

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For the 2014 calendar year, or tax year beginning 2014, and ending 2014

Header section containing organization name (SAVE THE CHILDREN FEDERATION, INC.), address (501 KINGS HIGHWAY EAST, FAIRFIELD, CT 06825), telephone number (203) 221-4000, and tax-exempt status (501(c)(3)).

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include contributions, program revenue, total revenue, salaries, total expenses, and net assets.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing signatures of Stacy Brandon (Chief Financial Officer) and Mary Evelyn Antonetti (Preparer), along with dates and firm information (KPMG LLP).

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2014)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

- 1 Briefly describe the organization's mission: SAVE THE CHILDREN ("SCUS") IS AN INTERNATIONAL NONPROFIT CHILDREN'S RELIEF AND DEVELOPMENT ORGANIZATION WHOSE MISSION IS TO INSPIRE BREAKTHROUGHS IN THE WAY THE WORLD TREATS CHILDREN, AND TO ACHIEVE IMMEDIATE AND LASTING CHANGE IN THEIR LIVES.
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 206,194,752. including grants of \$ 189,723,070.) (Revenue \$ 8,931,552.)
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)

4b (Code:) (Expenses \$ 144,880,526. including grants of \$ 109,820,920.) (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 O)

4c (Code:) (Expenses \$ 111,425,298. including grants of \$ 81,303,343.) (Revenue \$ 1,536,296.)
EDUCATION - IN 2014, SAVE THE CHILDREN'S EDUCATION PROGRAMS REACHED 11.8 MILLION CHILDREN AROUND THE WORLD. (SEE SCHEDULE O)

4d Other program services (Describe in Schedule O.) ATTACHMENT 1
(Expenses \$ 139,427,618. including grants of \$ 100,455,607.) (Revenue \$ 221,097.)

4e Total program service expenses 601,928,194.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and reporting.

Part IV 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? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III.</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		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? <i>If "Yes," complete Schedule L, Part I.</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	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? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V [X]

Table with columns for line number, description, and Yes/No boxes. Includes lines 1a-1c, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 4 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members included... 2 Did any officer, director, trustee, or key employee have a family relationship... 3 Did the organization delegate control over management duties... 4 Did the organization make any significant changes to its governing documents... 5 Did the organization become aware during the year of a significant diversion of the organization's assets... 6 Did the organization have members or stockholders... 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 4 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 2
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: STACY BRANDOM 501 KINGS HIGHWAY EAST, SUITE 400 FAIRFIELD, CT 06825 475-999-3007

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

Check if Schedule O contains a response or note to any line in this Part VII.

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

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) DR. LARRY HOROWITZ TRUSTEE	1.00 0	X						0	0	0
(16) BRAD IRWIN TRUSTEE	1.00 1.00	X						0	0	0
(17) LINDA KOCH LORIMER TRUSTEE	1.00 0	X						0	0	0
(18) FRED A LEWIS-HALL TRUSTEE	1.00 0	X						0	0	0
(19) JOAN LOMBARDI TRUSTEE	1.00 0	X						0	0	0
(20) MARK V. MACTAS VICE CHAIR	1.00 0	X						0	0	0
(21) DAVID J. MASTROCOLA TRUSTEE	1.00 0	X						0	0	0
(22) HENRY MILLER (THRU 2/14) TRUSTEE	1.00 0	X						0	0	0
(23) TOM MOSER TRUSTEE	1.00 0	X						0	0	0
(24) ANNE MULCAHY CHAIR	1.00 1.00	X						0	0	0
(25) TOM MURPHY CHAIR EMERITUS	1.00 0	X						0	0	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.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 163

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶** 82

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) BRADLEY C. PALMER ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(27) BEA PEREZ ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(28) CHARLES R. PERRIN ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(29) JUDITH REICHMAN, M.D. ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(30) DR. ANDREA L. RICH (THRU 8/14) ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(31) COKIE ROBERTS ----- VICE CHAIR	1.00 ----- 0	X						0	0	0
(32) SUNIL SANI ----- TRUSTEE	1.00 ----- 1.00	X						0	0	0
(33) RICHARD J. SCHNIEDERS ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(34) PERNILLE SPIERS-LOPEZ ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(35) HELENE R. SULLIVAN (THRU 2/14) ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(36) AMELIA VICINI ----- TRUSTEE	1.00 ----- 0	X						0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 163

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

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

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) DAVID WESTIN ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(38) DONA DAVIS YOUNG ----- TRUSTEE	1.00 ----- 0	X						0	0	0
(39) CARLOS CARRAZANA ----- EXECUTIVE VP AND COO	56.00 ----- 0			X				323,651.	0	29,443.
(40) MICHAEL KLOSSON ----- VP, POLICY AND DHR	53.00 ----- 0			X				245,483.	0	15,385.
(41) THOMAS KRIET ----- VP, STRATEGIC OPERATIONS	49.00 ----- 0			X				213,659.	0	41,467.
(42) SHAWN A. MOOD ----- VP & CHIEF HR OFFICER	42.00 ----- 0			X				179,053.	0	24,347.
(43) KENNETH MURDOCH ----- VP & CHIEF INFO OFFICER	65.00 ----- 0			X				224,054.	0	29,337.
(44) DIANA MYERS ----- VP, INTERNATIONAL PROGRAMS	69.00 ----- 0			X				244,326.	0	15,205.
(45) SUSAN RIDGE ----- VP, MKTG AND COMMUN.	45.00 ----- 0			X				254,213.	0	29,174.
(46) MARK K SHRIVER ----- SR VP, STRATEGIC INITIATIVES	9.00 ----- 26.00			X				293,516.	0	46,883.
(47) KATHY SPANGLER ----- VP, US PROGRAMS	35.00 ----- 0			X				245,526.	0	19,155.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **163**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

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

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

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) ROBERT D. THOMPSON VP, RESOURCE DEVELOPMENT	50.00 0			X				326,057.	0	35,716.
(49) RICHARD K. TROWBRIDGE, JR. VP FINANCE & CFO	55.00 0			X				248,220.	0	41,724.
(50) GRETCHEN WAGNER VP GENERAL COUNSEL (THRU 11/14)	47.00 0			X				254,278.	0	38,390.
(51) BRIAN WHITE ACTING GENERAL COUNSEL	44.00 0			X				150,375.	0	8,143.
(52) ANDREA WILLIAMSON SECRETARY	45.00 1.00			X				125,695.	0	18,119.
(53) GERALD W. ANDERSON ACT. AVP, POLICY & HUMAN RESP	47.00 0				X			162,684.	0	17,664.
(54) DAVID A. OOT SR ADVISOR, HEALTH & NUTRITION	40.00 0				X			199,137.	0	14,414.
(55) DANIEL N. STONER AVP, EDUCATION & CHILD DEV	41.00 0				X			169,475.	0	38,833.
(56) DANA L. LANGHAM AVP, CHIEF CORP DEV OFFICER	42.00 0					X		187,797.	0	14,546.
(57) CAROLYN A. LOFTUS AVP, DIR, PROGRAM SUPPORT	42.00 0					X		186,710.	0	37,635.
(58) PETER M. OYLOE CHIEF OF PARTY, INTEG NUTRTION	35.00 0					X		194,249.	0	14,299.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **163**

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

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

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

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(59) JANINE L. SCOLPINO ----- AVP, MASS MARKET FUNDRAISING	50.00 ----- 0					X		203,500.	0	41,522.
(60) NANCY A. TAUSSIG ----- AVP, FOUNDATION PARTNERSHIPS	42.00 ----- 0					X		212,128.	0	17,188.

1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 163

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

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

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

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII.

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	466,108.				
	b	Membership dues	1b					
	c	Fundraising events	1c	2,384,665.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	196,978,964.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	445,203,861.				
	g	Noncash contributions included in lines 1a-1f: \$		107,600,123.				
	h	Total. Add lines 1a-1f		645,033,598.				
Program Service Revenue			Business Code					
	2a	FEE FOR SERVICE CONTRACTS	624200	10,169,580.	10,169,580.			
	b	MGMT FEE FROM AFFILIATED ORG.	624200	557,865.	557,865.			
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f		10,727,445.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,550,932.			2,550,932.	
	4	Income from investment of tax-exempt bond proceeds		0				
	5	Royalties		0				
	6a	Gross rents	(i) Real					
			(ii) Personal					
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)		0				
	7a	Gross amount from sales of assets other than inventory	(i) Securities					
			(ii) Other					
				40,849,000.	50,609.			
	b	Less: cost or other basis and sales expenses		33,837,213.	43,404.			
	c	Gain or (loss)		7,011,787.	7,205.			
d	Net gain or (loss)		7,018,992.			7,018,992.		
8a	Gross income from fundraising events (not including \$ <u>2,384,665.</u> of contributions reported on line 1c). See Part IV, line 18	a	79,354.					
b	Less: direct expenses	b	351,092.					
c	Net income or (loss) from fundraising events.		-271,738.			-271,738.		
9a	Gross income from gaming activities. See Part IV, line 19	a						
b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities.		0					
10a	Gross sales of inventory, less returns and allowances	a	17,990.					
b	Less: cost of goods sold	b	16,202.					
c	Net income or (loss) from sales of inventory.		1,788.			1,788.		
		Miscellaneous Revenue	Business Code					
11a	CONTRACT FEE REVENUE	624200	1,546,044.			1,546,044.		
b	SC MEMBER EQUITY COST RECOVERY	624200	772,556.			772,556.		
c	OTHER	624200	224,861.			224,861.		
d	All other revenue							
e	Total. Add lines 11a-11d		2,543,461.					
12	Total revenue. See instructions		667,604,478.	10,727,445.	1,788.	11,841,647.		

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 expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	28,007,839.	28,007,839.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
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	0			
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 disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	13,186.			13,186.
7 Other salaries and wages	67,286,649.	48,976,602.	7,938,057.	10,371,990.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,459,499.	2,586,560.	341,509.	531,430.
9 Other employee benefits	23,630,304.	15,831,936.	3,681,970.	4,116,398.
10 Payroll taxes	193,821.	193,658.	163.	
11 Fees for services (non-employees):				
a Management	10,977,885.		10,977,885.	
b Legal	230,066.	103,039.	98,374.	28,653.
c Accounting	587,209.	61,749.	525,410.	50.
d Lobbying	230,704.			230,704.
e Professional fundraising services. See Part IV, line 17.	5,973,218.			5,973,218.
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 (A) amount, list line 11g expenses on Schedule O.)	10,409,028.	8,213,559.	638,683.	1,556,786.
12 Advertising and promotion	2,622,316.	1,311,158.		1,311,158.
13 Office expenses	9,356,206.	2,700,298.	1,031,384.	5,624,524.
14 Information technology	1,768,628.	918,692.	445,437.	404,499.
15 Royalties	0			
16 Occupancy	5,694,438.	3,878,895.	1,049,512.	766,031.
17 Travel	9,331,063.	8,054,529.	620,952.	655,582.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	332,830.	322,953.	720.	9,157.
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	2,307,681.	877,927.	958,501.	471,253.
23 Insurance	659,685.	521,470.	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.)				
a OTHER PROJECT COSTS -----	19,742,461.	19,604,502.	52,171.	85,788.
b CREDIT CARDS -----	926,236.	32,912.	696.	892,628.
c MEMBERSHIPS -----	333,916.	180,839.	138,957.	14,120.
d OTHER -----	6,928,580.	3,169,583.	272,267.	3,486,730.
e All other expenses -----				
25 Total functional expenses. Add lines 1 through 24e	671,540,517.	601,928,194.	32,042,607.	37,569,716.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X X

		(A) Beginning of year		(B) End of year	
Assets	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	0	4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	11,338,314.	8	3,328,371.
	9	Prepaid expenses and deferred charges	6,194,019.	9	6,266,542.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	22,416,299.	10a	
	b	Less: accumulated depreciation	13,386,115.	10b	
	10c		9,651,374.	10c	9,030,184.
	11	Investments - publicly traded securities	39,316,087.	11	36,176,308.
	12	Investments - other securities. See Part IV, line 11	86,953,508.	12	96,590,453.
	13	Investments - program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
15	Other assets. See Part IV, line 11	16,004,716.	15	24,381,583.	
16	Total assets. Add lines 1 through 15 (must equal line 34)	316,482,265.	16	286,553,255.	
Liabilities	17	Accounts payable and accrued expenses	26,062,809.	17	31,551,160.
	18	Grants payable	84,812,910.	18	56,584,125.
	19	Deferred revenue	518,710.	19	177,599.
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	7,120,512.	25	7,615,840.
	26	Total liabilities. Add lines 17 through 25	118,514,941.	26	95,928,724.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> X and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	126,687,480.	27	125,610,696.
	28	Temporarily restricted net assets	42,029,482.	28	35,111,277.
	29	Permanently restricted net assets	29,250,362.	29	29,902,558.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	197,967,324.	33	190,624,531.
	34	Total liabilities and net assets/fund balances.	316,482,265.	34	286,553,255.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	667,604,478.
2	Total expenses (must equal Part IX, column (A), line 25)	2	671,540,517.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,936,039.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	197,967,324.
5	Net unrealized gains (losses) on investments	5	-4,096,962.
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	690,208.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	190,624,531.

Part XII Financial Statements and Reporting

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

Form **990** (2014)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2014

Open to Public Inspection

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

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

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

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2014 (97.93%); 15 Public support percentage from 2013 Schedule A, Part II, line 14 (99.29%); 16a 33 1/3% support test - 2014 (checked); 16b 33 1/3% support test - 2013; 17a 10%-facts-and-circumstances test - 2014; 17b 10%-facts-and-circumstances test - 2013; 18 Private foundation.

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.)

Section A. Public Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2010, (b) 2011, (c) 2012, (d) 2013, (e) 2014, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 15: Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2013 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, Line Number, Percentage. Row 17: Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2013 Schedule A, Part III, line 17.

- 19a 33 1/3% support tests - 2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
19b 33 1/3% support tests - 2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer (b) below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):

a The organization satisfied the Activities Test. Complete line 2 below.

b The organization is the parent of each of its supported organizations. Complete line 3 below.

c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

	Yes	No
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

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 maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (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	

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 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014:			
a			
b			
c			
d			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
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: \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
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.			
8 Breakdown of line 7:			
a			
b			
c			
d Excess from 2013			
e Excess from 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).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

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	<u>1,236,455.</u>	<u>1,289,219.</u>	<u>3,575,655.</u>	<u>3,390,303.</u>	<u>2,543,461.</u>	<u>12,035,093.</u>

Schedule of Contributors

2014

▶ 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/form990.

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(03) (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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.

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, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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).

Name of organization **SAVE THE CHILDREN FEDERATION, INC.**

Employer identification number
06-0726487

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	[REDACTED] [REDACTED] [REDACTED]	\$ 40,352,569.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	[REDACTED] [REDACTED] [REDACTED]	\$ 32,331,116.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	[REDACTED] [REDACTED] [REDACTED]	\$ 16,649,985.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	[REDACTED] [REDACTED] [REDACTED]	\$ 13,767,177.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	[REDACTED] [REDACTED] [REDACTED]	\$ 13,454,539.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	[REDACTED] [REDACTED] [REDACTED]	\$ 178,259,376.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	---

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 30,300,647.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>
8	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ 69,743,734.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>
	<div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px;"></div>	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>
	<div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px;"></div>	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>
	<div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px;"></div>	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>
	<div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px; margin-bottom: 5px;"></div> <div style="border-top: 1px dashed black; height: 15px;"></div>	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <p style="font-size: small;">(Complete Part II for noncash contributions.)</p>

Name of organization **SAVE THE CHILDREN FEDERATION, INC.**

Employer identification number

06-0726487

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <hr/> <hr/> <hr/> <hr/>	\$ 30,300,647.	VAR
8	<div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 15px; margin-bottom: 5px;"></div> <hr/> <hr/> <hr/> <hr/>	\$ 69,743,734.	VAR
	<hr/> <hr/> <hr/> <hr/>	\$	
	<hr/> <hr/> <hr/> <hr/>	\$	
	<hr/> <hr/> <hr/> <hr/>	\$	
	<hr/> <hr/> <hr/> <hr/>	\$	
	<hr/> <hr/> <hr/> <hr/>	\$	

Name of organization **SAVE THE CHILDREN FEDERATION, INC.**

Employer identification number

06-0726487

Part III *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____*
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship 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) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2014

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)
	Yes	No	Amount
<i>For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.</i>			
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:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?	X		184,048.
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		40,298.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X		71,943.
i Other activities?	X		96,156.
j Total. Add lines 1c through 1i			392,445.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
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?		X	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c 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	

Part IV Supplemental Information

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

Part IV Supplemental Information (continued)

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

Part IV Supplemental Information (continued)

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 BILLS 217, 275, 277, AND 1018 AND SENATE BILLS 376, 1785,

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.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-6 containing questions about donor advised funds and their control.

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form with multiple rows and columns for conservation easement details, including purpose, acreage, and monitoring information.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form with rows and columns for art and historical treasures collection details, including revenue and assets.

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

Schedule D (Form 990) 2014

JSA

4E1268 1.000

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 items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	141,435,709.	117,731,157.	108,131,799.	107,564,982.	89,333,802.
b Contributions	700,110.	11,657,143.	1,745,066.	8,782,908.	15,991,237.
c Net investment earnings, gains, and losses	3,628,220.	16,923,781.	12,323,762.	-1,300,932.	6,703,783.
d Grants or scholarships	5,661,960.	4,820,372.	4,413,609.	4,533,972.	4,377,462.
e Other expenditures for facilities and programs	2,180,000.				
f Administrative expenses	33,000.	56,000.	55,861.	2,381,187.	86,378.
g End of year balance	137,889,079.	141,435,709.	117,731,157.	108,131,799.	107,564,982.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment \blacktriangleright 76.6800 %
 - b Permanent endowment \blacktriangleright 20.4400 %
 - c Temporarily restricted endowment \blacktriangleright 2.8800 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	X
(ii) related organizations	3a(ii)	X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,600.		1,600.
b Buildings				
c Leasehold improvements		538,810.	255,644.	283,166.
d Equipment		20,301,456.	12,245,437.	8,056,019.
e Other		1,574,433.	885,034.	689,399.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				9,030,184.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) 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
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	96,590,453.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" 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)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN	
(2) PERPETUAL TRUST	1,723,900.
(3) ASSETS OF POOLED INCOME FUND	159,302.
(4) CHARITABLE GIFT ANNUITIES	2,845,859.
(5) DUE FROM SAVE THE CHILDREN	
(6) INTERNATIONAL ("SCI")	17,651,217.
(7) DUE FROM SCUS HEAD START	1,946,924.
(8) DUE FROM SAVE THE CHILDREN	
(9) ACTION NETWORK ("SCAN")	54,381.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	24,381,583.

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED SEVERANCE	2,236,558.
(3) POST RETIREMENT BENEFITS OTHER	5,139,297.
(4) THAN PENSION	
(5) LOAN PROGRAM FUND ASSETS HELD	239,985.
(6) IN TRUST BY OTHER	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	7,615,840.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XIII Supplemental Information (continued)

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

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)

TOTAL	15,892,565

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 2D

SALE OF FIXED ASSETS	26,329
RELATED ENTITY EXPENSES	14,957,677
CATALOG EXPENSES	16,202
SPECIAL EVENT EXPENSES	351,092

Part XIII Supplemental Information (continued)

FOREIGN EXCHANGE GAIN (1,364,481)

TOTAL 13,986,819

SCHEDULE D, PART XII, LINE 4B

GRANT TO SUBSIDIARY 2,275,190

RECLASS OF RENTAL EXPENSES 500,000

TOTAL 2,775,190

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2014

Open to Public Inspection

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

SAVE THE CHILDREN FEDERATION, INC.

06-0726487

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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) 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,	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 for Form 990.

Schedule F (Form 990) 2014

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2014

Open to Public Inspection

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization: **SAVE THE CHILDREN FEDERATION, INC.**
Employer identification number: **06-0726487**

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 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)					
(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					
c Totals (add lines 3a and 3b)					

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

Schedule F (Form 990) 2014

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			
(10)			EAST ASIA/PACIFIC	SUBGRANT TO	6,285,399.	WIRE			
(11)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	7,466,078.	WIRE			
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG	6,620,568.	WIRE			
(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.

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)			SUB-SAHARAN AFRICA	SUPPORT PROG	5,013,344.	WIRE			
(2)			SUB-SAHARAN AFRICA	SUPPORT PROG	4,413,819.	WIRE			
(3)			SUB-SAHARAN AFRICA	SUPPORT PROG	4,150,179.	WIRE			
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG	3,572,027.	WIRE			
(5)			MIDDLE EAST/NORTH AFRICA	SUPPORT 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/CARIBBEEA	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			
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG	2,215,920.	WIRE			
(13)			CENTRAL AMERICA/CARIBBEEA	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. ▶

3 Enter total number of other organizations or entities. ▶

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			
(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			

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. ▶ -----

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)			SUB-SAHARAN AFRICA	PROMOTE REST	708,429.	WIRE			
(2)			EAST ASIA/PACIFIC	RETURN OF FU	706,411.	WIRE			
(3)			CENTRAL AMERICA/CARIBBEEA	SUBGRANT TO	619,721.	WTRE			
(4)			EAST ASIA/PACIFIC	SUPPORT PROG	599,361.	WIRE			
(5)			SOUTH ASIA	GLOBAL FUND	593,458.	CHECK			
(6)			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)			NORTH AMERICA	SUPPORT PROG	427,656.	WIRE			
(12)			EUROPE	LIVELIHOOD A	422,211.	WIRE			
(13)			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/CARIBBEEA	SUBS FOR SC	348,942.	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.

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)			EUROPE	LIVELIHOOD A	345,848.	WIRE			
(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			
(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			
(14)			MIDDLE EAST/NORTH AFRICA	INDIA FLOOD	194,791.	WIRE			
(15)			RUSSIA/INDEPENDENT STATE	SUPPORT PROG	187,179.	WIRE			
(16)			SOUTH ASIA	ESTABLISHING	180,815.	CHECK			

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.

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	EMERGENCY RE	169,639.	WIRE			
(2)			SOUTH ASIA	EMERGENCY HE	166,208.	WIRE			
(3)			SOUTH ASIA	NEWBORN HEAL	157,288.	WIRE			
(4)			EUROPE	SUPPORT PROG	153,475.	WIRE			
(5)			EUROPE	EDUCATION	146,646.	WIRE			
(6)			SOUTH ASIA	EDUCATION AW	143,367.	WIRE			
(7)			SOUTH ASIA	PROJECT ACTI	124,431.	CHECK			
(8)			SOUTH ASIA	GLOBAL FUND	124,047.	CHECK			
(9)			SOUTH ASIA	PSYCHOSOCIAL	123,212.	CHECK			
(10)			CENTRAL AMERICA/CARIBBEA	FOOD SECURIT	119,779.	WIRE			
(11)			EUROPE	NUTRITION AC	118,147.	WIRE			
(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			

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.

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	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			
(9)			SOUTH ASIA	GLOBAL FUND	78,498.	CHECK			
(10)			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			
(14)			SUB-SAHARAN AFRICA	HEALTH ACTIV	71,695.	WIRE			
(15)			CENTRAL AMERICA/CARIBBEA	RURAL VALUE	70,951.	CHECK			
(16)			SOUTH ASIA	ACTIVITIES	63,777.	CHECK			

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.

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	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)			EUROPE	EDUCATION AC	49,800.	WIRE			
(6)			SUB-SAHARAN AFRICA	IMPROVED HEA	47,594.	WIRE			
(7)			SOUTH ASIA	PROJECT ACTI	46,868.	CHECK			
(8)			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			

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. ▶

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)			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			

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

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	SUBGRANT TO	27,246.	WIRE			
(2)			EUROPE	MALARIA PREV	25,713.	WIRE			
(3)			EAST ASIA/PACIFIC	SCI POOLED C	25,000.	CHECK			
(4)			SOUTH ASIA	LIVELIHOOD A	23,486.	WIRE			
(5)			EUROPE	CARE FOR HIV	23,265.	WIRE			
(6)			SUB-SAHARAN AFRICA	SUBGRANT TO	22,329.	WIRE			
(7)			SOUTH ASIA	EMERGENCY RE	20,538.	WIRE			
(8)			EAST ASIA/PACIFIC	EDUCATION AC	19,536.	WIRE			
(9)			SOUTH ASIA	GLOBAL FUND	18,622.	CHECK			
(10)			SOUTH ASIA	SUPPORT HEAL	18,570.	WIRE			
(11)			SUB-SAHARAN AFRICA	SUPPORT PROG	18,173.	WIRE			
(12)			MIDDLE EAST/NORTH AFRICA	EDUCATION AC	16,480.	WIRE			
(13)			CENTRAL AMERICA/CARIBBEEA	SUPPORT WATE	16,377.	CHECK			
(14)			MIDDLE EAST/NORTH AFRICA	MULTIPLE SUB	15,991.	WIRE			
(15)			CENTRAL AMERICA/CARIBBEEA	SUBGRANT SC	14,791.	WIRE			
(16)			EAST ASIA/PACIFIC	SUPPORT PROG	13,957.	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. ▶

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)			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/CARIBBEEA	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			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

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.

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			9,407,375.	FOOD	FMV
(2)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			533,661.	FOOD	FMV
(3)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			425,605.	FOOD	FMV
(4)			MIDDLE EAST/NORTH AFRICA	SUPPORT PROG			297,956.	FOOD	FMV
(5)			MIDDLE EAST/NORTH AFRICA	SHOE DISTRIB			141,733.	TOMS SHOES	FMV
(6)			SOUTH AMERICA	SUPPORT PROG			20,223.	ALBENDAZOLE	FMV
(7)			SOUTH ASIA	SUPPORT PROG			4,079,002.	FOOD	FMV
(8)			SOUTH ASIA	SUPPORT PROG			2,947,295.	FOOD	FMV
(9)			SOUTH ASIA	SUPPORT PROG			2,223,592.	FOOD	FMV
(10)			SOUTH ASIA	SUPPORT PROG			554,698.	SHOES, PHARM	FMV
(11)			SOUTH ASIA	SUPPORT PROG			535,717.	TOMS SHOES	FMV
(12)			SUB-SAHARAN AFRICA	SUPPORT PROG			19,571,190.	PLUMPY NUT	FMV
(13)			SUB-SAHARAN AFRICA	SUPPORT PROG			2,623,585.	FOOD	FMV
(14)			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

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. : ▶

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)			SUB-SAHARAN AFRICA	SUPPORT PROG			43,913.	PHARMACEUTIC	FMV
(2)			SUB-SAHARAN AFRICA	SUPPORT PROG			5,400.	THEREPEUTIC	FMV
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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.

3 Enter total number of other organizations or entities. 118.

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FOOD FOR INDIGENTS - 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)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926).* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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 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).* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865).* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990).* Yes No

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.

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 MONITORING, FOOD DISTRIBUTION RECORDS AND PROJECT DOCUMENTATIONS.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(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 CENTER, INC. BARBERTON, OHIO	PROF'L SOLICITOR	X		319,215.	623,216.	-304,001.
2 GRASSROOTS CAMPAIGNS, INC BOSTON, MA	PROF'L SOLICITOR	X		245,009.	471,681.	-226,672.
3 DONORWORX, INC. BETHESDA, MARYLAND	PROF'L SOLICITOR		X	305,390.	592,962.	-287,572.
4 DEVELOPING AWARENESS, INC AUSTIN, TEXAS	PROF'L SOLICITOR		X	1,339,871.	3,032,277.	-1,692,406.
5 DIRECT POINT GROUP, INC. OAKVILLE, ON L6M 3E7	FUND. COUNCIL		X	4,734,370.	357,816.	4,376,554.
6 EPSILON DATA MANAGEMENT LAFAYETTE, COLORADO	FUND. COUNCIL		X	815,359.	103,973.	711,386.
7 DONOR SERVICES GROUP, LLC LOS ANGELES, CALIFORNIA	PROF'L SOLICITOR		X	741,088.	131,270.	609,818.
8 MERKLE COLUMBIA, MARYLAND	FUND. COUNCIL		X	73,533.	92,613.	-19,080.
9 CHARITY DYNAMICS LLC AUSTIN, TEXAS	FUND. COUNCIL		X	391,104.	119,840.	271,264.
10 PAMELA POLAND NEW YORK, NY	FUND. COUNCIL		X	85,498.	63,015.	22,483.
Total				9,050,437.	5,588,663.	3,461,774.

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 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,

Part II 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 (event type)	LIVC - SPRING (event type)	8. (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	1,272,401.	465,070.	726,548.	2,464,019.
	2	Less: Contributions	1,229,201.	440,070.	715,394.	2,384,665.
	3	Gross income (line 1 minus line 2)	43,200.	25,000.	11,154.	79,354.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	270,082.	63,119.	17,891.	351,092.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				351,092.
11	Net income summary. Subtract line 10 from line 3, column (d)				-271,738.	

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 No
 b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%

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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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

- 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:

a	The organization's facility	13a	%
b	An outside facility	13b	%
- 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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

UP FRONT TO THE FUNDRAISER DURING THIS TAX YEAR. THE FIGURES REPORTED IN COLUMN (IV) FOR DONORWORX, GRASSROOTS AND DEVELOPING AWARENESS REFLECT INITIAL REVENUE RESULTS BUT DO NOT REFLECT TOTAL LIFETIME VALUE OF CONTRIBUTIONS THAT WILL BE GENERATED AS A RESULT OF THE FUNDRAISER'S 2014 CAMPAIGNS.

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

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%

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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

INCOME, BY VENDOR. IT ASSUMES A MONTHLY TERMINATION RATE BASED ON HISTORICAL AVERAGES WITH A 1.03% INCREASE IN PAYMENT ADDED TO EACH YEAR OF THE PROJECTED REVENUE AND A 2.4% DISCOUNT RATE.

AS A RESULT OF 2014 EXPENDITURES, INCREMENTAL REVENUE WILL BE ACQUIRED EACH SUBSEQUENT YEAR FROM THESE CANVASSING RECURRING MONTHLY CONTRIBUTORS. TOTAL PROJECTED LIFETIME REVENUE FOR THE CANVASSING

Schedule G (Form 990 or 990-EZ) 2014

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

RECURRING MONTHLY CONTRIBUTORS ACQUIRED IN 2014 THROUGH DONORWORX,

GRASSROOTS AND DEVELOPING AWARENESS IS \$13,964,871.

FUNDRAISER CONTRACTS THAT DO NOT DISTINGUISH BETWEEN SERVICE FEE AND EXPENSE REIMBURSEMENT:

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

1. DONOR CARE CENTER, INC. - CONTRACT ITEMIZES FEES FOR SERVICES BASED UPON SIMILAR FUNDRAISING PROJECTS FOR OTHER CHARITIES, AND SPECIFIES THAT EXPENSE REIMBURSEMENT IS AT COST. DONOR CARE WAS REIMBURSED \$41,498 FOR SHIPPING, PRINTING AND OTHER EXTERNAL SERVICES.

2. DONORWORX, INC. - CONTRACT SETS FEES PER CAMPAIGN PLUS RELATED COSTS AND TRAVEL EXPENSES. DONORWORX WAS REIMBURSED \$240,155 FOR TRAVEL,

Schedule G (Form 990 or 990-EZ) 2014

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

POSTAGE, TRAINING, BOOTH BRANDING AND LEASE COSTS.

3. DEVELOPING AWARENESS, INC. - CONTRACT SETS FEES FOR PER DONOR CONTRIBUTION PROCESSED PLUS REIMBURSEMENT FOR PRINTING COSTS AND AN ADMINISTRATIVE CHARGE PER PLEDGE FORM. DEVELOPING AWARENESS WAS NOT REIMBURSED ANY COSTS IN 2014.

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

4. DIRECT POINT GROUP, INC. - CONTRACT CONTAINS COMPENSATION TERMS FOR MONTHLY AND HOURLY RATES, PLUS MISCELLANEOUS SERVICES AND TRAVEL. DIRECT POINT WAS REIMBURSED \$16,291 FOR TRAVEL, PRINTING AND MEETING EXPENSES.

5. EPSILON DATA MANAGEMENT, LLC - CONTRACT STATEMENT OF WORK ITEMIZES FOR FEES FOR SERVICES MAILING AND STATES THAT CHARITY IS RESPONSIBLE FOR OUT-OF-POCKET COSTS SUCH AS TRAVEL, POSTAGE, FREIGHT AND COURIER SERVICES

Schedule G (Form 990 or 990-EZ) 2014

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

AT COST. EPSILON WAS REIMBURSED \$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

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

FOR TRAVEL.

8. CHARITY DYNAMICS, LLC - CONTRACT OUTLINES FEES. CHARITY DYNAMICS WAS REIMBURSED \$796 FOR TRAVEL.

9. PAMELA POLAND + ASSOCIATES - CONTRACT CONTAINS COMPENSATION TERMS FOR WEEKLY FEES PLUS OUT OF POCKET EXPENSES SUCH AS TRAVEL.

Schedule G (Form 990 or 990-EZ) 2014

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a 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 ▶ \$ _____.
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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).

FUNDRAISER CONTRACTS THAT DO NOT ITEMIZE SERVICE FEES AND EXPENSE

REIMBURSEMENT:

1. GRASSROOTS CAMPAIGN, INC. - CONTRACT CONTAINS COMPENSATION INFORMATION

PER CANVASSING SHIFT ONLY AND MAKES NO MENTION OF REIMBURSEMENT OF

EXPENSES.

- 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:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? 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 ▶ \$ _____
- 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 retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

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 3

SAVE THE CHILDREN IS REGISTERED IN ALL STATES REQUIRING REGISTRATION. WE

SOLICIT CONTRIBUTIONS IN ALL 50 STATES AND THE DISTRICT OF COLUMBIA.

**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

2014

**Open to Public
Inspection**

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.

Employer identification number

06-0726487

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? 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) PCI - PROJECT CONCERN INTERNATIONAL 5151 MURPHY CANYON ROAD, SUITE 320	95-2248462		2,043,834.				MULTIPLE SUBS FROM G
(2) ENCOMPASS LLC 11426 ROCKVILLE PIKE, SUITE 229	52-2228651		1,182,193.				M&E NEWBORN HEALTH
(3) WASHINGTON UNIVERSITY IN ST. LOUIS, ONE BROOKINGS DRIVE ST. LOUIS, MO 63130	43-0653611		932,620.				YOUTHSAVE CONSORTIUM
(4) CLAY COUNTY BOARD OF EDUCATION 128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320		859,566.				DELIVER EDUCATION
(5) LABETTE UNIFIED S.D. #506 401 S. HIGH ALTAMONT, KS 67330	48-0724846		647,835.				DELIVER EDUCATION
(6) CORE, INC. 919 18TH ST. NW SUITE 350	31-1744950	501 (C) (3)	643,426.				RESPONSIBLE FOR THE
(7) WHITLEY CO BOARD OF ED 300 MAIN STREET WILLIAMSBURG, KY 40769	61-6001378		438,113.				DELIVER EDUCATION
(8) THE MANOFF GROUP INC 4301 CONNECTICUT AVE, NW SUITE 454	04-3030192		434,104.				HEALTH & NUTRITION
(9) COCKE CO BOARD OF EDUCATION 305 HEDRICK DRIVE NEWPORT, TN 37821	62-6000539		429,019.				DELIVER EDUCATION
(10) KNOTT CO BOARD OF EDUCATION 1156 HINDMAN BY PASS P.O. BOX 869	61-6001297		413,205.				DELIVER EDUCATION
(11) PERRY CO. BOARD OF EDUCATION 315 PARK AVE. HAZARD, KY 41701	61-6001294		394,014.				DELIVER EDUCATION
(12) BOARD OF EDUCATION USD 453 200 N 4TH STREET LEAVENWORTH, KS 66048	48-6034016		388,354.				DELIVER EDUCATION

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

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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? 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) and government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) MOUND BAYOU SCHOOL DISTRICT 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	52-2996845		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) and government organizations listed in the line 1 table
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 78

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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 government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 79

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) MCCREARY CO. BOARD OF EDUCATION 120 RAIDER WAY STEARNS, KY 42647	61-6001376		126,540.				DELIVER EDUCATION
(2) USD # 286 -- CHAUTAUQUA CO. 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		110,988.				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) and government organizations listed in the line 1 table
- 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)

JSA

4E1288 1.000
1237AH 2219

V 14-6F

2523569

PAGE 80

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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) and government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 81

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

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

▶ Attach to Form 990.

**Open to Public
Inspection**

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

Employer identification number

SAVE THE CHILDREN FEDERATION, INC.

06-0726487

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? 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) 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	501 (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	501 (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 government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 82

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) WILKINSON COUNTY SCHOOL DISTRICT 488 MAIN ST, PO BOX 785 WOODVILLE, MS 39669	64-6001230		64,214.				DELIVER EDUCATION
(2) CATHOLIC RELIEF 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 STREET RIPLEY, TN 38063	62-6000707		63,748.				DELIVER EDUCATION
(4) WEST TALLAHATCHIE SCHOOL DISTRICT 1096 FRIENDSHIP RD W. SUMNER, MS 38966	64-0798045		62,742.				DELIVER EDUCATION
(5) CENTRAL HEIGHTS USD 288 3521 ELLIS RD RICHMOND, VA 66080	48-0697796		61,928.				DELIVER EDUCATION
(6) TIPTON SCHOOL DISTRICT PO BOX 787, 370 N EVANS RD TIPTON, CA 93272	91-1883652		61,535.				DELIVER EDUCATION
(7) CLARENDON COUNTY SCHOOL DISTRICT 1 P.O. BOX 38 SUMMERTON, SC 29148	57-0481945		61,234.				DELIVER EDUCATION
(8) ALPAUGH UNIFIED SCHOOL DIST 5313 ROAD 39 (WILBUR PO BOX 9	77-0031861		60,355.				DELIVER EDUCATION
(9) STATEN ISLAND MENTAL HEALTH SOCIETY 669 CASTLETON AVE. STATEN ISLAND, NY 10301	13-5623279	501 (C) (3)	60,180.				CHILD PROTECTION
(10) WILLISTON SCHOOL DISTRICT 29 OFFICE OF FINANCE, 12233 MAIN STREET	57-6001201		59,803.				DELIVER EDUCATION
(11) TERRA BELLA UNION SCHOOL DISTRICT 9121 ROAD 240 TERRA BELLA, CA 93270	77-0563826		58,821.				DELIVER EDUCATION
(12) ST. MARTIN PARISH SCHOOL BOARD 305 WASHINGTON STREET	72-6001274		58,712.				DELIVER EDUCATION

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 83

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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.				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	501 (C) (3)	49,572.				PROVIDE SUPPORT

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 84

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) ONAGA USD 322 500 HIGH STREET ONAGA, KS 66521	48-0721360		48,994.				DELIVER EDUCATION
(2) BAUKITE SCHOOL DISTRICT 800 SCHOOL STREET BAUKITE, 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 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 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 government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 85

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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) HERRINGTON USD 487 19 NORTH BROADWAY HERRINGTON, 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		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 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. 66 BOERUM PLACE BROOKLYN, NY 11201	11-1631823		39,961.				PROGRAM SERVICES

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

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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 86

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) SCHUYLER COMMUNITY SCHOOL 2404 DENVER STREET 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 MAJOR DRIVE	57-6000708		38,001.				DELIVER EDUCATION
(4) PYRAMID LAKE PAIUTE TRIBE 208 CAPITOL HILL, PO BOX 256	88-0058154		37,141.				DELIVER EDUCATION
(5) BOSTON UNIVERSITY MEDICAL CENTER CAMPUS 25 BUICK STREET 2ND FLOOR BOSTON, MA 02215	04-2103547		37,106.				HEALTH ACTIVITIES
(6) CENTER CONSOLIDATED SCHOOL DISTRICT 26JT 550 S. SYLVESTER AVENUE CENTER, CO 81125	84-6001943		36,013.				DELIVER EDUCATION
(7) WINNEBAGO TRIBE OF NEBRASKA 100 BLUFF STREET WINNEBAGO, NE 68071	47-0489118		34,217.				DELIVER EDUCATION
(8) GREENE COUNTY BOARD OF EDUCATION 220 MAIN ST. EUTAW, AL 35462	63-6000909		33,709.				DELIVER EDUCATION
(9) SOUTH CONEJOS SCHOOL DISTRICT 620 PINE STREET ANTONITO, CO 81120	84-6001045		32,557.				DELIVER EDUCATION
(10) KEARNEY PUBLIC SCHOOLS 310 WEST 24TH ST KEARNEY, NE 68845	47-6001393		31,572.				DELIVER EDUCATION
(11) EDUCARE OF OMAHA 2123 PAUL ST OMAHA, NE 68102	80-0015385	501 (C) (3)	31,162.				DELIVER EDUCATION
(12) COUNSELING IN SCHOOLS, INC. 505 EIGHTH AVE, SUITE 12A-06	13-3637647	501 (C) (3)	30,056.				CHILD PROTECTION

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 87

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) LUTHERAN WORLD RELIEF 700 LIGHT STREET BALTIMORE, MD 21230	13-2574963	501 (C) (3)	29,840.				PROVIDE SUPPORT
(2) SCOTT CO. SCHOOL DISTRICT 208 COURT STREET, PO BOX 180	62-6000823		28,701.				DELIVER EDUCATION
(3) CENTER FOR CHILDREN'S INITIATI 322 EIGHTH AVENUE, 4TH FLOOR	13-3039812		28,460.				TECH SUPPORT
(4) USD #257 - IOLA 408 NORTH COTTONWOOD 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 SUITE 350	31-1744950		22,518.				TECH SUPPORT
(7) UNIFIED SCHOOL DISTRICT #234 424 S. MAIN FORT SCOTT, KS 66701	48-0698393		22,137.				DELIVER EDUCATION
(8) EARLE SCHOOL DISTRICT 802 BARTON, PO BOX 637 EARLE, AR 72331	71-6021260		21,886.				DELIVER EDUCATION
(9) CAMDEN FAIRVIEW SCHOOL DISTRICT 615 CLIFTON ST CAMDEN, AR 71701	71-6020834		21,662.				DELIVER EDUCATION
(10) MIAMI AREA UNIFIED S.D. #40 P.O. BOX 2070 MIAMI, AZ 85539	86-6000456		21,633.				DELIVER EDUCATION
(11) OSKALOOSA USD 341 404 PARK ST OSKALOOSA, KS 66066	48-6034902		21,265.				DELIVER EDUCATION
(12) VISITING NURSE SERVICE OF NEW YORK 216 BEACH 87TH STREET	13-1624211	501 (C) (3)	20,646.				FACILITY REPAIR

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

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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	01-0679652	501 (C) (3)	16,755.				PROGRAM SERVICES
(9) NORTHWEST ARKANSAS CHILD CARE RESOURCE & RE 614 E EMMA AVE SPRINGDALE, AR 72764	71-0780981	501 (C) (3)	16,340.				CHILD PROTECTION
(10) WHITE RIVER PLANNING & DEVELOPMENT DISTRICT 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		15,603.				DELIVER EDUCATION

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 89

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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 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	501 (C) (3)	6,232.				PROVIDE SUPPORT

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 90

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) MOORE PUBLIC SCHOOLS FOUNDATION 1500 SOUTHEAST 4TH STREET MOORE, OK 73153	73-1468939	501 (C) (3)	6,165.				PROGRAM SERVICES
(2) CHERI'S DAYCARE 909 SW 10TH ST MOORE, OK 73160	20-8372248		5,407.				STORM SHELTER
(3) CLAY COUNTY BOARD OF EDUCATION 128 RICHMOND ROAD MANCHESTER, KY 40962	61-6001320			283,694.		AMERICAN GIRL BOOKS,	DELIVER EDUCATION
(4) AMERICAN RED CROSS: WASHINGTON, DC 20006; 2025 E ST NW WASHINGTON, DC, DC 20006	53-0196605			193,944.		CLOTHING	EMERGENCIES
(5) ST. MARTIN PARISH SCHOOL BOARD 305 WASHINGTON STREET	72-6001274			124,365.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(6) PERRY CO. BOARD OF EDUCATION 315 PARK AVE. HAZARD, KY 41701	61-6001294			105,298.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(7) COCKE CO BOARD OF EDUCATION 305 HEDRICK DRIVE NEWPORT, TN 37821	62-6000539			79,974.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(8) KNOTT CO BOARD OF EDUCATION 1156 HINDMAN BY PASS P.O. BOX 869	61-6001297			78,774.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(9) WHITLEY CO BOARD OF ED 300 MAIN STREET WILLIAMSBURG, KY 40769	61-6001378			69,779.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(10) MARION COUNTY BOARD OF EDUCATION 1010 HWY 13 NORTH, STE 2 COLUMBIA, MS 39429	64-6000671			61,919.		TOMS SHOES & AMERICA	DELIVER EDUCATION
(11) MCDOWELL COUNTY BOE 30 CENTRAL AVE WELCH, WV 24801	55-6000356			55,598.		AMERICAN GIRL BOOKS	DELIVER EDUCATION
(12) TIPTON COUNTY BOARD OF EDUCATION 1580 HWY 51S COVINGTON, TN 38019	62-6000870			50,412.		TOMS SHOES & AMERICA	DELIVER EDUCATION

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

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 91

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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 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	45-0469376	501 (C) (3)		27,757.		AMERICAN GIRL BOOKS	DELIVER EDUCATION

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

JSA

4E1288 1.000
1237AH 2219

V 14-6F

2523569

PAGE 92

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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) and government organizations listed in the line 1 table ▶
- 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)

JSA

4E1288 1.000

1237AH 2219

V 14-6F

2523569

PAGE 93

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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? 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) 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, 10615 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

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

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)

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2014

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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? 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) 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 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)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 49.

3 Enter total number of other organizations listed in the line 1 table ▶ 175.

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

Schedule I (Form 990) (2014)

JSA

4E1288 1,000

1237AH 2219

V 14-6F

2523569

PAGE 95

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

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

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

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCHEDULE I, PART I, LINE 2

SAVE THE CHILDREN FEDERATION, INC. CONDUCTS PERIODIC FINANCIAL AND PROGRAM REVIEWS WITH SCHEDULED AUDITS. THESE INCLUDE MONTHLY BUDGET VERSUS ACTUAL ANALYSIS COMPARING BOTH SPENDING AGAINST THE LIFE OF GRANTS AMOUNTS AS WELL AS THE PROJECTED ANNUAL AMOUNT. SPENDING AGAINST EACH GRANT HAS TO BE APPROVED BY THE APPROPRIATE SUPERVISOR UNDER THE SEGREGATION OF DUTIES INTERNAL CONTROLS CREATED FOR ALL FIELD OFFICES. THESE INTERNAL CONTROLS ARE REVIEWED AND UPDATED AS APPROPRIATE BY THE HEAD FINANCE STAFF PERSON FOR THE OFFICE, IN CONJUNCTION WITH THE AREA

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

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

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

CONTROLLER, AND TESTED ON A REGULAR BASIS.

**SCHEDULE J
(Form 990)**

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2014

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

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

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.

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

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.

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

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;

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.

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.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2014

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization: **SAVE THE CHILDREN FEDERATION, INC.**
Employer identification number: **06-0726487**

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

Total ▶ \$ _____

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

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

Schedule L (Form 990 or 990-EZ) 2014

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) TERTIA TROWBRIDGE (THRU 6/2014)	FAMILY MEM - R TROWBRIDGE	13,186.	COMPENSATION		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2014

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

SAVE THE CHILDREN FEDERATION, INC.

06-0726487

Part 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	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		971,075.	FMV
5 Clothing and household goods	X		5,107,134.	FMV
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 Collectibles				
19 Food inventory	X	7.	100,124,996.	FMV
20 Drugs and medical supplies	X	24.	924,493.	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>ATCH 1</u>)		32.	472,424.	
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2014)

JSA

4E1298 1.000

1237AH 2219

V 14-6F

2523569

PAGE 105

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.

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

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

2014

**Open to Public
Inspection**

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.

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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,

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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 3½ - 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

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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

HIV/AIDS

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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

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.

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

06-0726487

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

TIMES OF CRISIS, AT NO ADDITIONAL COST.

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 4I

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).

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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.

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

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

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

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

ATTACHMENT 1

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
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.

Name of the organization SAVE THE CHILDREN FEDERATION, INC.	Employer identification number 06-0726487
--	--

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>EXPENSES</u>	<u>REVENUE</u>
CHILD RIGHTS GOVERNANCE	1,042,318.	1,163,566.	4,774.
TOTALS	<u>100,455,607.</u>	<u>139,427,618.</u>	<u>221,097.</u>

ATTACHMENT 2

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,

ATTACHMENT 3

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
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.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2014

Open to Public Inspection

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

SAVE THE CHILDREN FEDERATION, INC.

Employer identification number

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 512(b)(13) controlled entity?	
						Yes	No
(1) SCUS HEAD START PROGRAMS, INC 501 KINGS HIGHWAY EAST, SUITE FAIRFIELD, CT 06825 45-3672468	PRESCHOOL	CT	501 (C) (3)	7	SCUS	X	
(2) SAVE THE CHILDREN ACTION NETWORK, INC. 2000 L ST, NW, SUITE 500 WASHINGTON, DC 20036 46-5465189	SOCIALWELFARE	DE	501 (C) (4)		SCUS	X	
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2014

Part III 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 related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (4)									
(2) AZERI STAR MICROFINANCE 9A/1 GEN AKIM ABBASOV STREET BAKU, AJ	INVESTMENT	CA	SCUS	TRUST					
(3)	MICRO LOANS	AJ	SCUS	C CORP	-545,835.	1,184,322.	100.0000		
(4)									
(5)									
(6)									
(7)									

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) SAVE THE CHILDREN ACTION NETWORK, INC.	B	1,180,033.	COST
(2) SAVE THE CHILDREN ACTION NETWORK, INC.	O	1,095,157.	COST
(3) SCUS HEAD START PROGRAMS, INC	O	7,880,639.	COST
(4) SCUS HEAD START PROGRAMS, INC	N	557,865.	ALLOCATED COST
(5) SAVE THE CHILDREN ACTION NETWORK	Q	2,449,013.	COST
(6)			

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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.

