Form 990 or 990-EZ) 2014 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming? Yes No
13	Indicate the percentage of gaming activity conducted 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 ► \$
c	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	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information
·	(see instructions).
REC	URRING MONTHLY CONTRIBUTORS ACQUIRED IN 2014 THROUGH DONORWORX,
CDA	SSROOTS AND DEVELOPING AWARENESS IS \$13,964,871.
UNA	Severe we astronike www.exected is Areleated.t.

FUNDRAISER CONTRACTS THAT DO NOT DISTINGUISH BETWEEN SERVICE FEE AND

EXPENSE REIMBURSEMENT:

Schedule G (Form 990 or 990-EZ) 2014

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	- SAVE THE CHILDREN FEDERATION, INC. 0	06-0726487
Sched	dule G (Form 990 or 990-EZ) 2014	Page 3
11	Does the organization conduct 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?	Yes 🗌 No
13	Indicate the percentage of gaming activity conducted in:	
а		3a %
b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books records:	
	Name ▶	
	Address ►	
15 a	Does the organization have a contract with a third party from whom the organization receives ga	
h	revenue?	
b	amount of gaming revenue retained by the third party \$ amount of gaming revenue retained by the third party \$	ia the
с		
G	in res, enter name and address of the time 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 proce	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organi or spent in the organization's own exempt activities during the tax year	zations
Par	rt IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (ii	ii) and (v), and
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additiona (see instructions).	al information
1.	DONOR CARE CENTER, INC CONTRACT ITEMIZES FEES FOR SERVICES BASED	
UPOI	ON SIMILAR FUNDRAISING PROJECTS FOR OTHER CHARITIES, AND SPECIFIES THAT	
EXP	PENSE REIMBURSEMENT IS AT COST. DONOR CARE WAS REIMBURSED \$41,498 FOR	
SHI	IPPING, PRINTING AND OTHER EXTERNAL SERVICES.	
2. 1	DONORWORX, INC CONTRACT SETS FEES PER CAMPAIGN PLUS RELATED COSTS	
AND	TRAVEL EXPENSES. DONORWORX WAS REIMBURSED \$240,155 FOR TRAVEL,	

	SAVE THE CHILDREN FEDERATION, INC. 06-0726487
Sched	ile G (Form 990 or 990-EZ) 2014 Page 3
11	Does the organization conduct 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 conducted in:
a	The organization's facility
a b	•
	·····
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
lou	revenue?
Ь	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the
D D	amount of gaming revenue retained by the third party \triangleright \$
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. 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 provide any additional information (see instructions).
POS	TAGE, TRAINING, BOOTH BRANDING AND LEASE COSTS.
	,,,,,,,,,,,
3.	DEVELOPING AWARENESS, INC CONTRACT SETS FEES FOR PER DONOR
CON	TRIBUTION PROCESSED PLUS REIMBURSEMENT FOR PRINTING COSTS AND AN
ADM	INISTRATIVE CHARGE PER PLEDGE FORM. DEVELOPING AWARENESS WAS NOT
REI	MBURSED ANY COSTS IN 2014.

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Sched	SAVE THE CHILDREN FEDERATION, INC. ule G (Form 990 or 990-EZ) 2014	06-072648	57	Page 3		
11	Does the organization conduct 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 entit	у	-	_		
	formed to administer charitable gaming?	· · · · · L_	Yes	No		
13	Indicate the percentage of gaming activity conducted in:	10-		07		
a b	The organization's facility			<u>%</u> %		
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	s and		/0		
	Name ▶					
	Address ►					
15 a	Does the organization have a contract with a third party from whom the organization receives g		Yes			
b	revenue? If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ amount of gaming revenue retained by the third party ▶ \$					
C	If "Yes," enter name and address of the third party:					
	Name ▶					
	Address ►					
16	Gaming manager information:					
	Name ►					
	Gaming manager compensation ► \$					
	Description of services provided ►					
	Director/officer Employee Independent contractor					
 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?						
Part	Supplemental Information. Provide the explanation required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition (see instructions).					
4.1	DIRECT POINT GROUP, INC CONTRACT CONTAINS COMPENSATION TERMS FOR					
MON	THLY AND HOURLY RATES, PLUS MISCELLANEOUS SERVICES AND TRAVEL. DIRECT					
POI	NT WAS REIMBURSED \$16,291 FOR TRAVEL, PRINTING AND MEETING EXPENSES.					
5.1	EPSILON DATA MANAGEMENT, LLC - CONTRACT STATEMENT OF WORK ITEMIZES FOR					
FEES	S FOR SERVICES MAILING AND STATES THAT CHARITY IS RESPONSIBLE FOR					
OUT	-OF-POCKET COSTS SUCH AS TRAVEL, POSTAGE, FREIGHT AND COURIER SERVICES Sched	ule G (Form 990	or 990-E	Z) 2014		

	SAVE THE CHILDREN FEDERATION, INC.	06-0726487		
Sched	ule G (Form 990 or 990-EZ) 2014	Page 3		
11	Does the organization conduct 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 entit			
	formed to administer charitable gaming?	Yes No		
13	Indicate the percentage of gaming activity conducted 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 book records:	sand		
	Name 🕨			
	Name ▶			
	Address ►	•		
15 a	Does the organization have a contract with a third party from whom the organization receives g			
	revenue?	Yes No		
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$	and the		
	amount of gaming revenue retained by the third party \blacktriangleright			
С	If "Yes," enter name and address of the third party:			
	Name ▶			
	Address 🕨			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of complete manifold N			
	Description of services provided ►			
	Director/officer			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming pro	ceeds to		
	retain the state gaming license?			
b	Enter the amount of distributions required under state law to be distributed to other exempt orga	anizations		
	or spent in the organization's own exempt activities during the tax year 🕨 \$			
Par				
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additio (see instructions).	nalinformation		
<u>ک</u> س	COST. EPSILON WAS REIMBURSED \$19,474 FOR PRINTING AND MAILING.			
AI	COSI. EPSILON WAS REIMBORSED \$19,474 FOR PRINTING AND MAILING.			
		•		
6.	DONOR SERVICES GROUP, LLC - CONTRACTS SETS FEES PER MONTH PLUS			
PRINTING AND POSTAGE. DONOR SERVICES GROUP WAS REIMBURSED \$6,234 FOR				
POSTAGE AND PRINTING.				
7	MERKLE - CONTRACT SETS FEES PER MONTH, MERKLE WAS REIMBURSED \$3,048			

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	SAVE THE CHILDREN FEDERATION, INC.	06-0726487
Sched	tule G (Form 990 or 990-EZ) 2014	Page 3
11	Does the organization conduct 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 conducted in:	
a	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 records:	and
	Name ▶	
	Address ►	
15 a	Does the organization have a contract with a third party from whom the organization receives g	
	revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ a	ind the
	amount of gaming revenue retained by the third party ► \$	
C	If "Yes," enter name and address of the third party:	
	Namo 🕨	
	Name ▶	
	Address ►	
16	Gaming manager information:	
	Name ▶	
	Gaming manager compensation ► \$	
	Description of services provided	
	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 proc	ceeds to
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organ	nizations
	or spent in the organization's own exempt activities during the tax year s	(iii) and (iv) and
Part	t IV Supplemental Information. Provide the explanation required by Part I, line 2b, columns (Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition	and (V), and
	· (see instructions).	
FOR	TRAVEL.	
8.0	CHARITY DYNAMICS, LLC - CONTRACT OUTLINES FEES. CHARITY DYNAMICS WAS	
REIN	MBURSED \$796 FOR TRAVEL.	
0 -	PAMELA POLAND + ASSOCIATES - CONTRACT CONTAINS COMPENSATION TERMS FOR	
9. E	THELF FULLY TOTAL TOTAL CONTAINS CONFERENTION LEADS FOR	
WEEN	KLY FEES PLUS OUT OF POCKET EXPENSES SUCH AS TRAVEL.	
		le G (Form 990 or 990-EZ) 2014

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	SAVE THE CHILDREN FEDERATION, INC.	06-0726487
Sched	ule G (Form 990 or 990-EZ) 2014	Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	ty
13 a	Indicate the percentage of gaming activity conducted in: The organization's facility	•
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events book records:	is and
	Name ▶	
	Address ►	
15 a	Does the organization have a contract with a third party from whom the organization receives revenue?	
b	If "Yes," enter the amount of gaming revenue received by the organization \triangleright \$ amount of gaming revenue retained by the third party \triangleright \$	and the
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:	d- b-
a b	Is the organization required under state law to make charitable distributions from the gaming pro- retain the state gaming license?	Yes 🗌 No
Par	or spent in the organization's own exempt activities during the tax year s t IV Supplemental Information. 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 provide any addition (see instructions).	
	DRAISER CONTRACTS THAT DO NOT ITEMIZE SERVICE FEES AND EXPENSE	
REI	MBURSEMENT:	
-		
1.	GRASSROOTS CAMPAIGN, INC CONTRACT CONTAINS COMPENSATION INFORMATION	
PER	CANVASSING SHIFT ONLY AND MAKES NO MENTION OF REIMBURSEMENT OF	
EXP	ENSES.	
	Sche	dule G (Form 990 or 990-EZ) 2014

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	SAVE THE CHILDREN FEDERATION, INC. 06-0726487
Sched	ule G (Form 990 or 990-EZ) 2014 Page 3
11	Does the organization conduct 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 conducted 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 \blacktriangleright \$
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:
u	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 ▶ \$
Part	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information
	(see instructions).
SCHI	EDULE G, PART I, LINE 3
SAVI	E THE CHILDREN IS REGISTERED IN ALL STATES REQUIRING REGISTRATION. WE
SOL:	ICIT CONTRIBUTIONS IN ALL 50 STATES AND THE DISTRICT OF COLUMBIA.

Schedule G (Form 990 or 990-EZ) 2014

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OMB No. 1545-0047
2014
Open to Public Inspection
r identification number
0726487
annon anna an Anna an Anna an Anna an Anna an
ance, and
X Yes No
wered "Yes" to Form 990,
ription of (h) Purpose of grant assistance or assistance
MULTIPLE SUBS FROM G
M&E NEWBORN HEALTH
YOUTHSAVE CONSORTIUM
DELIVER EDUCATION
DELIVER EDUCATION
RESPONSIBLE FOR THE
DELIVER EDUCATION
HEALTH & NUTRITION
DELIVER EDUCATION

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

SCHEDULE I	Grants and Other Assistance to Organizations,		OMB No. 1545-0047	
(Form 990)	Governments, and Individuals in the United States		2014	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.			
Department of the Treesury	► Attach to Form 990.		Open to Public	
Department of the Treasury Internal Revenue Service	Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Inspection	
Name of the organization		Employer ident	ification number	
SAVE THE CHILDREN	FEDERATION, INC.	06-0726	5487	
Part I General Info	rmation on Grants and Assistance		- """ · · · · · · · · · · · · · · · · ·	
1 Does the organization	on maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grant	ts or assistance,	and	
the selection criteria	used to award the grants or assistance?		X Yes No	

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) ENCOMPASS LLC							
11426 ROCKVILLE PIKE, SUITE 229	52-2228651		379,694.				NEWBORN HEALTH
(2) JACKSON COUNTY BOARD OF EDUCATION							
PO BOX 217, HWY 421 S MCKEE, KY 40447	61-6001324		374,425.				DELIVER EDUCATION
(3) MARION COUNTY BOARD OF EDUCATION							
1010 HWY 13 NORTH, STE 2 COLUMBIA, MS 39429	64-6000671		365,397.				DELIVER EDUCATION
(4) TANGO INTERNATIONAL, INC.							
406 S. 4TH AVENUE TUSCON, AZ 85701	86-0945589		357,575.				TECH SUPPORT
(5) MERCY CORPSRPS							
45 SW ANKENY ST PORTLAND, OR 97204	91-1148123	501 (C) (3)	348,322.				TECH EXPERTISE
(6) PITTSBURG SCHOOL DISTRICT USD 250							
510 DEILL ST PITTSBURG, KS 66762	48-6041349		341,062.				DELIVER EDUCATION
(7) GALLUP MCKINLEY COUNTY SCHOOLS							
640 SOUTH BOARDMAN, P.O. BOX 1	85-6005550		332,618.				DELIVER EDUCATION
(8) FOOD FOR THE HUNGRY							
1224 E WASHINGTON ST PHOENIX, AZ 85034	95-2680390	501 (C) (3)	308,171.				PROVIDE EXPERTISE
(9) MORGAN CO BOARD OF EDUCATION							
136 FLAT FORK RD WARTBURG, TN 37887	62-6000772		295,988.				DELIVER EDUCATION
(10) USD 493 COLUMBUS							
802 S HIGH SCHOOL COLUMBUS, OH 66725	48-0724445		263,160.				DELIVER EDUCATION
(11) ROANE CO BOARD OF EDUCATION							
813 CAPITOL STREET SPENCER, WV 25276	55-6000396		251,143.				DELIVER EDUCATION
(12) KINGS CANYON UNIFIED SCHOOL DIST.							
675 WEST MANNING REEDLEY, CA 93654	58-2103066		208,201.				DELIVER EDUCATION
2 Enter total number of section 501(c)(3) an	d governmen	organizations	listed in the line 1 t	able			
3 Enter total number of other organizations I	isted in the lir	e 1 table	<u></u>				
For Paperwork Reduction Act Notice, see the Instruct					······		hedule (Form 990) (201

SCHEDULE I	
(Form 990)	

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

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

Attach to Form 990.

2014 Open to Public Inspection

No

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

06-0726487

SAVE THE CHILDREN FEDERATION, INC.

Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
 X Yes

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) MOUND BAYOU SCHOOL DISTRCT							
201 GREEN STREET MOUND BAYOU, MS 38762	64-0802373	501 (C) (3)	206,530.				DELIVER EDUCATION
(2) PATH							
7475 DAKIN STREET, SUITE 600	91-1157127	501 (C) (3)	203,663.				MATERNAL/NEWBORN
(3) FLORENCE SCHOOL DISTRICT THREE							
PO DRAWER 1389, 125 SOUTH	57-0641054		197,700.				DELIVER EDUCATION
(4) LAKE QUINAULT SCHOOL DISTRICT							
PO BOX 38, 6130 STATE HWY 101	91-0997236		188,374.				DELIVER EDUCATION
(5) UNIONTOWN USD 235							
601 FIFTH UNIONTOWN, KS 66779	48-0720518		182,379.				DELIVER EDUCATION
(6) USD 247							
506 S.SMELTER ST CHEROKEE, KS 66724	48-0725234		179,831.				DELIVER EDUCATION
(7) MCDOWELL COUNTY BOE							
30 CENTRAL AVE WELCH, WV 24801	55-6000356		175,819.				DELIVER EDUCATION
(8) OWSLEY COUNTY BOARD OF EDUCATION							
ROUTE 3, P.O. BOX 340 BOONEVILLE, KY 41314	61-6001246		175,248.				DELIVER EDUCATION
(9) NEW AMERICA FOUNDATION							
1899 L STREET NW, SUITE 400	52-2096845		167,918.				YOUTHSAVE CONSORTIUM
(10) PARSONS USD #503							
2900 SOUTHERN AVE. PARSONS, KS 67357	48-6040371		163,783.				DELIVER EDUCATION
(11) FORREST CITY PUBLIC SCHOOLS							
625 IRVING STREET FORREST CITY, AR 72335	71-6020499		156,664.				DELIVER EDUCATION
(12) HELENA-WEST HELENA SCHOOL DISTRICT							
305 VALLEY DR. HELENA, AR 72342	71-6020534		155,780.				DELIVER EDUCATION
2 · Enter total number of section 501(c)(3) ar	nd governmen	t organizations	listed in the line 1 t	able		: >	•
3 Enter total number of other organizations	listed in the li	ne 1 table	<u></u>				

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

Schedule I (Form 990) (2014)

JSA

			Assistance to Idividuals ir	-			20 14
· Com	plete if the or	ganization ans	wered "Yes" to Fo	orm 990, Part IV,	line 21 or 22.		
Department of the Treasury	tion about Sc		tach to Form 990. 1 990) and its instr	uctions is at www	v.irs.aov/form990.		Open to Public Inspection
Name of the organization						Employer identificati	
SAVE THE CHILDREN FEDERATION, INC						06-0726487	
Part I General Information on Grants an		1				00 0120101	
 Does the organization maintain records to s the selection criteria used to award the gran Describe in Part IV the organization's proce Part II Grants and Other Assistance to D Part IV, line 21, for any recipient t 	ts or assistance dures for mon Domestic Org	e? itoring the use	of grant funds in the nd Domestic Gov	United States. ernments. Com		ation answered "Y	X Yes No es" to Form 990,
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) USD #445 - COFFEYVILLE							
615 ELLIS COFFEYVILLE, KS 67337	48-0698616		153,366.				DELIVER EDUCATION
(2) UNIFIED SCHOOL DISTRICT NO.504							
719 FOURTH STREET PO BOX 129	48-0726957		152,353.				DELIVER EDUCATION
(3) CHINLE UNIFIED SCHOOL DISTRICT							
US 191 & NAVAJO ROUTE #7 CHINLE, AZ 86503	86-6006232		147,910.				DELIVER EDUCATION
(4) ORANGEBURG CONSOLIDATE SD FIVE							
578 ELLIS AVE ORANGEBURG, SC 29115	57-6000772		147,373.				DELIVER EDUCATION
(5) AMITE COUNTY SCHOOL DISTRICT							
333 MAGGIE STREET LIBERTY, MS 39645	64-6000075		144,696.				DELIVER EDUCATION
(6) PERRY COUNTY BOARD OF ED.							
333 S MILL ST LINDEN, TN 37096	62-6000787	· · · · · · · · · · · · · · · · · · ·	144,185.				DELIVER EDUCATION
(7) COOPERATIVE FOR ASSISTANCE	_						
151 ELLIS NE ATLANTA, GA 30303	13-1685039		143,622.				HIV/AIDS ACTIVITIES
(8) UNIFIED SCHOOL DISTRICT NO.404							
6860 SE HWY 66 RIVERTON, KS 66770	48-0699378		142,820.				DELIVER EDUCATION
(9) HOPE PUBLIC SCHOOL DISTRICT	_						
117 EAST SECOND STREET HOPE, AR 71801	71-6021044	······	141,208.		· · · · · · · · · · · · · · · · · · ·		DELIVER EDUCATION
(10) ALAMOSA SCHOOL DISTRICT							
209 VICTORIA AVE. ALAMOSA, CO 81101	84-6011793		139,618.				DELIVER EDUCATION
11) BONANZA BUYING CENTER							
629 HUMMINGBIRD ROAD, PO BOX 26	72-6001459	501 (C) (3)	137,176.				DELIVER EDUCATION
12) MASON CO BOARD OF EDUCATION	_						
1200 MAIN STREET POINT PLEASANT, WV 25550	55-6000353		132,574.				DELIVER EDUCATION
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations 						· · · · · · · · · · · ▶	
For Paperwork Reduction Act Notice, see the Instruc	tions for Form 9	90.				Sci	nedule I (Form 990) (2014)
JSA							
4E1288 1.000 1237AH 2219	7	7 14-6F	2523	3569	-		PAGE 79

SCHEDULE I Grants and Other Assistance to Organizations,								OMB No. 1545-0047
(Form 990)	^{n 990)} Governments, and Individuals in the United States							
Department of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.							Open to Public
Internal Revenue Service	► Inform	ation about Sc	hedule I (Form	n 990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization							Employer identific	ation number
SAVE THE CHILDE	REN FEDERATION, INC	2					06-07264	87
Part I General I	nformation on Grants a	nd Assistance)					
1 Does the organiz	zation maintain records to	substantiate the	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	s or assistance, an	d
	eria used to award the gra							X Yes No
	IV the organization's proce							
Part II Grants ar Part IV, Iir	nd Other Assistance to the 21, for any recipient	Domestic Org that received	anizations a more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com be duplicated if a	plete if the organiz additional space is r	ation answered ' eeded.	'Yes" to Form 990,
	address of organization 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) MCCREARY CO. BOAR	D OF EDUCATION							
120 RAIDER WAY ST		61-6001376		126,540.				DELIVER EDUCATION
(2) USD # 286 CHAU	TAUQUA CO.							
302 N. SHERMAN SE	DAN, KS 67361	48-0721024		126,504.				DELIVER EDUCATION
(3) TANGO INTERNATION	AL, INC.							
406 S. 4TH AVENUE	TUSCON, AZ 85701	86-0945589		125,711.				TECH SUPPORT
(4)								

302 N. SHERMAN SEDAN, KS 67361	48-0721024	126,504.	DELIVER EDUCATION
(3) TANGO INTERNATIONAL, INC.			
406 S. 4TH AVENUE TUSCON, AZ 85701	86-0945589	125,711.	TECH SUPPORT
(4) TAHOLAH SCHOOL DISTRICT			
PO BOX 249, 600 CHITWHIN DR	91-6215570	121,565.	DELIVER EDUCATION
(5) PARTNERSHIP WITH CHILDREN, INC.			
299 BROADWAY, SUITE 1300 NEW YORK, NY 10007	13-5596751	121, 344.	CHILD PROTECTION
(6) BELLS CITY SCHOOL			
4532 HWY 88 SOUTH BELLS, TN 38006	62-6000245	119,885.	DELIVER EDUCATION
(7) TIPTON COUNTY BOARD OF EDUCATION			
1580 HWY 51S COVINGTON, TN 38019	62-6000870	116,475.	DELIVER EDUCATION
(8) UNIFIED SCHOOL DISTRICT #210			
205 E 6TH ST HUGOTON, KS 67951	48-0724334	110,983.	DELIVER EDUCATION
(9) LEE COUNTY SCHOOL DISTRICT-SC			
521 PARK STREET, PO BOX 507	57-6000377	110,727.	DELIVER EDUCATION
(10) USD 505 CHETOPA-ST. PAUL			
430 ELM STREET CHETOPA, KS 67336	48-6039273 501 (C) (3)	108,731.	DELIVER EDUCATION
(11) AUGUSTA PUBLIC SCHOOL			
320 SYCAMORE AUGUSTA, AR 72006	71-6020508	105,725.	DELIVER EDUCATION
(12) SAN DIEGO RIVERSIDE CHARTER SCHOOL			
P O BOX 99 504 MISSION ROAD	85-0464915	105,192.	DELIVER EDUCATION
2 Enter total number of section 501(c)(3) an	d government organizations lis	ed in the line 1 table	· · · · · · · · · · · · · · · · · · ·
		<u></u>	
For Paperwork Reduction Act Notice, see the Instruct			Schedule I (Form 990) (2014)

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.		OMB No. 1545-0047
Name of the organization		Employer ident	ification number
SAVE THE CHILDREN FEDERATION, INC.			5487
Part I General Ir	nformation 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 X Yes 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.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 21, for any recipient that 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) ElN	(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) UNION COUNTY SCHOOL DISTRICT							
130 WEST MAIN ST UNION, SC 29739	57-6004861		105,027.				DELIVER EDUCATION
(2) UNIFIED SCHOOL DISTRICT # 508 - BAXTER SPRI							
1108 MILITARY BAXTER SPRINGS, KS 66713	48-6041681		100,723.				DELIVER EDUCATION
(3) SAN CARLOS UNIFIED SCHOOL DISTRICT							
P.O. BOX 207, SAN CARLOS AVENUE	86-6000454		99,614.				DELIVER EDUCATION
(4) HUMBOLDT UNIFIED SCHOOL DISTRICT 258							
801 NEW YORK ST. HUMBOLDT, KS 66748	48-0698395		95,540.				DELIVER EDUCATION
(5) ELKO COUNTY SCHOOL DISTRICT							
850 ELM ST ELKO, NV 89801	88-6000985		94,295.				DELIVER EDUCATION
(6) CROCKETT COUNTY SCHOOLS							
102 N CAVALIER DR ALAMO, TN 38001	62-6000547		94,083.				DELIVER EDUCATION
(7) FRANKLIN COUNTY BOARD OF EDUCATION							
215 S COLLEGE ST WINCHESTER, TN 37398	62-6000593		92,016.				DELIVER EDUCATION
(8) CALHOUN COUNTY BOARD OF EDUCATION							
540 ALAN MOLLOHAN DRIVE MT. ZION, WV 26151	55-6000309		87,858.				DELIVER EDUCATION
(9) EPISCOPAL SOCIAL SERVICES							
305 SEVENTH AVENUE NEW YORK, NY 10001	13-3709095		87,343.				CHILD PROTECTION
(10) CARE, INC.							
151 ELLIS STREET NE ATLANTA, GA 30303	13-1685039		86,463.				PROVIDE SUPPORT
(11) BARNWELL COUNTY SCHOOL DISTRICT # 19							
297 PASCALLAS STREET BLACKVILLE, SC 29817	57-6000126		84,553.				DELIVER EDUCATION
(12) QUITMAN COUNTY DEV'T ORG, INC							
201 HUMPHREY AVE. MARKS, MS 38646	64-0629668	501 (C) (3)	81,961.				DELIVER EDUCATION
2 Enter total number of section 501(c)(3) ar	d government	organizations	listed in the line 1 t	able			
3 Enter total number of other organizations							•
For Paperwork Reduction Act Notice, see the Instruct							hedule I (Form 990) (2014

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No

SCHEDULE I	
(Form 990)	

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

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

Attach to Form 990.

2014 Open to Public Inspection

No

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 06-0726487

SAVE THE CHILDREN FEDERATION, INC.

Part I General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
 X Yes

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government		(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) HAYWOOD COUNTY SCHOOL DISTRICT							
900 E. MAIN STREET BROWNSVILLE, TN 38012	62-6000659		81,533.				DELIVER EDUCATION
(2) CAMPBELL COUNTY BOARD OF EDUCATION							
172 VALLEY ST. JACKSBORO, TN 37757	62-6000507		76,733.				DELIVER EDUCATION
(3) GANADO SCHOOL DISTRICT							
HIGHWAY 264, PO BOX 1757 GANADO, AZ 86505	86-0394254		76,239.				DELIVER EDUCATION
(4) HARDEMAN COUNTY BOE							
PO BOX 112, 10815 OLD HWY 64	62-6000649		75,566.				DELIVER EDUCATION
(5) BARNWELL SCHOOL DISTRICT #45							
770 HAGOOD AVENUE BARNWELL, SC 29812	57-6000126		75,480.				DELIVER EDUCATION
(6) MENDOTA UNIFIED SCHOOL DISTRICT							
115 MCCABE AVENUE MENDOTA, CA 93640	77-0406030		75,249.				DELIVER EDUCATION
(7) PCI - PROJECT CONCERN INTERNATIONAL							
5151 MURPHY CANYON ROAD, SUITE 320	95-2248462 503	1 (C) (3)	74,788.				PROVIDE SUPPORT
(8) JEFFERSON DAVIS SCHOOL DISTRICT							
1025 3RD STREET PRENTISS, MS 39474	64-6009027		74,485.				DELIVER EDUCATION
(9) VISITING NURSE SERVICE OF NEW YORK							
216 BEACH 87TH STREET	13-1624211 503	1 (C) (3)	74,425.				FACILITY REPAIR
(10) BREATHITT COUNTY SCHOOL BOARD							
420 COURT STREET, P.O. BOX 750	61-6001304		73,478.				DELIVER EDUCATION
(11) ZUNI PUBLIC SCHOOL DISTRICT							
P.O. DRAWER A, 12 TWIN BUTTES DR	85-0278577		71,678.				DELIVER EDUCATION
(12) MOORE PUBLIC SCHOOLS/ISD I-2							
1500 SE 4TH STREET MOORE, OK 73160	73-6021049		66,848.				PROGRAM SERVICES
2 Enter total number of section 501(c)(3) and	nd government or	ganizations	listed in the line 1 ta	able ·	,	•	•

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

Schedule I (Form 990) (2014)

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SCHEDULE I (Form 990)				Assistance t ndividuals ir			-	OMB No. 1545-0047
(2014				
·	Com	Diete if the o	-	wered "Yes" to Fo tach to Form 990.	orm 990, Part IV,	line 21 of 22.		Open to Public
Department of the Treasury Internal Revenue Service	► Informat	ion about So		990) and its instr	uctions is at www	v.irs.aov/form990.		Inspection
Name of the organization						<u> </u>	Employer identifica	tion number
SAVE THE CHILDF	REN FEDERATION, INC.						06-072648	7
	nformation on Grants and	Assistance	9					
	zation maintain records to su			e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	l
	eria used to award the grant							X Yes No
2 Describe in Part	IV the organization's proced	lures for mor	itoring the use	of grant funds in the	United States.			
Part II Grants an Part IV, Iir	nd Other Assistance to D ne 21, for any recipient th	omestic Org	ganizations ar more than \$5	nd Domestic Gov ,000. Part II can t	ernments. Com be duplicated if a	plete if the organiz additional space is r	ation answered " needed.	Yes" to Form 990,
	address of organization 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) WILKINSON COUNTY	SCHOOL DISTRICT							
	BOX 785 WOODVILLE, MS 39669	64-6001230		64,214.				DELIVER EDUCATION
(2) CATHOLIC RELIEF S	SERVICES							
228 W. LEXINGTON	ST. BALTIMORE, MD 21230	13-5563422	501 (C) (3)	63,895.				PROVIDE SUPPORT
(3) LAUDERDALE COUNTY	SCHOOL DISTRICT							
402 S. WASHINGTON	N STREET RIPLEY, TN 38063	62-6000707		63,748.				DELIVER EDUCATION
(4) WEST TALLAHATCHIE	SCHOOL DISTRICT							
1096 FRIENDSHIP F	RD W. SUMNER, MS 38966	64-0798045		62,742.				DELIVER EDUCATION
(5) CENTRAL HEIGHTS U	JSD 288							
3521 ELLIS RD RIC	CHMOND, VA 66080	48-0697796		61,928.				DELIVER EDUCATION
(6) TIPTON SCHOOL DIS	STRICT							
PO BOX 787, 370 N	N EVANS RD TIPTON, CA 93272	91-1883652		61,535.				DELIVER EDUCATION
(7) CLARENDON COUNTY	SCHOOL DISTRICT 1	_						
P.O. BOX 38 SUMME	ERTON, SC 29148	57-0481945		61,234.				DELIVER EDUCATION
(8) ALPAUGH UNIFIED S	SCHOOL DIST							
5313 ROAD 39 (WII	LBUR PO BOX 9	77-0031861		60,355.				DELIVER EDUCATION
(9) STATEN ISLAND MEN	NTAL HEALTH SOCIETY	_						
669 CASTLETON AVE	E. STATEN ISLAND, NY 10301	13-5623279	501 (C) (3)	60,180.				CHILD PROTECTION
(10) WILLISTON SCHOOL	DISTRICT 29							
OFFICE OF FINANCE	E, 12233 MAIN STREET	57-6001201		59,803.				DELIVER EDUCATION
(11) TERRA BELLA UNION	N SCHOOL DISTRICT	_						
9121 ROAD 240 TEF	RRA BELLA, CA 93270	77-0563826		58,821.				DELIVER EDUCATION
(12) ST. MARTIN PARISH	H SCHOOL BOARD	_						
305 WASHINGTON ST		72-6001274		58,712.	l			DELIVER EDUCATION
	nber of section 501(c)(3) an							•
3 Enter total nur	nber of other organizations l	isted in the li	ne 1 table			<u></u>	<u></u>	•
For Paperwork Reducti	on Act Notice, see the Instruct	ions for Form 9	90.				S	chedule I (Form 990) (2014)
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JSA

SCHEDULE I	
(Form 990)	

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

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

Attach to Form 990.

2014 Open to Public Inspection

No

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 06-0726487

SAVE THE CHILDREN FEDERATION, INC.

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) COAHOMA COUNTY SCHOOL DISTRICT							
1555 LEE DRIVE, PO BOX 820	64-6000266		57,521.				DELIVER EDUCATION
(2) SUNNYSIDE UNION SCHOOL DISTRICT							
21644 AVENUE 196 STRATHMORE, CA 93267	77-0563300		57,162.				DELIVER EDUCATION
(3) FARMERSVILLE USD	_						
571 E CITRUS AVENUE FARMERSVILLE, CA 93223	77-0565331		56,524.				DELIVER EDUCATION
(4) ST. CHARLES SCHOOL							
P.O. BOX 339, 355 SAN CARLOS AVE.	86-0393097		54,467.				DELIVER EDUCATION
(5) PLEASANT VIEW SCHOOL DISTRICT							
14004 ROAD 184 PORTERVILLE, CA 93257	77-0563833		51,560.				DELIVER EDUCATION
(6) OCEAN BEACH UNIFIED SCHOOL DIST							
500 WASHINGTON AVE, PO BOX 778	91-0972358		51,428.				DELIVER EDUCATION
(7) WILSONA SCHOOL DISTRICT							
18050 EAST AVENUE O PALMDALE, CA 93591	95-6003534		51,180.				DELIVER EDUCATION
(8) FREMONT PUBLIC SCHOOLS							
130 E. 9TH STREET FREMONT, NE 68025	47-6002550		50,919.				DELIVER EDUCATION
(9) SOUTH BEND SCHOOL DISTRICT							
PO BOX 437, 405 E. 1ST SOUTH BEND, WA 98586	91-0999640		50,402.		J		DELIVER EDUCATION
(10) REACH OUT AND READ							
56 ROLAND ST., SUITE 100D	04-3481253	501_(C)_(3)	50,000.				DELIVER EDUCATION
(11) MERCY CORPSRPS							
45 SW ANKENY ST PORTLAND, OR 97204	91-1148123	501 (C) (3)	49,959.				PROVIDE SUPPORT
(12) PCI - PROJECT CONCERN INTERNATIONAL							
5151 MURPHY CANYON ROAD, SUITE 320	95-2248462		49,572.				PROVIDE SUPPORT
 2 Enter total number of section 501(c)(3) an 3 Enter total number of other organizations I 	d government isted in the lin	organizations	listed in the line 1 t	able		· · · · · · · · · · · •	

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

Schedule I (Form 990) (2014)

(Form 990) GO Comp Department of the Treasury Internal Revenue Service Informat	Vernmer plete if the or	nts, and Ir rganization ans Att	Assistance t Idividuals in Swered "Yes" to Fo tach to Form 990. 1 990) and its instr	orm 990, Part IV,	I States line 21 or 22.		2014 DMB No. 1545-0047 2014 Open to Public Inspection
Name of the organization						Employer identificati	
SAVE THE CHILDREN FEDERATION, INC.						06-0726487	
 Part I General Information on Grants and 1 Does the organization maintain records to su the selection criteria used to award the grants 2 Describe in Part IV the organization's proced 	ubstantiate th s or assistanc lures for mon	e amount of the e? itoring the use	of grant funds in the	United States.		[X Yes No
Part II Grants and Other Assistance to D Part IV, line 21, for any recipient th							es" to Form 990,
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) ONAGA USD 322							
500 HIGH STREET ONAGA, KS 66521	48-0721360		48,994.				DELIVER EDUCATION
(2) BAUXITE SCHOOL DISTRICT							
800 SCHOOL STREET BAUXITE, AR 72011	71-6020959		48,738.				DELIVER EDUCATION
(3) VISALIA UNIFIED SCHOOL DISTRICT							
5000 WEST CYPRESS AVENUE VISALIA, CA 93277	77-0531549		47,845.				DELIVER EDUCATION
(4) AMERICAN ACADEMY OF PEDIATRICS							
54 WILTON ROAD WESTPORT, CT 68801	36-2275597	501 (C) (3)	47,674.				SURVIVE & THRIVE GDA
(5) WASHINGTON PARISH SCHOOL DISTRICT					<u></u>		
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459		47,478.				DELIVER EDUCATION
(6) CORE, INC.							
919 18TH ST. NW SUITE 350	31-1744950	501 (C) (3)	47,040.				PROVIDE SUPPORT
(7) INTERNATIONAL MEDICAL CORPS					······································		
1919 SANTA MONICA BLVD, SUITE 400	95-3949646		46,341.				PROVIDE SUPPORT
(8) FOOD FOR THE HUNGRY, INC.							
1224 E. WASHINGTON STREET PHOENIX, AZ 85034	95-2680390	501 (C) (3)	45,620.				PROVIDE SUPPORT
(9) LETCHER CO. BOARD OF EDUCATION							
222 PARKS STREET WHITESBURG, KY 41858	61-6001375		45,117.				DELIVER EDUCATION
(10) GADSDEN INDEPENDENT SCHOOL DISTRICT							
4950 MCNUTT RD. ANTHONY, NM 88021	85-6000313		45,026.				DELIVER EDUCATION
(11) OIC INTERNATIONAL							
1120 G STREET NW, SUITE 600	23-1726113	501 (C) (3)	44,974.				PROVIDE SUPPORT
(12) TULSA PARTNERS, INC		<u> </u>	1				
PO BOX 2192, 712 S WHEELING TULSA, OK 74101	73-1604421	501 (C) (3)	43,659.				PROVIDE PROGRAMS
2 Enter total number of section 501(c)(3) and				able	······	►	
3 Enter total number of other organizations I						•••••••••••	
For Paperwork Reduction Act Notice, see the Instruct						Sct.	nedule I (Form 990) (2014)
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SCHEDULE I	
(Form 990)	

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

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

Attach to Form 990.

2014 Open to Public Inspection

No

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

06-0726487

SAVE THE CHILDREN FEDERATION, INC.

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) JOHNS HOPKINS UNIVERSITY							
DEPARTMENT OF INTERNATIONAL HEALTH, HEALTH	52-0595110	501 (C) (3)	43,368.				NEWBORN HEALTH
(2) KUMC RESEARCH INSTITUTE, INC.							
3901 RAINBOW RD., MS 1309	48-1108830	501 (C) (3)	43,227.				DELIVER EDUCATION
(3) SUNSHINE CHILDREN DAYCARE, LLC							
2929 WEST 31ST STREET BROOKLYN, NE 11224	27-0961583		42,406.	······································			DELIVER EDUCATION
(4) HERINGTON USD 487							
19 NORTH BROADWAY HERINGTON, KS 67449	48-6018834		42,090.				DELIVER EDUCATION
(5) FOWLER USD 225							
P.O. BOX 170 FOWLER, KS 67844	48-0724608		41,592.				DELIVER EDUCATION
(6) BOYS & GIRLS CLUB OF THE MS DELTA							
516 NORTH CANAL STREET YAZOO CITY, MS 39194	45-0469376	501 (C) (3)	41,387.				DELIVER EDUCATION
(7) MENIFEE COUNTY SCHOOL BOARD							
6882 US HWY 460 E DENNISTON, KY 40316	61-6001279	1	40,918.				DELIVER EDUCATION
(8) NEIGHBORS IN NEED OF SERVICES, INC.							
402 W. ROBERTSON SAN BENITO, TX 78587	74-2574527	501 (C) (3)	40,606.		· · · · · · · · · · · · · · · · · · ·		CHILD PROTECTION
(9) ACDI/VOCA	1						
50 F STREET, NW, SUITE #107	52-0811461	501 (C) (3)	40,347.	·			PROVIDE SUPPORT
(10) OSCEOLA SCHOOL DISTRICT							
2750 W. SEMMES OSCEOLA, AR 72370	71-6021600		40,080.				DELIVER EDUCATION
(11) THE ACTION CENTER							
1414 WHEATLEY STREET FAR ROCKAWAY, NY 11691	75-3014243	501 (C) (3)	40,000.				PROGRAM SERVICES
(12) ST. VINCENT'S SERVICES, INC.	1						
66 BOERUM PLACE BROOKLYN, NY 11201	11-1631823		39,961.				PROGRAM SERVICES
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations I 	d governmen isted in the lir	t organizations	listed in the line 1 t	able		· · · · · · · · · · · · · · · · · · ·	

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

SCHEDULE I (Form 990)	Form 990) Department of the Treasury								
Internal Revenue Service	Informa	tion about So	hedule I (Form	990) and its instr	uctions is at www	v.irs.gov/form990.		Inspection	
Name of the organization							Employer identificati	on number	
SAVE THE CHILDE	REN FEDERATION, INC.						06-0726487		
Part I General I	nformation on Grants and	d Assistance	9						
1 Does the organiz	zation maintain records to su	ubstantiate th	e amount of the	e grants or assistar	nce, the grantees	eligibility for the grants	s or assistance, and		
	teria used to award the grant							X Yes No	
 Describe in Part 	IV the organization's procee	dures for mon	itoring the use	of grant funds in the	United States.				
Part II Grants ar Part IV, Iir	nd Other Assistance to D ne 21, for any recipient th	omestic Org	janizations ar more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com e duplicated if a	plete if the organiza additional space is n	ation answered "Y needed.	es" to Form 990,	
1 (a) Name and	address of organization 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) SCHUYLER COMMUNIT	IY SCHOOL								
2404 DENVER STREE	ET PO BOX 431	47-0535355		38,774.				DELIVER EDUCATION	
(2) FAIRFIELD U.S.D.	#310								
16115 S. LANGDON	ROAD LANGDON, KS 67583	48-0720350		38,124.				CHILD PROTECTION	
(3) CLARENDON SCHOOL	DISTRICT #2								
P.O. BOX 1252, 15	5 MAJOR DRIVE	57-6000708		38,001.				DELIVER EDUCATION	
(4) PYRAMID LAKE PAIL	JTE TRIBE								
208 CAPITOL HILL,	. PO BOX 256	88-0058154		37,141.				DELIVER EDUCATION	
(5) BOSTON UNIVERSITY	Y MEDICAL CENTER CAMPUS								
25 BUICK STREET 2	2ND FLOOR BOSTON, MA 02215	04-2103547		37,106.				HEALTH ACTIVITIES	
(6) CENTER CONSOLIDAT	TED SCHOOL DISTRICT 26JT								
550 S. SYLVESTER	AVENUE CENTER, CO 81125	84-6001943		36,013.				DELIVER EDUCATION	
(7) WINNEBAGO TRIBE C	DF NEBRASKA	_							
100 BLUFF STREET	WINNEBAGO, NE 68071	47-0489118		34,217.				DELIVER EDUCATION	
(8) GREENE COUNTY BOA	ARD OF EDUCATION								
220 MAIN ST. EUTA	AW, AL 35462	63-6000909		33,709.				DELIVER EDUCATION	
(9) SOUTH CONEJOS SCH	HOOL DISTRICT								
620 PINE STREET A	ANTONITO, CO 81120	84-6001045		32,557.				DELIVER EDUCATION	
(10) KEARNEY PUBLIC SC	CHOOLS								
310 WEST 24TH ST	KEARNEY, NE 68845	47-6001393		31,572.				DELIVER EDUCATION	
(11) EDUCARE OF OMAHA		_							
2123 PAUL ST OMAN	HA, NE 68102	80-0015385	501 (C) (3)	31,162.				DELIVER EDUCATION	
(12) COUNSELING IN SCH	HOOLS, INC.	_							
505 EIGHTH AVE, S			501 (C) (3)	30,056.				CHILD PROTECTION	
2 Enter total nur	mber of section 501(c)(3) an	d governmen	t organizations	listed in the line 1 t	able				
3 Enter total nur	mber of other organizations	listed in the lir	ne 1 table	<u></u>	<u></u>	<u> </u>	 >		
For Paperwork Reducti	ion Act Notice, see the Instruct	ions for Form 9	90.				Sch	nedule I (Form 990) (2014)	
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SCHEDULE I		Grants ar	nd Other A	Assistance t	o Organiza	itions,		OMB No. 1545-0047
(Form 990)		overnmei		ର୍ଲ୍ୟ 🖌				
			rganization and		2014			
	0011			Open to Public				
Department of the Treasury Internal Revenue Service		Inspection						
Name of the organization	· ····································			,			Employer identificat	tion number
SAVE THE CHILDRE	EN FEDERATION, INC	•					06-072648	7
Part I General In	formation on Grants an	d Assistance	9		······································			· · · · · · · · · · · · · · · · · · ·
	ation maintain records to s	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	eligibility for the grant	ts or assistance, and	
	ria used to award the gran							X Yes No
	V the organization's proce							
	d Other Assistance to D		-	-		nlete if the organiz	ration answered "Y	es" to Form 990
	e 21, for any recipient t							
·	· · ·					· · · · · · · · · · · · · · · · · · ·		
	ddress of organization	(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) LUTHERAN WORLD REL	TEF							
700 LIGHT STREET B	· · · · · · · · · · · · · · · · · · ·	13-2574963	501 (C) (3)	29,840.				PROVIDE SUPPORT
(2) SCOTT CO. SCHOOL D								
208 COURT STREET,		62-6000823		28,701.				DELIVER_EDUCATION
(3) CENTER FOR CHILDRE	N'S INITIATI							
322 EIGHTH AVENUE,	4TH FLOOR	13-3039812		28,460.				TECH SUPPORT
(4) USD #257 - IOLA								
408 NORTH COTTONWO	OD STREET IOLA, KS 66749	48-0699446		25,498.				DELIVER EDUCATION
(5) SEK-CAP, INC								
BOX 128, 401 NORTH	GIRARD, KS 66743	48-0725078	501 (C) (3)	23,956.				DELIVER EDUCATION
(6) CORE INC								
919 18TH ST. NW SU	ITE 350	31-1744950		22,518.				TECH SUPPORT
(7) UNIFIED SCHOOL DIS	TRICT #234							
424 S. MAIN FORT S	COTT, KS 66701	48-0698393		22,137.				DELIVER EDUCATION
(8) EARLE SCHOOL DISTR	ICT							
802 BARTON, PO BOX	637 EARLE, AR 72331	71-6021260		21,886.		ļ	Ļ	DELIVER EDUCATION
(9) CAMDEN FAIRVIEW SC	HOOL DISTRICT	_						
615 CLIFTON ST CAM	DEN, AR 71701	71-6020834		21,662.				DELIVER EDUCATION
(10) MIAMI AREA UNIFIED	S.D. #40							
P.O. BOX 2070 MIAM	I, AZ 85539	86-6000456		21,633.				DELIVER EDUCATION
(11) OSKALOOSA USD 341	······							
404 PARK ST OSKALO	OSA, KS 66066	48-6034902		21,265.				DELIVER EDUCATION
(12) VISITING NURSE SER	VICE OF NEW YORK	4						
216 BEACH 87TH STR 2 Enter total numb	Der of section 501(c)(3) an	13-1624211		20,646.	l			FACILITY REPAIR

3 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) (2014)

►

· Co	mplete if the o	-	wered "Yes" to Fe tach to Form 990.	orm 990, Part IV,	line 21 or 22.		20 14 Open to Public			
Department of the Treasury Internal Revenue Service	nation about S		1 990) and its instr	uctions is at usual	v iro gov/form000		Inspection			
Name of the organization	nation about 3		1 550) and its mist			Employer identificat				
SAVE THE CHILDREN FEDERATION, IN	Ċ					06-0726487				
Part I General Information on Grants a		e				00-0720407	·			
1 Does the organization maintain records to			e grants or assista	nce the grantees	' eligibility for the gran	ts or assistance and	mmmen - ' - Induterrenen			
the selection criteria used to award the gra		0	•	-			X Yes No			
2 Describe in Part IV the organization's proc										
Part II Grants and Other Assistance to Part IV, line 21, for any recipient	Domestic Or	ganizations a	nd Domestic Gov	ernments. Corr	plete if the organiz additional space is	zation answered "Y needed.	es" to Form 990,			
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) CORE, INC.										
919 18TH ST. NW SUITE 350	31-1744950	501 (C) (3)	20,000.				PROVIDE SUPPORT			
(2) CORE, INC.										
919 18TH ST. NW SUITE 350	31-1744950	501 (C) (3)	20,000.				PROVIDE SUPPORT			
(3) PCI - PROJECT CONCERN INTERNATIONAL										
5151 MURPHY CANYON ROAD, SUITE 320	95-2248462	501 (C) (3)	20,000.		**************************************		PROVIDE SUPPORT			
(4) COOPERATIVE COUNSELING SERVICES										
213 SUMMIT ROAD MOUNTAINSIDE, NJ 70920	14-1935642	501 (C) (3)	19,984.				PROGRAM SERVICES			
(5) AGAPELAND LEARNING CENTER										
2404 RIDGEWOOD DRIVE MOORE, OK 73160	73-1503039		18,000.				PROGRAM SERVICES			
(6) BRIGHT STAR ACADEMY INC.										
3050 OCEANSIDE ROAD OCEANSIDE, NE 11572	26-3196839	501 (C) (3)	17,044.				FACILITY REPAIR			
(7) UNICEF										
125 MAIDEN LANE NEW YORK, NY 10038	13-1760110	501 (C) (3)	17,000.				GLOBAL SUPPLY PLANNI			
(8) ACTS COMMUNITY DEVELOPMENT CORP.										
2114 MERMAID AVENUE BROOKLYN, NE 11224		501 (C) (3)	16,755.				PROGRAM SERVICES			
(9) NORTHWEST ARKANSAS CHILD CARE RESOURCE & F	<u>E</u>									
614 E EMMA AVE SPRINGDALE, AR 72764		501 (C) (3)	16,340.				CHILD PROTECTION			
(10) WHITE RIVER PLANNING & DEVELOPMENT DISTRIC										
1652 WHITE DRIVE BATESVILLE, AR 72501	71-0398870	501 (C) (3)	16,340.				CHILD PROTECTION			
(11) JSI RESEARCH AND TRAINING INC										
44 FARNSWORTH STREET BOSTON, MA 22101	04-2679824		16,282.				MARKET SUPPORT PROJE			
(12) ELK VALLEY USD 283										
P O BOX 87 LONGTON, KS 67352	48-0724213	1	15,603.	1	1	1	DELIVER EDUCATION			

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

Schedule I (Form 990) (2014)

SCHEDULE I (Form 990)

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

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

Attach to Form 990.



OMB No. 1545-0047

| No

Internal Revenue Service
Name of the organization

Department of the Treasury

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

Employer identification number

06-0726487

SAVE THE CHILDREN FEDERATION, INC.

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) PCI - PROJECT CONCERN INTERNATIONAL							
5151 MURPHY CANYON ROAD, SUITE 320	95-2248462	501 (C) (3)	15,000.				PROVIDE SUPPORT
(2) ROCKAWAY ARTISTS ALLIANCE, INC.							
260 EAST 116TH ST ROCKAWAY PARK, NE 11694	11-3217121		13,969.				DELIVER EDUCATION
(3) COUNCIL OF CHURCH OF THE OZARKS	_						
627 N GLENSTONE AVENUE	43-0903657		12,810.				CHILD PROTECTION
(4) BOARD OF EDUCATION OF JEFFERSON COUNTY, KEN							
3332 NEWBURG ROAD LOUISVILLE, KY 40232-5340	61-6001316		10,500.				DELIVER EDUCATION
(5) CATHOLIC SOCIAL AND COMMUNITY SERVICES, INC	_						
1790 POPPS FERRY ROAD BILOXI, MS 39532	64-0598426		10,000.				PROGRAM SERVICES
(6) HOWARD BEACH JUDEA CENTER PRESCHOOL	_						
155-41 81 STREET HOWARD BEACH, NE 11414	11-2162774		9,904.				DELIVER EDUCATION
(7) YADIRA TORRES	1						
57-39 ARVERNE BOULEVARD	27-3412958		9,369.				DELIVER EDUCATION
(8) NORTH CONEJOS SCHOOL DISTRICT R-1							
17890 US HWY 285 LA JARA, CO 81140	84-6001052		8,478.				DELIVER EDUCATION
(9) ST. LUKE UNITED METHODIST CHURCH							
1400 CLAYTON AVE TUPELO, MS 38804	64-0383876		7,994.				REPAIR FACILITY
(10) AMERICAN ACADEMY OF PEDIATRICS							
54 WILTON ROAD WESTPORT, CT 68808	36-2275597	501 (C) (3)	7,531.				HEALTH ACTIVITIES
(11) SANDY HOOK CHILD CARE CENTER, INC.							
335 PENNINGTON ROAD HIGHLANDS, NE 77320	22-2333645		7,212.				DELIVER EDUCATION
(12) FOOD FOR THE HUNGRY	_						
1224 E WASHINGTON ST PHOENIX, AZ 85034	95-2680390		6,232.				PROVIDE SUPPORT
2 Enter total number of section 501(c)(3) and	d governmen	t organizations	listed in the line 1 ta	able			•
3 Enter total number of other organizations I	sted in the li	ne 1 table		<u></u>	<u></u> .	<u></u>	

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

SCHEDULE I		Grants ar	nd Other A		OMB No. 1545-0047			
(Form 990)	overnme	nts, and Ir		2014				
Department of the Treasury Internal Revenue Service		rganization ans ► Ati chedule I (Form		Open to Public Inspection				
Name of the organization						-	Employer identifica	tion number
SAVE THE CHILDR	REN FEDERATION, INC	•					06-072648	7
Part I General In	nformation on Grants an	d Assistanc	e					
the selection crite	zation maintain records to s eria used to award the gran IV the organization's proce	ts or assistanc	æ?					X Yes No
Part II Grants an Part IV, Iir	nd Other Assistance to I ne 21, for any recipient f	Domestic Or that received	ganizations a more than \$5	nd Domestic Gov ,000. Part II can t	vernments. Com be duplicated if a	nplete if the organiza additional space is n	ation answered "N eeded.	es" to Form 990,
	address of organization 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) MOORE PUBLIC SCHO	OLS FOUNDATION							
1500 SOUTHEAST 4T	H STREET MOORE, OK 73153	73-1468939	501 (C) (3)	6,165.				PROGRAM SERVICES
(2) CHERI'S DAYCARE								

5,407

283,694.

193,944

124,365.

105,298.

79,974.

78,774.

69,779.

61,919.

55,598.

50,412.

JSA

909 SW 10TH ST MOORE, OK 73160

128 RICHMOND ROAD MANCHESTER, KY 40962

(4) AMERICAN RED CROSS: WASHINGTON, DC 20006; 2025 E ST NW WASHINGTON, DC, DC 20006

305 HEDRICK DRIVE NEWPORT, TN 37821

1156 HINDMAN BY PASS P.O. BOX 869

300 MAIN STREET WILLIAMSBURG, KY 40769

1010 HWY 13 NORTH, STE 2 COLUMBIA, MS 39429

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

(3) CLAY COUNTY BOARD OF EDUCATION

(5) ST. MARTIN PARISH SCHOOL BOARD 305 WASHINGTON STREET

(6) PERRY CO. BOARD OF EDUCATION
 315 PARK AVE. HAZARD, KY 41701

(7) COCKE CO BOARD OF EDUCATION

(8) KNOTT CO BOARD OF EDUCATION

(10) MARION COUNTY BOARD OF EDUCATION

30 CENTRAL AVE WELCH, WV 24801

(12) TIPTON COUNTY BOARD OF EDUCATION 1580 HWY 51S COVINGTON, TN 38019

(9) WHITLEY CO BOARD OF ED

(11) MCDOWELL COUNTY BOE

20-8372248

61-6001320

53-0196605

72-6001274

61-6001294

62-6000539

61-6001297

61-6001378

64-6000671

55~6000356

62-6000870

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2014)

STORM SHELTER

EMERGENCIES

AMERICAN GIRL BOOKS, DELIVER EDUCATION

TOMS SHOES & AMERICA DELIVER EDUCATION

AMERICAN GIRL BOOKS DELIVER EDUCATION

TOMS SHOES & AMERICA DELIVER EDUCATION

AMERICAN GIRL BOOKS DELIVER EDUCATION

AMERICAN GIRL BOOKS DELIVER EDUCATION

TOMS SHOES & AMERICA DELIVER EDUCATION

AMERICAN GIRL BOOKS DELIVER EDUCATION

TOMS SHOES & AMERICA DELIVER EDUCATION

CLOTHING

SCHEDULE I	
(Form 990)	

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

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

Attach to Form 990.

2014 Open to Public Inspection

Employer identification number

06-0726487

OMB No 1545-0047

No

Department of the Treasury Internal Revenue Service

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC. 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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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) JACKSON COUNTY BOARD OF EDUCATION							
PO BOX 217, HWY 421 S MCKEE, KY 40447	61-6001324			49,676.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(2) LEE COUNTY SCHOOL DISTRICT-SC							
521 PARK STREET, PO BOX 507	57-6000377			46,272.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(3) MORGAN CO BOARD OF EDUCATION							
136 FLAT FORK RD WARTBURG, TN 37887	62-6000772			43,709_		TOMS SHOES & AMERICA	DELIVER EDUCATION
(4) ROANE CO BOARD OF EDUCATION							
813 CAPITOL STREET SPENCER, WV 25276	55-6000396			41,977.		AMERICAN GIRL BOOKS,	DELIVER EDUCATION
(5) MCCREARY CO. BOARD OF EDUCATION							
120 RAIDER WAY STEARNS, KY 42647	61-6001376			39,368.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(6) AMITE COUNTY SCHOOL DISTRICT							
333 MAGGIE STREET LIBERTY, MS 39645	64-6000075			37,273.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(7) UNION COUNTY SCHOOL DISTRICT							
130 WEST MAIN ST UNION, SC 29739	57-6004861	-		33,903.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(8) HELENA-WEST HELENA SCHOOL DISTRICT			l.				
305 VALLEY DR. HELENA, AR 72342	71-6020534			33,320.		TOMS SHOES	DELIVER EDUCATION
(9) HOPE PUBLIC SCHOOL DISTRICT							
117 EAST SECOND STREET HOPE, AR 71801	71-6021044			31,108.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(10) LAUDERDALE COUNTY SCHOOL DISTRICT							
402 S. WASHINGTON STREET RIPLEY, TN 38063	62-6000707			29,472.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(11) ORANGEBURG CONSOLIDATE SD FIVE							
578 ELLIS AVE ORANGEBURG, SC 29115	57-6000772			27,787.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(12) BOYS & GIRLS CLUB OF THE MS DELTA							
516 NORTH CANAL STREET YAZOO CITY, MS 39194				27,757.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations li 	d government	organizations	listed in the line 1 t	able	•••••	🏲	

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

Schedule I (Form 990) (2014)

SCHEDULE I	Grants and Other Assistance to Organizations,		OMB No. 1545-0047		
(Form 990)	Governments, and Individuals in the United States		2014		
, 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. ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.		Open to Public Inspection		
Name of the organization		Employer iden	tification number		
SAVE THE CHILDREN FE	DERATION, INC.	06-0726	5487		

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 Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government			(c) IRC section (d) Amount of cash if applicable grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) ALAMOSA SCHOOL DISTRICT								
209 VICTORIA AVE. ALAMOSA, CO 81101	84-6011793			26,048.		AMERICAN GIRL BOOKS,	DELIVER EDUCATION	
(2) WILKINSON COUNTY SCHOOL DISTRICT								
488 MAIN ST, PO BOX 785 WOODVILLE, MS 39669	64-6001230			24,528.		TOMS SHOES & AMERICA	DELIVER EDUCATION	
(3) CABELL COUNTY BOARD OF EDUCATION								
2850 5TH AVENUE HUNTINGTON, WV 25702	55-6000306	501 (C) (3)		24,322.		AMERICAN GIRL BOOKS,	DELIVER EDUCATION	
(4) JEFFERSON DAVIS SCHOOL DISTRICT								
1025 3RD STREET PRENTISS, MS 39474	64-6009027			24,301.		AMERICAN GIRL BOOKS,	DELIVER EDUCATION	
(5) CALHOUN COUNTY BOARD OF EDUCATION	_							
540 ALAN MOLLOHAN DRIVE MT. ZION, WV 26151	556000309			23,158.		TOMS SHOES	DELIVER EDUCATION	
(6) BARNWELL SCHOOL DISTRICT #45								
770 HAGOOD AVENUE BARNWELL, SC 29812	57-6000126			20,934.		TOMS SHOES & HEALTHY	DELIVER EDUCATION	
(7) CLARENDON COUNTY SCHOOL DISTRICT 1								
P.O. BOX 38 SUMMERTON, SC 29148	57-0481945			20,331.		TOMS SHOES & AMERICA	DELIVER EDUCATION	
(8) PERRY COUNTY BOARD OF ED.	_							
333 S MILL ST LINDEN, TN 37096	62-6000787			19,711.	·	TOMS SHOES & AMERICA	DELIVER EDUCATION	
(9) BELLS CITY SCHOOL								
4532 HWY 88 SOUTH BELLS, TN 38006	62-6000245			19,704.		TOMS SHOES & AMERICA	DELIVER EDUCATION	
(10) MASON CO BOARD OF EDUCATION								
1200 MAIN STREET POINT PLEASANT, WV 25550	55-6000353			18,720.		AMERICAN GIRL BOOKS	DELIVER EDUCATION	
(11) BARNWELL COUNTY SCHOOL DISTRICT # 19								
297 PASCALLAS STREET BLACKVILLE, SC 29817	57-6000126			18,516.		TOMS SHOES & HEALTHY	DELIVER EDUCATION	
(12) OWSLEY COUNTY BOARD OF EDUCATION								
ROUTE 3, P.O. BOX 340 BOONEVILLE, KY 41314	61-6001246			17,987.		AMERICAN GIRL BOOKS	DELIVER EDUCATION	
 2 Enter total number of section 501(c)(3) an 3 Enter total number of other organizations 	d governmen listed in the lii	t organizations	listed in the line 1 i	table		· · · · · · · · · · · · · · · · · · ·		

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

Schedule I (Form 990) (2014)

No

SCHEDULE I	Grants and Other Assistance to Organizations,	OMB No. 1545-0047
(Form 990)	Governments, and Individuals in the United States	2014
	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	
Department of the Treasury	► Attach to Form 990.	Open to Public
Internal Revenue Service	▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	Inspection
Name of the organization		Employer identification number
SAVE THE CHILDREN FE	DERATION, INC.	06-0726487
Part I General Informa	tion on Grants and Assistance	

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 the selection criteria used to award the grants or assistance? X Yes

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

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part II Part IV, line 21, for any recipient that 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	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WILLISTON SCHOOL DISTRICT 29							
OFFICE OF FINANCE, 12233 MAIN STREET	57-6001201			17,358.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(2) FORREST CITY PUBLIC SCHOOLS							
625 IRVING STREET FORREST CITY, AR 72335	71-6020499			16,662.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(3) FRANKLIN COUNTY BOARD OF EDUCATION							
215 S COLLEGE ST WINCHESTER, TN 37398	62-6000593			15,849.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(4) OSCEOLA SCHOOL DISTRICT							
2750 W. SEMMES OSCEOLA, AR 72370	71-6021600			15,634.		TOMS SHOES	DELIVER EDUCATION
(5) FLORENCE SCHOOL DISTRICT THREE							
PO DRAWER 1389, 125 SOUTH BLANDING ST	57-0641054			15,613.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(6) CLARENDON SCHOOL DISTRICT #2							
P.O. BOX 1252, 15 MAJOR DRIVE	57-6000708			14,930.	· · · · · · · · · · · · · · · · · · ·	TOMS SHOES & HEALTHY	DELIVER EDUCATION
(7) PYRAMID LAKE PAIUTE TRIBE							
208 CAPITOL HILL, PO BOX 256	88-0058154			14,595.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(8) BONANZA BUYING CENTER							
629 HUMMINGBIRD ROAD, PO BOX 26	72-6001459	501 (C) (3)		13,302.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(9) HAYWOOD COUNTY SCHOOL DISTRICT							
900 E. MAIN STREET BROWNSVILLE, TN 38012	62-6000659			12,923.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(10) WEST TALLAHATCHIE SCHOOL DISTRICT							
1096 FRIENDSHIP RD W. SUMNER, MS 38966	64-0798045			12,863.		TOMS SHOES & HEALTHY	DELIVER EDUCATION
(11) HARDEMAN COUNTY BOE							
PO BOX 112, 10815 OLD HWY 64	62-6000649			12,510.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(12) WASHINGTON PARISH SCHOOL DISTRICT							
800 MAIN STREET FRANKLINTON, LA 70438	72-6001459			11,770.		TOMS SHOES	DELIVER EDUCATION
 Enter total number of section 501(c)(3) a Enter total number of other organizations 	nd government listed in the lin	organizations	listed in the line 1 t	able	· · · · · · · · · · · · · · · · · · ·		•

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

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No

SCHEDULE I	Grants ar	nd Other /	Assistance t	o Organizat	ions		OMB No. 1545-0047
			ndividuals in	-	•		
· · · ·		•	swered "Yes" to Fe				2014
Department of the Treasury	-	► At	tach to Form 990. 1 990) and its instr				Open to Public Inspection
Name of the organization	initiation about 50	fiedule i (Forn				Employer identificatio	
SAVE THE CHILDREN FEDERATION, I	INC					06-0726487	
Part General Information on Grants		2				00-0720487	
 Does the organization maintain records the selection criteria used to award the Describe in Part IV the organization's pr 	grants or assistanc rocedures for mon	e? itoring the use	of grant funds in the	United States.		[X Yes No
Part II Grants and Other Assistance Part IV, line 21, for any recipie	to Domestic Orgent that received	ganizations a more than \$5	nd Domestic Gov ,000. Part II can b	ernments. Com e duplicated if a	plete if the organiz dditional space is	zation answered "Ye needed.	es" to Form 990,
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) CROCKETT COUNTY SCHOOLS							
102 N CAVALIER DR ALAMO, TN 38001	62-6000547			11,201.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(2) CAMPBELL COUNTY BOARD OF EDUCATION			-				Brond Brown
172 VALLEY ST. JACKSBORO, TN 37757	62-6000507			11,082.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(3) QUITMAN COUNTY DEV'T ORG, INC							
201 HUMPHREY AVE. MARKS, MS 38646	64-0629668	501 (C) (3)		9,666.		TOMS SHOES	DELIVER EDUCATION
(4) MOUND BAYOU SCHOOL DISTRCT							
201 GREEN STREET MOUND BAYOU, MS 38762	64-0802373	501 (C) (3)		9,426.		TOMS SHOES	DELIVER EDUCATION
(5) BREATHITT COUNTY SCHOOL BOARD							
420 COURT STREET, P.O. BOX 750	61-6001304			5,845.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(6) SAVE THE CHILDREN ACTION NETWORK							
2000 L STREET NW, SUITE 500	45-5465189	501(C)(4)	2,091,143.				ADVOCACY AND ADMIN
(7) SAVE THE CHILDREN ACTION NETWORK							
2000 L STREET NW SUITE 500	46-5465189	501(C)(4)	184,048.				LOBBYING
(8)							
(9)			· · · · · · · · · · · · · · · · · · ·				
(10)							
(11)					No		
(12)							

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.

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2014)

JSA

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Page **2**

Schedule I (Form 990) (2014)

(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
	·				
IV Supplemental Information. Completing information.	ete this part to pro	vide the informa	ation required in	Part I, line 2, Part III, col	lumn (b), and any other additional
EDULE I, PART I, LINE 2 E THE CHILDREN FEDERATION, INC. GRAM REVIEWS WITH SCHEDULED AUDI					
SUS ACTUAL ANALYSIS COMPARING BC	TH SPENDING AG	GAINST THE L	IFE OF GRANI	ſS	
JNTS AS WELL AS THE PROJECTED AN	NUAL AMOUNT. S	SPENDING AGA	INST EACH		
NT HAS TO BE APPROVED BY THE APP	PROPRIATE SUPER	RVISOR UNDER	THE		
REGATION OF DUTIES INTERNAL CONT	ROLS CREATED I	FOR ALL FIEL	D OFFICES.		
E INTERNAL CONTROLS ARE REVIEWE	D AND UPDATED	AS APPROPRI	ATE BY THE		
) FINANCE STAFF PERSON FOR THE C	FFICE, IN CON	JUNCTION WIT	H THE AREA		

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Schedule I (Form 990) (2014)

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
		Mala Provide a start for the start of the star			
······		Wee lat			
		19			
		ana ana ana amin'ny tanàna mandritry dia mandritry dia mandritry dia mandritry dia mandritry dia mandritry dia			
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CONTROLLER, AND TESTED ON A REGULAR BASIS.

JSA 4E1504 1.000 1237AH 2219

V 14-6F

Schedule I (Form 990) (2014)

SCHEDULE J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					в No. 1 20	14	
	nent of the Treasury	► At	ttach to Form 990.	O	oen to		
	Revenue Service of the organization	Information about Schedule J (For	m 990) and its instructions is at www.irs.gov/i	Employer identification	Inspe		n
	•			06-0726487			
Part		DREN FEDERATION, INC.		00-0720407			
rari	Question	is Regarding compensation	And the second			Yes	No
1a	990, Part VII, First-cla		vided any of the following to or for a person provide any relevant information regarding Housing allowance or residence for Payments for business use of person Health or social club dues or initiation	, these items. personal use nal residence			
		onary spending account	Personal services (e.g., maid, chauff				
b	If any of the or reimburse	boxes on line 1a are checked, did the	e organization follow a written policy re penses described above? If "No," com	garding payment	1b	•	
2	directors, tru		to reimbursing or allowing expenses //Executive Director, regarding the items	•	2		
3	Indicate which organization's related organ X Comper Indepen	n, if any, of the following the filing organi CEO/Executive Director. Check all tha	ization used to establish the compensation t apply. Do not check any boxes for metho e CEO/Executive Director, but explain in Pa Written employment contract X Compensation survey or study X Approval by the board or compensation	ds used by a art III.			
b	organization Receive a se Participate in Participate in	or a related organization: verance payment or change-of-control pa , or receive payment from, a supplemer , or receive payment from, an equity-bas	Part VII, Section A, line 1a, with respect to syment?		4a 4b 4c		X X X
5	For persons I	501(c)(3), 501(c)(4), and 501(c)(29) org isted in Form 990, Part VII, Section A, li n contingent on the revenues of:	ganizations must complete lines 5–9. ine 1a, did the organization pay or accrue a	any			
а	The organizat	ion?			5a		X
b	•	rganization?			5b	 	X
6	compensation	n contingent on the net earnings of:	ine 1a, did the organization pay or accrue a				
a					<u>6a</u>		<u>X</u>
	If "Yes" to line	e 6a or 6b, describe in Part III.			6b		<u>X</u>
7			A, line 1a, did the organization provi	-			
8	Were any am to the initia in Part III	ounts reported in Form 990, Part VII, p I contract exception described in F	scribe in Part III	at was subject f "Yes," describe	7 8	X	
9	Regulations s	ection 53.4958-6(c)?	ow the rebuttable presumption proced	<u></u>	9		
For Pa	aperwork Redu	ction Act Notice, see the Instructions for Fo	rm 990.	Schedu	le J (Fo	orm 990) 2014

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

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Page 2

Schedule J (Form 990) 2014

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.

	L	(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
CAROLYN S. MILES	(i)	405,048.	16,527.	18,178.	15,600.	5,038.	460,391.	
1 TRUSTEE/PRESIDENT / CEO	(ii)	C	q	0	C	0	C	
GERALD W. ANDERSON	(i)	144,708.	15,000.	2,976.	9,649.	8,015.	180,348.	
2 ACT. AVP, POLICY & HUMAN RESP	(ii)	C	d	C	q	0	C	
CARLOS CARRAZANA	(i)	293,073.	12,400.	18,178.	19,933.	9,510.	353,094.	
3 EXECUTIVE VP AND COO	(ii)	Q	d	Q	q	0	C	
MICHAEL KLOSSON	(i)	236,083.	9,400.	0	15,001.	384.	260,868.	
4 VP, POLICY AND DHR	(ii)	0	q	Q	q	0	C	
THOMAS KRIFT	(i)	204,907.	6,268.	2,484.	16,151.	25,316.	255,126.	
5 VP, STRATEGIC OPERATIONS	(ii)	0	q	O	q	0	C	
DANA L. LANGHAM	(i)	187,797.	q	0	14,162.	384.	202,343.	
6 AVP, CHIEF CORP DEV OFFICER	(ii)	0	q	0	d	0	C	
CAROLYN A. LOFTUS	(i)	179,121.	7,282.	307.	14,073.	23,562.	224,345.	
7 AVP, DIR, PROGRAM SUPPORT	(ii)	C	d	O	q	0	C	
SHAWN A. MOOD	(i)	163,796.	15,000.	257.	d	24,347.	203,400.	
8 VP & CHIEF HR OFFICER	(ii)	C	d	C	q	0	C	
KENNETH MURDOCH	(i)	196,436.	8,600.	19,018.	13,724.	15,613.	253,391.	
9 VP & CHIEF INFO OFFICER	(ii)	Q	d	O	q	0	C	
DIANA MYERS	(i)	235,758.	7,050.	1,518.	13,023.	2,182.	259,531.	
10 ^{VP, INTERNATIONAL PROGRAMS}	(ii)	Q	d	O	q	0	C	
DAVID A. OOT	(i)	193,172.	5,965.	0	14,030.	384.	213,551.	
11 ^{SR ADVISOR, HEALTH & NUTRITION}	(ii)	Q	d	0	q	0	C	
PETER M. OYLOE	(i)	164,249.	C	30,000.	7,915.	6,384.	208,548.	
12 ^{CHIEF OF PARTY, INTEG NUTRTION}	(ii)	Q	C	0	q	0	C	
SUSAN RIDGE	(i)	243,784.	9,751.	678.	19,664.	9,510.	283,387.	
13 ^{VP, MKTG AND COMMUN.}	(ii)	0	d	0	d	0		
JANINE L. SCOLPINO	(i)	196,795.	6,027.	678.	16,206.	25,316.	245,022.	
14 ^{AVP, MASS MARKET FUNDRAISING}	(ii)	Q	d	C	d			
MARK K SHRIVER	(i)	266,638.	8,700.	18,178.	19,067.	27,816.	340,399.	
15 ^{SR VP, STRATEGIC INITIATIVES}	(ii)	C	d	d	d		·	
KATHY SPANGLER	(i)	235,000.	7,050.	3,476.	18,173.	982.	264,681.	
16 ^{VP, US PROGRAMS}		C	d	0	d	0		

Schedule J (Form 990) 2014

JSA 4E1291 1.000

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Schedule J (Form 990) 2014

Page 2

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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred in prior Form 990
DANIEL N. STONER	(i)	162,260.	6,666.	549.	13,608.	25,225.	208,308.	0
1 AVP, EDUCATION & CHILD DEV	(ii)	C	C	0	d	0	C	0
NANCY A. TAUSSIG	(i)	202,574.	8,036.	1,518.	16,206.	982.	229,316.	0
2 AVP, FOUNDATION PARTNERSHIPS	(ii)	0	C	0	d	0	C	0
ROBERT D. THOMPSON	(i)	316,079.	4,860.	5,118.	10,400.	25,316.	361,773.	0
3 VP, RESOURCE DEVELOPMENT	(ii)	0	C	0	q	0	0	0
RICHARD K. TROWBRIDGE,	(i)	237,119.	9,583.	1,518.	18,116.	23,608.	289,944.	0
4 VP FINANCE & CFO	(ii)	Q	C	0	d	0	C	0
GRETCHEN WAGNER	(i)	239,760.	8,964.	5,554.	16,019.	22,371.	292,668.	0
5 VP GENERAL COUNSEL (THRU 11/14)	(ii)	0	C	0	q	0	Q	0
BRIAN WHITE	(i)	149,632.	C	743.	d	8,143.	158,518.	0
6 ACTING GENERAL COUNSEL	(ii)	d	C	0	d	0	d	0
	(i)				······································			
7	(ii)							
	(i)							
8	(ii)							
	(i)		·					
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)				······································			
14	(ii)							
	(i)							
15	(ii)							
<i>.</i> .	(i)	•	. .		•			
16	(ii)							

Schedule J (Form 990) 2014

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Schedule J (Form 990) 2014

Part III 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

THE COMPENSATION COMMITTEE OF THE BOARD, CONSISTING OF INDEPENDENT BOARD MEMBERS, CONDUCTS AN ANNUAL REVIEW AND APPROVAL PROCESS OF THE COMPENSATION OF THOSE EMPLOYEES IN POSITIONS HAVING A SIGNIFICANT LEVEL OF INFLUENCE WITHIN THE ORGANIZATION, AS DEFINED BY THE INTERNAL REVENUE SERVICE. THE PURPOSE OF THIS PROCESS, KNOWN AS AN INTERMEDIATE SANCTIONS/EXCESS BENEFITS REVIEW, IS TO ENSURE THAT NO SUCH PERSON IS RECEIVING EXCESSIVE COMPENSATION (INCLUDING SALARY, ANY BONUS, AND BENEFITS). THE COMMITTEE MEETS THE REBUTTABLE PRESUMPTION ESTABLISHED BY THE IRS THROUGH THE FOLLOWING PROCESS: 1) THE COMMITTEE OBTAINS THE COMPENSATION OF INDIVIDUALS PERFORMING SIMILAR SERVICES IN SIMILAR ORGANIZATIONS IN DETERMINING THAT THE COMPENSATION OF PERSONS REVIEWED AT SAVE THE CHILDREN IS ROUGHLY COMPARABLE AND REASONABLE. THAT COMPARABILITY DATA IS ASSEMBLED USING EXTERNALLY DEVELOPED BENCHMARKING SURVEYS, AS WELL AS COMPARABLE ORGANIZATION 990S AND ANNUAL REPORTS; 2) THE COMMITTEE MEETS TO REVIEW THIS EXTERNAL COMPENSATION DATA WITH THE COMPENSATION OF THESE INDIVIDUALS AT SAVE THE CHILDREN AND TO MAKE

DETERMINATIONS ABOUT THE REASONABLENESS OF SUCH COMPENSATION;

V 14-6F

Schedule J (Form 990) 2014

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.

3) DETERMINATIONS OF THE COMMITTEE AND THE BASIS FOR SUCH DETERMINATIONS

ARE RECORDED CONTEMPORANEOUSLY IN THE WRITTEN MINUTES OF THAT MEETING.

THESE DETERMINATIONS ARE SHARED WITH THE FULL BOARD OF TRUSTEES.

AND: 4) COMPENSATION IS ALSO REVIEWED BY OUTSIDE ADVISORS.

THE LAST TIME THE COMPENSATION COMMITTEE OF THE BOARD REVIEW OCCURRED WAS

IN FEBRUARY 2015.

NON-FIXED PAYMENTS

LUMP-SUM PAYMENTS (AS A PERCENTAGE OF BASE SALARY) BASED ON A COMBINATION OF INDIVIDUAL PERFORMANCE AND ORGANIZATIONAL PERFORMANCE WERE MADE TO ELIGIBLE INDIVIDUALS. SCHEDULE J, PART II, COLUMN B(II) REFLECTS THESE PAYMENTS TO MILES, CARRAZANA, KLOSSON, KRIFT, LOFTUS, MURDOCH, MYERS, OOT, RIDGE, SCOLPINO, SHRIVER, SPANGLER, STONER, TAUSSIG, THOMPSON, TROWBRIDGE AND WAGNER.

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Page 3

JSA

Form	DULE L 990 or 990-EZ)	Complete if the o	rganization a 28b, or 28 ►Atta	nswered c, or For ach to Fo	l "Ye: m 99 orm 9	n Interested s" on Form 990, Par 0-EZ, Part V, line 38 990 or Form 990-EZ. 0-EZ) and its instruction	t IV, line 25a, 25h 3a or 40b.		28a,	0	B No. 1 20 pen To specti	14 Publi	
vame of	the organization							Employer	Identif	ication	numbe	er	
SAVE	THE CHILDREN	FEDERATION	, INC.					06	-072	2648	7		
Part						n 501(c)(4), and 5 990, Part IV, line 2				urt V, I	ine 40	b.	
1	(a) Name of disqualifi	ed person	(b) Relatio		ween o ganiza	disqualified person and ation	(c) D	escription	of trans	saction		-	l) Correcte 'es No
(1)													
(2)													
(3)													
(4)								······					
(5)	·		_										
(6)	Enter the amount o							<u></u>					
3 Part I	Complete if th	or From Interes	sted Persons	s. es" on F	orm	990-EZ, Part V, li , line 5, 6, or 22.		,		ne 26;	or if tl	ne	
(a) N	ame of interested person	(b) Relationship with organization	(c) Purpose of Ioan	(d) Loan t from th organizati	ne	(e) Original principal amount	(f) Balance due	(g) In (/ritten ment?
	•			To Fi	rom			Yes	No	Yes	No	Yes	No
<u>(1)</u>													
<u>(2)</u>													
(3)													
<u>(4)</u> (5)							.						
<u>(5)</u> (6)		_							1		<u> </u>		<u> </u>
(7)													
(8)	•												
(9)					-+						 		
10)											<u> </u>		
otal				• • • • •	<u>_</u>	' 	\$		•	1.			
Part		istance Benefit	ing Intereste	ed Perso	ons.	990, Part IV, line 27		•					
(a) N	ame of interested person	(b) Relationshi	p between intere the organization	sted (c) A		1	d) Type of assistance	e	(e)	Purpos	se of as	sistance	e
(1)								[
(2)	•												
<u>(3)</u>													
(4)													
(5)													
(6)													
<u> </u>		1											
(7)													
(6) (7) (8) (9)													

art IV Business Transactions Invol Complete if the organization ans		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	(e) Sha organiz <i>r</i> even	zation's
				Yes	No
1) TERTIA TROWBRIDGE (THRU 6/2014)	FAMILY MEM - R TROWBRIDGE	13,186.	COMPENSATION		x
2)		_			<u> </u>
3)					
4)					
5)					
6)					
7)					
8)					
9)					
0)					

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SCHEDULE M (Form 990)

Internal Revenue Service

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Noncash Contributions

OMB No. 1545-0047

Δ

(FORM 990)	► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Department of the Treasury	► Attach to Form 990.
Internal Revenue Service	▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open To Public Inspection umber

2

Name of	the org	anization		
SAVE	THE	CHILDREN	FEDERATION,	INC.

Employer identification n
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	(o Method of o noncash contri		
1	Art - Works of art						
2	Art - Historical treasures						
3	Art - Fractional interests						
4	Books and publications	X	e integration et	971,075.	FMV		
5	Clothing and household	x		5,107,134.	FMV		
-	goods	^		5,107,154.	1110		
6	Cars and other vehicles						
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			7.	100,124,996.	FMV		
19	Food inventory	X	24.	924,493.	FMV		
20	Drugs and medical supplies	A	21.	521,155.	1110		
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens		· · · · · · · · · · · · · · · · · · ·	·			
24	Archeological artifacts		32.	472,424.			
25	Other ►(_ATCH 1)		52.	1,2,121,			
26	Other ►()						
27	Other ►()						
28	Other ►() Number of Forms 8283 received	hu tha ara	anization during the fax w	or for contributions for			
29	which the organization completed I				29		
	which the organization completed i	-0111 0205,	Fait IV, Dullee Acknowledg			Yes	No
20-	During the year, did the organizat	ion receive	by contribution any proper	rty reported in Part I line	s 1 through		
30a	28, that it must hold for at least th						
	to be used for exempt purposes for	•				30a	X
h	If "Yes," describe the arrangement in		ording periods				1
	Does the organization have a		ance policy that require	s the review of any r	on-standard		1.1
31	contributions?					31 X	
220	Does the organization hire or use	third narti	es or related organization	s to solicit process or s	· · · · · · · · ·		1
J2d	contributions?					32a	X
L.	If "Yes," describe in Part II.						
33	If the organization did not report ar	amount in	column (c) for a type of pro	perty for which column (a)	is checked		
JJ	describe in Part II.						

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

Schedule M (Form 990) (2014)

Page 2

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

NONCASH CONTRIBUTION

SCHEDULE M, PART I - NONCASH CONTRIBUTIONS

VARIOUS AGRICULTURAL COMMODITIES AND OTHER MISCELLANEOUS SUPPLIES

RECEIVED FOR THE PURPOSE OF FAMINE, MEDICAL AND EDUCATIONAL RELIEF

EFFORTS.

Page 2

Schedule M (Form 990) (2014)

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Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
SCHOOL SUPPLIES	Х	11.	53,467.	FMV
TOYS	Х	8.	83,430.	FMV
SUPPLIES/TRAINING	Х	10.	234,415.	FMV
SHELTER KITS	Х	2.	96,032.	FMV
OTHER	Х	1.	5,080.	FMV
TOTALS		32.	472,424.	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 10 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number 06-0726487

FORM 990, PART III, LINE 4 SAVE THE CHILDREN INVESTS IN CHILDHOOD - EVERYDAY, IN TIMES OF CRISIS AND FOR OUR FUTURE.

IN 2014, SAVE THE CHILDREN WORKED IN 120 COUNTRIES, INCLUDING THE UNITED STATES, AND HELPED MORE THAN 166 MILLION CHILDREN - INCLUDING MORE THAN 55 MILLION CHILDREN DIRECTLY. OUR FULL REPORT ON 2014 ACCOMPLISHMENTS CAN BE FOUND IN OUR ANNUAL REPORT, RESULTS FOR CHILDREN, AVAILABLE ON OUR WEBSITE. BELOW YOU WILL FIND HIGHLIGHTED EXCERPTS FROM THE REPORT.

FORM 990, PART III, LINE 4A

IN ADDITION TO OUR EMERGENCY EFFORTS IN THE UNITED STATES, SAVE THE CHILDREN RESPONDED TO 103 CRISES IN 53 COUNTRIES IN 2014, ADDRESSING THE UNIQUE NEEDS OF VULNERABLE CHILDREN AROUND THE WORLD.

INTERNATIONALLY, WE RESPONDED TO THE EBOLA EPIDEMIC IN WEST AFRICA, WHERE WE DIRECTLY REACHED ALMOST 870,000 PEOPLE BY BUILDING HEALTH INFRASTRUCTURE, CARING FOR CHILDREN LEFT ORPHANED OR VULNERABLE BY THE EPIDEMIC, AND BOLSTERING COMMUNITY AWARENESS. SAVE THE CHILDREN HAS BEEN WORKING WITH CHILDREN AFFECTED BY THE CONFLICT IN SYRIA SINCE 2012, REACHING MORE THAN 500,000 PEOPLE INSIDE THE COUNTRY WITH ESSENTIAL AND LIFESAVING AID, INCLUDING FOOD, CLEAN WATER, HEALTH CARE AND SHELTER.

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SAVE THE CHILDREN FEDERATION, INC.	06-0726487

HERE IN THE UNITED STATES, WE RESPONDED TO THE CRISIS CAUSED BY THE UNPRECEDENTED NUMBER OF CHILDREN ARRIVING AT THE U.S. BORDER, HAVING FLED VIOLENCE AND INSECURITY IN CENTRAL AMERICA. AND WE WERE THERE FOR FAMILIES IN MISSISSIPPI, WHOSE LIVES WERE DEVASTATED BY A SERIES OF DEADLY TORNADOES.

TOTAL EMERGENCY PROGRAM SERVICES EXPENSES: 206,194,752 INCLUDING GRANTS TO OTHER AGENCIES: 189,723,070 TOTAL PROGRAM REVENUE: 8,931,552

FORM 990, PART III, LINE 4B HEALTH AND NUTRITION

IN 2014, OUR WORK LED TO MORE THAN 7.5 MILLION LIFESAVING HEALTH INTERVENTIONS FOR CHILDREN IN 34 COUNTRIES. SAVE THE CHILDREN-SUPPORTED NEWBORN AND CHILD HEALTH RESEARCH INFORMED AND INFLUENCED GLOBAL AND NATIONAL POLICIES AND THE WORLD HEALTH ORGANIZATION (WHO) IS EXPECTED TO RELEASE NEW GLOBAL GUIDELINES FOR THE TREATMENT OF NEWBORNS BASED ON THESE TRIALS, HELPING SAVE POTENTIALLY MILLIONS OF LIVES.

IN 2014, 8.9 MILLION CHILDREN BENEFITTED FROM OUR PROGRAMS THAT PROVIDE HEALTHY, NUTRITIOUS FOOD, MICRONUTRIENT SUPPLEMENTS AND NUTRITION TRAINING. TO ADDRESS CHILD NUTRITION, SAVE THE CHILDREN CO-LED A HIGH-LEVEL CONSULTATION MEETING ON THE USAID NUTRITION STRATEGY, HIGHLIGHTING THE NEED FOR MORE SPECIFIC NUTRITION INTERVENTIONS, STRONGER

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LINKS TO CHILD HEALTH, AND A FRAMEWORK FOR DEVELOPING POST-2015 CHILD HEALTH AND NUTRITION GOALS.

OUR HEALTHY CHOICES PROGRAM EXPOSES AMERICAN CHILDREN TO HEALTHIER WAYS OF LIVING THROUGH PHYSICAL ACTIVITY, NUTRITION EDUCATION AND BALANCED FOOD CHOICES. IN 2014, WE DIRECTLY SERVED MORE THAN 17,000 CHILDREN IN 157 SITES IN 14 STATES AND WASHINGTON, DC. CHILDREN SCORED SIGNIFICANTLY HIGHER, BY 30 PERCENTAGE POINTS, ON NUTRITION KNOWLEDGE TESTS AFTER COMPLETING THE PROGRAM.

TOTAL HEALTH PROGRAM SERVICES EXPENSES: 144,880,526 INCLUDING GRANTS TO OTHER AGENCIES: 109,820,920 RELATED PROGRAM REVENUE: 58,500

FORM 990, PART III, LINE 4C EDUCATION

SAVE THE CHILDREN IS DEDICATED TO ENSURING EVERY CHILD HAS THE OPPORTUNITY TO LEARN. OUR EDUCATION PROGRAMS REACHED 11.8 MILLION CHILDREN AROUND THE WORLD IN 2014.

IN 2014, OUR LITERACY BOOST PROGRAMS IN BANGLADESH, ETHIOPIA AND INDONESIA TRIPLED THE AVERAGE PERCENTAGE OF CHILDREN WHO UNDERSTAND WHAT THEY'RE READING TO 60% AND WE IMPLEMENTED PROGRAMS IN 24 COUNTRIES AROUND THE WORLD. TO IMPROVE EXISTING PROGRAMS FOR THE MOST VULNERABLE CHILDREN,

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SAVE THE CHILDREN HAS DEVELOPED THE INTERNATIONAL DEVELOPMENT AND EARLY LEARNING ASSESSMENT (IDELA) TOOL - A USER-FRIENDLY GLOBAL ASSESSMENT THAT MEASURES CHILDREN'S EARLY LEARNING AND DEVELOPMENT FROM AGES 3¹/₂ - 6.

IN THE UNITED STATES, SAVE THE CHILDREN REACHES THE YOUNGEST CHILDREN IN NEED THROUGH OUR EARLY STEPS TO SCHOOL SUCCESS PROGRAM - A LOW-COST, TARGETED APPROACH TO ENHANCING SCHOOL READINESS FOR CHILDREN AGES 0-5. IN 2014, WE DIRECTLY SERVED NEARLY 8,500 CHILDREN IN 106 SITES IN 14 STATES AND WASHINGTON, DC. DESPITE THE CHALLENGES THEY FACE, 84 PERCENT OF THE 3-YEAR-OLDS IN OUR PROGRAM SCORED AT OR ABOVE THE NATIONAL AVERAGE FOR VOCABULARY DEVELOPMENT.

IN ADDITION, SAVE THE CHILDREN EXPANDED OUR PARTNERSHIP WITH HEAD START IN 2014 WITH TWO NEW PROGRAMS. WE NOW OPERATE SELECT HEAD START PROGRAMS IN 15 UNDER-RESOURCED RURAL COUNTIES ACROSS ARKANSAS, LOUISIANA AND MISSISSIPPI, SERVING MORE THAN 2,700 CHILDREN, AS WELL AS THEIR PARENTS.

TOTAL EDUCATION PROGRAM SERVICES EXPENSES: 111,425,298 . INCLUDING GRANTS TO OTHER AGENCIES 81,303,343 RELATED PROGRAM REVENUE: 1,536,296

FORM 990, PART III, LINE 4 FORM 990, PART III, LINE 4D HUNGER AND LIVELIHOODS

WITH PROGRAMS IN 30 COUNTRIES, SAVE THE CHILDREN'S HUNGER REDUCTION WORK

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FOCUSES ON IMPROVING THE FOOD SUPPLY, FARMING PRACTICES AND FINANCES OF FAMILIES IN NEED, BOTH EVERY DAY AND IN THE MIDST OF CRISIS. IN BANGLADESH, WE ARE ADDRESSING CHRONIC FOOD INSECURITY WITH A FIVE-YEAR PROJECT TO IMPROVE MATERNAL AND CHILD HEALTH AND NUTRITION, INCREASE MARKET-BASED PRODUCTION AND REDUCE THE RISKS OF DISASTER.

AS A RESULT OF SAVE THE CHILDREN'S YOUTH FINANCIAL PROGRAM, NEARLY 117,000 LOW-INCOME YOUTH IN COLOMBIA, GHANA, KENYA AND NEPAL HAVE OPENED SAVINGS ACCOUNTS DESIGNED SPECIFICALLY FOR THEM AND ARE BUILDING ASSETS AND HABITS TO SECURE THEIR FINANCIAL FUTURE - SAVING A COLLECTIVE TOTAL OF MORE THAN \$1 MILLION IN SAVINGS SO FAR.

TOTAL HUNGER AND LIVELIHOODS PROGRAM SERVICES EXPENSES: 42,251,183 INCLUDING GRANTS TO OTHER AGENCIES: 32,509,308 RELATED PROGRAM REVENUE: 28,205

FORM 990, PART III, LINE 4E

WE REACHED 11.9 MILLION CHILDREN WITH HIV/AIDS PREVENTION AND TREATMENT IN 2014.

SAVE THE CHILDREN CONTINUES TO DEVELOP AND EXPAND PROVEN PREVENTION PROGRAMS TO STOP THE SPREAD OF HIV AND TREATMENT PROGRAMS TO PREVENT MOTHER-TO-CHILD TRANSMISSION AND CARE FOR CHILDREN KNOWN TO BE

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HIV-POSITIVE. IN A NEW COLLABORATION, SAVE THE CHILDREN WAS SELECTED AS A STRATEGIC PARTNER OF THE ALL IN! INITIATIVE TO ADDRESS THE INEQUITY IN PROGRESS AMONG ADOLESCENTS IN THE GLOBAL AIDS RESPONSE. WE AIM TO INSPIRE A SOCIAL MOVEMENT, LED BY YOUNG PEOPLE, ALONGSIDE THE UNITED NATIONS AND PUBLIC AND PRIVATE PARTNERS, TO ACCELERATE PROGRESS FOR ADOLESCENTS BY 2020, TOWARD THE ULTIMATE GOAL OF ENDING THE AIDS EPIDEMIC BY 2030.

TOTAL HIV/AIDS PROGRAM SERVICES EXPENSES: 42,345,390 INCLUDING GRANTS TO OTHER AGENCIES: 41,400,677 RELATED PROGRAM REVENUE: 73,518

FORM 990, PART III, LINE 4F CHILD PROTECTION

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IN 2014, OUR CHILD PROTECTION EFFORTS DIRECTLY REACHED 2.1 MILLION CHILDREN IN 22 COUNTRIES AND WE WORKED IN 15 COUNTRIES TO REUNITE CHILDREN SEPARATED FROM FAMILY MEMBERS DURING HUMANITARIAN CRISES.

IN 2014, SAVE THE CHILDREN AND FOUR PARTNERS WORKED TO IMPROVE THE WELL-BEING AND RIGHTS OF ORPHANS AND OTHER VULNERABLE CHILDREN IN NORTHERN NIGERIA BY LAUNCHING A GENDER EQUITY PROGRAM CALLED STEER (SYSTEMS TRANSFORMED FOR EMPOWERED ACTION AND ENABLING RESPONSES). STEER INTENDS TO REACH APPROXIMATELY 500,000 VULNERABLE CHILDREN AND 125,000 CAREGIVERS, PROVIDING THEM WITH ACCESS TO COMMUNITY-BASED HEALTH SERVICES AND QUALITY CARE.

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IN THE UNITED STATES, SAVE THE CHILDREN PROVIDED CRITICAL PROTECTION TO CHILDREN IN TIMES OF CRISIS THROUGHOUT THE YEAR. FOR EXAMPLE, DURING THE U.S. BORDER CRISIS AND AFTER TORNADOES DEVASTATED COMMUNITIES IN MISSISSIPPI, WE SET UP CHILD-FRIENDLY SPACES FOR CHILDREN TO SAFELY PLAN AND LEARN - SO THEY CAN BE KIDS AGAIN. WE ALSO OFFERED OUR JOURNEY OF HOPE EMOTIONAL RECOVERY PROGRAM TO HELP CHILDREN AND THEIR CAREGIVERS COPE WITH THE TRAUMA OF CRISIS AND BUILD RESILIENCE TO FUTURE CRISES.

TOTAL CHILDREN PROTECTION PROGRAM SERVICES EXPENSES: 27,905,544 INCLUDING GRANTS TO OTHER AGENCIES: 23,168,114 RELATED PROGRAM REVENUE: 114,600

FORM 990, PART III, LINE 4 FORM 990, PART III, LINE 4G PROGRAM DEVELOPMENT AND PUBLIC POLICY SUPPORT

IN 2014, SAVE THE CHILDREN SUCCESSFULLY ADVOCATED FOR LARGE-SCALE, SUSTAINABLE PROGRESS FOR CHILDREN WITHIN SEVERAL PRIORITY AREAS.

FOR CHILDREN AROUND THE WORLD, WE HELPED SECURE THE ADOPTION OF THE GLOBAL EVERY NEWBORN ACTION PLAN IN 194 COUNTRIES, SETTING TARGETS TO END PREVENTABLE NEWBORN DEATHS. TO HELP FEED HUNGRY, MALNOURISHED CHILDREN, WE SECURED A MAJOR LEGISLATIVE VICTORY IN ADVOCATING FOR REFORMS TO INCREASE THE EFFICIENCY OF FOOD AID PROGRAMS, WHICH WILL ALLOW AID TO QUICKLY AND EFFECTIVELY REACH AS MANY AS 800,000 MORE CHILDREN DURING

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TIMES OF CRISIS, AT NO ADDITIONAL COST.

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IN 2014, WE ACHIEVED A MILESTONE VICTORY IN SAVE THE CHILDREN'S DOMESTIC POLICY WORK. AS A RESULT OF OUR ADVOCACY EFFORTS, FOR THE FIRST TIME IN HISTORY, ALL 50 STATES AND WASHINGTON, DC WILL REQUIRE REGULATED CHILD CARE PROVIDERS TO HAVE AN EMERGENCY PLAN, INCLUDING PROVISIONS RELATED TO EVACUATION, REUNIFICATION AND CHILDREN WITH SPECIAL NEEDS.

TOTAL PROGRAM DEVELOPMENT PROGRAM SERVICES EXPENSES: 25,761,935 INCLUDING GRANTS TO OTHER AGENCIES: 2,335,190

FORM 990, PART III, LINE 4H CHILD RIGHTS GOVERNANCE

TOTAL CHILD RIGHTS GOVERNANCE PROGRAM SERVICES EXPENSES: 1,163,566 INCLUDING GRANTS TO OTHER AGENCIES: 1,042,318 RELATED PROGRAM REVENUE: 4,774

FORM 990, PART III, LINE 41 SAVE THE CHILDREN INTERNATIONAL

SAVE-THE CHILDREN-USA IS A MEMBER OF SAVE THE CHILDREN ASSOCIATION (SCA), A SWISS MEMBERSHIP ORGANIZATION. SCA CURRENTLY HAS 30 INDEPENDENT, AUTONOMOUS, NONPROFIT, PRIVATE VOLUNTARY MEMBERSHIP ORGANIZATIONS THAT BEAR THE NAME SAVE THE CHILDREN OR A RELATED DESIGNATION (THE MEMBERS).

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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 2014 WERE \$385,896,728.

FORM 990, PART V, LINE 3B SAVE THE CHILDREN FILED AN EXTENSION FOR FORM 990-T BY MAY 15, 2015 AND WILL FILE THE 990-T BY THE EXTENDED DEADLINE.

FOREIGN FINANCIAL ACCOUNTS

FORM 990, PART V, LINE 4B

AZERBAIJAN

BANGLADESH

BOLIVIA

EGYPT

ETHIOPIA

GUATEMALA

GUINEA

JORDAN

MALAWI

MALI/SAHEL

MYANMAR

PAKISTAN

THAILAND

UNITED KINGDOM

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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.

-TRUSTEE MEMBERS CHARLOTTE GUYMAN AND SUSAN DECKER -TRUSTEE MEMBERS JOAQUIN DUATO AND ANNE MULCAHY

FORM 990, PART VI, LINE 11B

THE FORM 990 WAS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD ON AUGUST 4, 2015 AND THEN SENT TO THE ENTIRE BOARD FOR REVIEW PRIOR TO THE AUGUST 15TH FILING DATE.

FORM 990, PART VI, LINE 12C CONFLICT OF INTEREST POLICY

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UNDER ITS BYLAWS AND ITS CODE OF ETHICS & BUSINESS CONDUCT, SAVE THE CHILDREN'S TRUSTEES, OFFICERS, AND OTHER EMPLOYEES ARE REQUIRED TO PROMPTLY DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST, IN WRITING. ALL TRUSTEES, OFFICERS, AND OTHER KEY EMPLOYEES ARE ALSO REQUIRED TO SUBMIT AN ANNUAL DISCLOSURE FORM TO THE SECRETARY OF THE CORPORATION, WHO VERIFIES THEIR SUBMISSION AND MAINTAINS RECORDS OF ANY POTENTIAL CONFLICTS. IN THE EVENT THAT A TRANSACTION POSES A POTENTIAL CONFLICT OF INTEREST FOR ANY OFFICER OR TRUSTEE, THE BYLAWS PROVIDE FOR THE TRUSTEES' FULL CONSIDERATION OF ALL MATERIAL FACTS AND CIRCUMSTANCES TO DETERMINE WHETHER THE TRANSACTION IS FAIR, REASONABLE, AND IN THE CORPORATION'S

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BEST INTERESTS. IN THE EVENT THAT A TRANSACTION POSES A POTENTIAL CONFLICT OF INTEREST FOR A KEY EMPLOYEE OTHER THAN AN OFFICER, THE EMPLOYEE'S SUPERVISOR AND NEXT-LEVEL SUPERVISOR ARE CHARGED WITH ENSURING THAT THE EMPLOYEE DOES NOT TAKE PART IN THE TRANSACTION.

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FORM 990, PART VI, LINES 15A AND 15B
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THE COMPENSATION COMMITTEE OF THE BOARD, CONSISTING OF INDEPENDENT BOARD MEMBERS, CONDUCTS AN ANNUAL REVIEW AND APPROVAL PROCESS OF THE COMPENSATION OF THOSE EMPLOYEES IN POSITIONS HAVING A SIGNIFICANT LEVEL OF INFLUENCE WITHIN THE ORGANIZATION, AS DEFINED BY THE INTERNAL REVENUE SERVICE. THE PURPOSE OF THIS PROCESS, KNOWN AS AN INTERMEDIATE SANCTIONS/EXCESS BENEFITS REVIEW, IS TO ENSURE THAT NO SUCH PERSON IS RECEIVING EXCESSIVE COMPENSATION (INCLUDING SALARY, ANY BONUS, AND BENEFITS). THE COMMITTEE MEETS THE REBUTTABLE PRESUMPTION ESTABLISHED BY THE IRS THROUGH THE FOLLOWING PROCESS: 1) THE COMMITTEE OBTAINS THE COMPENSATION OF INDIVIDUALS PERFORMING SIMILAR SERVICES IN SIMILAR ORGANIZATIONS IN DETERMINING THAT THE COMPENSATION OF PERSONS REVIEWED AT SAVE THE CHILDREN IS ROUGHLY COMPARABLE AND REASONABLE. THAT COMPARABILITY DATA IS ASSEMBLED USING EXTERNALLY DEVELOPED BENCHMARKING SURVEYS, AS WELL AS COMPARABLE ORGANIZATION 990S AND ANNUAL REPORTS; 2) THE COMMITTEE MEETS TO REVIEW THIS EXTERNAL COMPENSATION DATA WITH THE COMPENSATION OF THESE INDIVIDUALS AT SAVE THE CHILDREN AND TO MAKE DETERMINATIONS ABOUT THE REASONABLENESS OF SUCH COMPENSATION; AND 3) DETERMINATIONS OF THE COMMITTEE AND THE BASIS FOR SUCH DETERMINATIONS ARE RECORDED CONTEMPORANEOUSLY IN THE WRITTEN MINUTES OF THAT MEETING. THESE DETERMINATIONS ARE SHARED WITH THE FULL BOARD OF TRUSTEES. THE LAST TIME

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THAT THIS REVIEW OCCURRED WAS IN FEBRUARY 2015.

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.

FORM 990, PART X, LINES 9 AND 15

SAVE THE CHILDREN FEDERATION, INC. IS ADJUSTING ITS 12/31/2013 BALANCE SHEET TO CORRECTLY PRESENT RELATED PARTY RECEIVABLES AS PART OF LINE 15, OTHER ASSETS. THE RELATED PARTY RECEIVABLES HAD PREVIOUSLY BEEN INCLUDED IN LINE 9, PREPAID EXPENSES. THE 12/31/2014 BALANCE SHEET REFLECTS THE CHANGE IN REPORTING.

FORM 990, PART XI, LINE 9

FOREIGN CURRENCY EXCHANGE FLUCTUATION	:	\$ 1,247,893
SCUS HEAD START MANAGEMENT FEE	:	\$ (557,865)
TOTAL LINE 9	:	\$ 690,208

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES								
DESCRIPTION	GRANTS	EXPENSES	REVENUE					
HIV/AIDS	41,400,677.	42,345,390.	73,518.					
HUNGER/LIVELIHOODS	32,509,308.	42,251,183.	28,205.					
PROGRAM DEVELOPMENT	2,335,190.	25,761,935.						
CHILD PROTECTION	23,168,114.	27,905,544.	114,600.					

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Schedule O (Form 990 or 990-EZ) 2014

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-	1				
SAVE THE CHILDREN FEDERATION, INC.		06-0726487 ATTACHMENT 1 (CONT'D)			
FORM 990, PART III, LINE 4D - OTHER PROGRAM	SERVICES				
DESCRIPTION	GRANTS	EXPENSES	REVENUE		
CHILD RIGHTS GOVERNANCE	1,042,318.	1,163,566.	4,774.		
TOTALS	100,455,607.	139,427,618.	221,097.		

ATTACHMENT 2

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FORM 990, PART VI, LINE 17 - STATES
AL,AK,AZ,AR,CA,CO,CT,
DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,
MN, MS, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,
RI,SC,TN,UT,VA,WA,WV,WI,

	ATTACHMEN	NT 3
990, PART_VII- COMPENSATION OF THE FIVE HIGHEST	PAID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
PRODUCTION SOLUTIONS 1953 GALLOWS ROAD, SUITE 600 VIENNA, VA 22182	FUNDRAISING SERVICES	3,930,439.
DEVELOPING AWARENESS, INC. 411 BRAZOS STREET, SUITE 104 AUSTIN, TX 78701	FUNDRAISING SERVICES	3,092,582.
MERKLE INC. 7001 COLUMBIA GATEWAY DRIVE COLUMBIA, MD 21046	MEDIA & FUNDRAISING	1,306,261.
BLACKBAUD P.O. BOX 930256 ATLANTA, GA 31193	DONOR MGMT SYSTEM	1,217,461.
DONORWORX INC. 4520 EAST WEST HIGHWAY, SUITE 700 BETHESDA, MD 20814	FUNDRAISING CONSULT.	913,117.

SAVE	THE	CHILDREN	FEDERATION,	INC.
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06-0726487

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service	Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.	OMB No. 1545-0047 20 14 Open to Public Inspection
Name of the organization		Employer identification number
SAVE THE CHILD	REN FEDERATION, INC.	06-0726487

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5 conti ent	i12(b)(13) rolled
						Yes	No
(1) SCUS HEAD START PROGRAMS, INC 45-3672468							
501 KINGS HIGHWAY EAST, SUITE FAIRFIELD, CT 06825	PRESCHOOL	СТ	501(C)(3)	7	SCUS	X	
(2) SAVE THE CHILDREN ACTION NETWORK, INC. 46-5465189							
2000 L ST, NW, SUITE 500 WASHINGTON, DC 20036	SOCIALWELFARE	DE	501(C)(4)		SCUS	x	
(3)					· · · · · · · · · · · · · · · · · · ·		
(4)							
(5)							
(6)							
(7)			a constantin				
]						

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

Schedule R (Form 990) 2014

JSA 4E1307 1.000 Schedule R (Form 990) 2014

Part III

(1)

(2)

(3)

(4)

(5)

(6)

(7)

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year. (a) Name, address, and EIN of (b) (g) (i) Code V-UBI (i) (k) (C) (d) (e) Predominant (f) Share of total (h) Primary activity Legal Direct controlling Share of end-of-General or Percentage isproportiona income (related, related organization domicile entity income amount in box 20 ownership vear assets managing allocations? unrelated, (state or of Schedule K-1 partner? excluded from (Form 1065) foreign tax under country) sections 512-514) Yes No Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on 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) 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	
								Yes No
(1) CHARITABLE REMAINDER TRUSTS (4))	1
	INVESTMENT	CA	SCUS	TRUST				
(2) AZERI STAR MICROFINANCE								
9A/1 GEN AKIM ABBASOV STREET BAKU, AJ	MICRO LOANS	AJ	scus	C CORP	-545,835.	1,184,322.	100.0000	
(3)								
(4)								
(5)			-			1		
(6)	-							
(7)	· ·						· · · · · · · ·	

Schedule R (Form 990) 2014

Schedule R (Form 990) 2014

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	•	•		Y	es No
1	During the tax year, did the organization engage in any of the following transactions with one or more r	elated organizations lis	ted in Parts II-IV?			
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	X
C	Gift, grant, or capital contribution from related organization(s)				1c	X
a	Loans or loan guarantees to or for related organization(s)				1d	X
е	Loans or loan guarantees by related organization(s)				1e	X
f	Dividends from related organization(s)				1f	X
g	Sale of assets to related organization(s)				1g	X
h	Purchase of assets from related organization(s)				1h	X
i	Exchange of assets with related organization(s)				1i	X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	X
1	Performance of services or membership or fundraising solicitations for related organization(s)				11	Х
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Х
0	Sharing of paid employees with related organization(s)				10	Х
p	Reimbursement paid to related organization(s) for expenses.				1p	<u>X</u>
q	Reimbursement paid by related organization(s) for expenses			* * • • •	1q	X
-	Other transfer of each or property to related encoders ()					
ı e	Other transfer of cash or property to related organization(s)				1r	<u> </u>
2	Other transfer of cash or property from related organization(s)	••••••••••••••••••••••••••••••••••••••	<u> </u>	<u></u>	1s	X
	(a)			action thre		
	Name of related organization	(b) Transaction	(c) Amount involved	Method	(d) of deterr	ninina
		type (a-s)			unt involv	
			••••••••••••••••••••••••••••••••••••••			
(1)	SAVE THE CHILDREN ACTION NETWORK, INC.	D D	1 100 000	CORT		
<u></u>	SALE THE SHIELDIN ACTION NETWORK, INC.	В	1,180,033.	COST		*
(2)	SAVE THE CHILDREN ACTION NETWORK, INC.	0	1,095,157.	COST		
<u>\-/</u>			1,093,137.	LUST		
(3)	SCUS HEAD START PROGRAMS, INC	0	7,880,639.	COST		
	· · · · · - · -	, v	1,000,000.	LCODT		

SCUS HEAD START PROGRAMS, INC

(6)

(4)

(5)

COST

ALLOCATED COST

557,865.

2,449,013.

Page **3**

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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) (c) Primary activity Legal domicile (state or foreign country)		income (related section		(e) (f) Are all partners section Share of 501(c)(3) organizations?		Share of Share of		h) portionate ations?	(i) Code V - UBI amount in box 20 of Schedule K-1	(j) General or managing partner?		(k) Percentage ownership
			sections 512-514)	Yes				Yes	No	(Form 1065)	Yes	No	
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6)													

4E1310 1.000

Schedule R (Form 990) 2014

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

CHARITABLE REMAINDER TRUSTS

THE ORGANIZATION IS RELATED TO CHARITABLE REMAINDER TRUSTS DOMICILED IN

CA, PA, NY, AND MA.

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