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Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0047

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

Open to Public Inspection

	Of the Z	013 calendar year, or tax year beginning and ending		
Bc	Check if	C Name of organization	D Employer identification number	er
_	Address change	FIGHT FOR CHILDREN, INC.		
-	Name		- 52 1706050	
늗	lchange linitial	Doing Business As	52-1706059	
늗	return	Number and street (or P 0 box if mail is not delivered to street address)  Room/si	1	~
H	Termin- ated Amended	1726 M STREET, NW 202	202-772-041	
<u> </u>	return ☐Applica-	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$ 5,95	<u>2,142</u>
Ц.	tion pending	WASHINGTON, DC 20036	H(a) Is this a group return	
	periang	F Name and address of principal officer MICHELA ENGLISH	for subordinates? Ye	s XN
		SAME AS C ABOVE	H(b) Are all subordinates included? Ye	s 🔲 No
<u>  T</u>	Γax-exem	ot status $X = 501(c)(3) = 501(c)(3)$ (insert no ) $4947(a)(1)$ or $300 = 100$	If "No," attach a list (see instru	uctions)
J V	<b>Nebsite:</b>	▶ WWW.FIGHTFORCHILDREN.ORG	H(c) Group exemption number ▶	
<u>K F</u>	orm of or		ear of formation 1990 M State of legal of	domicile: D
Pa	artl∣ S	ummary		
e l	1 Bri	efly describe the organization's mission or most significant activities $\ \ \underline{\sf SEE} \ \ \ {\sf PART}$	III, LINE 1	
Activities & Governance				
eru		eck this box   if the organization discontinued its operations or disposed of m	ore than 25% of its net assets	
Š	Ì	mber of voting members of the governing body (Part VI, line 1a)	CEIVED 3	1
8	1			1
ies	1	al number of individuals employed in calendar year 2013 (Part V, line 2a) al number of volunteers (estimate if necessary) al unrelated business revenue from Part VIII, column (C), line 12	<u> </u>	1
Ĭ	6 To	al number of volunteers (estimate if necessary)	2 1 2014 8 6	8
P ct	7 a To	al unrelated business revenue from Part VIII, column (C), line 12	2 1 2014 S	0
	b Ne	t unrelated business taxable income from Form 990-T, line 34		0
			Prior Year Current	Year
ம	<b>8</b> Co	ntributions and grants (Part VIII, line 1h)	6,752,750. 5,09	2,033
Revenue	9 Pro	ogram service revenue (Part VIII, line 2g)	0. 12	0,000
ě	<b>10</b> Inv	estment income (Part VIII, column (A), lines 3, 4, and 7d)	4,062. 5	1,639
	11 Oti	ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,088
	12 To	al revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,584
		ants and similar amounts paid (Part IX, column (A), lines 1-3)		0,196
		nefits paid to or for members (Part IX, column (A), line 4)	0.	0
တ	ŀ	aries other compensation, employee benefits (Part IX, column (A), lines 5-10)		0,704
JSe	}	ofessional fundraising fees (Part IX, column (A), line 11e)	0.	0
Expenses	ı	al fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright$ 151, 792.		
Δļ	l	ner expenses (Part IX, column (A), lines 11a·11d, 11f·24e)	440,511. 98	1,156
	l	al expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		$\frac{1,130}{2,056}$
	l	venue less expenses Subtract line 18 from line 12		
- 8	lig ne	Vertue less expenses Subtract fille 16 from line 12	•	5,472
Assets or d Balances	00 T-	-l (D	Beginning of Current Year End of	
Ball	20 Tot	al assets (Part X, line 16)		<u>0,996</u>
Net A Fund		al liabilities (Part X, line 26)		6,383
		assets or fund balances Subtract line 21 from line 20	6,376,254. 6,53	<u>4,613</u>
		<u> </u>	amonto and to the best of multi-suit-de-	
		s of perjury, I declare that I have examined this return, including accompanying schedules and stated		o bellet, it is
uuc,	LUITEUL, A	nd complete Declaration of preparer (other than officer) is based on all information of which preparer	rei nas any knowledge.	
	,	Signature of officer	Date Date	
C. ~~	l l	MICHELA ENGLISH, PRESIDENT/CEO		
		Type or print name and title		
	e	No. 1 - Commission and annual	Date Check PTIN	
	e or	ht///nh nengrar's natha		
Here	Pr	VType preparer's name  Preparer's signature	Po	13305
Here  Paid	Pr	Maleos Alexandeu	ri self-employed P0	
Here Paid Prep	Pr Pr arer Fir	m's name GELMAN, ROSENBERG & FREEDMAN	Firm's EIN 52-139	
Here Paid Prep	Pr Pr arer Fir	m's name GELMAN, ROSENBERG & FREEDMAN m's address 4550 MONTGOMERY AVE SUITE 650N	Firm's EIN ► 52-139	2008
Here Paid Prep Use (	arer Fir	m's name GELMAN, ROSENBERG & FREEDMAN m's address 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930	Firm's EIN 52-139;  Phone no. (301) 951	2008 -9090
	arer Fir	m's name GELMAN, ROSENBERG & FREEDMAN m's address 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930 discuss this return with the preparer shown above? (see instructions)	Firm's EIN ► 52 – 139;  Phone no. (301) 951  X Yes	2008 -9090

332002

SEE SCHEDULE O FOR CONTINUATION(S)

Form 990 (2013)

Pa	rt IV Checklist of Required Schedules	2000		age o
•			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		162	140
-	If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u>-</u> -		
•	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		23
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- · -		
_	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
-	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable		!	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate independent audited financial statements for the tax year? If "Yes," complete	i i		İ
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
4-	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			٠,,
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X

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b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV Checklist of Required Schedules (continued) Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

Yes No government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX. 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Х 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No", go to line 25a Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х 25a b Is the organization aware that it engaged in an excess benefit transaction with a disgualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Х 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or 26 former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, Х complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 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? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes." complete Schedule L. Part IV X 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes." complete Schedule L. Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Х 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701 2 and 301 7701-37 If "Yes," complete Schedule R, Part I X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 X 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

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Х

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Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

If "Yes," complete Schedule R, Part V, line 2

Note, All Form 990 filers are required to complete Schedule O

, ra	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable 1a 4(	<u>)</u>		
b		<u>]</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return  2a 1	틱		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		1	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	نط	X
	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37
<b>L</b>	any contributions that were not tax deductible as charitable contributions?	6a	$\vdash$	X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			ĺ
7	Organizations that may receive deductible contributions under section 170(c).	6b		<del>                                     </del>
и а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	x	l
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	<del>                                     </del>
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		<del>                                     </del>
·	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting $N/A$			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966? N/A	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			ļ
	amounts due or received from them)	4		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<b>-</b>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	-		İ
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O			
D	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  136	1		
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	140		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		
	- 100, Floride all explanation il confedure O		990	(2012

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.			
<u>Sec</u>	tion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 14						
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	ŀ					
b	Enter the number of voting members included in line 1a, above, who are independent 15 15						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1					
	officer, director, trustee, or key employee?	2		X			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X			
6	Did the organization have members or stockholders?	6		X			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or						
	more members of the governing body?	7a		X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
_	persons other than the governing body?	7b		Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	Х				
b	Each committee with authority to act on behalf of the governing body?	8b	Х				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	-					
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х			
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?	10b 11a	Х				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	in Schedule O how this was done	12c	Х				
13	Did the organization have a written whistleblower policy?	13	Х				
14	Did the organization have a written document retention and destruction policy?	14	Х				
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official	15a		X			
b	Other officers or key employees of the organization	15b		X			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
	taxable entity during the year?	16a		Х			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b		_			
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
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)	availab	le				
	for public inspection. Indicate how you made these available. Check all that apply						
	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, an	d finar	icial				
	statements available to the public during the tax year						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion 🕨					
	JUDY WRENCH - 202-772-0417						
	1726 M STREET, NW, NO. 202, WASHINGTON, DC 20036						
		Form	000	(2012)			

# 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 report able 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 n  (A)  Name and Title	(B) Average	(do	not c	(C Pos heck	C) ition more	1 than	one	<b>(D)</b> Reportable	(E) Reportable	(F) Estimated
	hours per week	offi	, unle cer ar					compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MICHELA ENGLISH	40.00			}					_	
PRESIDENT & CEO	4	X		Х		<u> </u>		254,583.	0.	1,865
(2) RAUL FERNANDEZ	1.00							_	_	_
CHAIRMAN	1 00	X	_	X		├		0.	0.	0
(3) JAMES ABDO	1.00					İ				_
BOARD MEMBER		X				<u> </u>		0.	0.	0
(4) GINA ADAMS	1.00	,,						0		•
BOARD MEMBER	1 00	X						0.	0.	0
(5) G. DAVID FENSTERHEIM	1.00	<b>.</b>						٠ .	0	0
BOARD MEMBER	1.00	X				-		0.	0.	0
(6) ADRIAN FENTY	1.00	X						0.	0.	۸
BOARD MEMBER	1.00						Н			0
(7) MICHAEL KIMSEY BOARD MEMBER	1.00	Х						0.	0.	0
(8) CHARLES KUHN	1.00	22				-		0.	<u> </u>	
BOARD MEMBER	1.00	х						0.	0.	0
(9) ANTHONY A. LEWIS	1.00					_		<u> </u>		
BOARD MEMBER		х						0.	0.	0
(10) KURT NEWMAN	1.00									<u>~</u>
BOARD MEMBER		Х						0.	0.	0
(11) JOSEPH E. ROBERT, III	1.00									<u> </u>
BOARD MEMBER		Х						0.	0.	0
(12) FREDRICK SCHAUFELD	1.00									
BOARD MEMBER		X						0.	0.	0
(13) REGINALD VAN LEE	1.00									
BOARD MEMBER		X						0.	0.	0
(14) ANTHONY A. WILLIAMS	1.00									
BOARD MEMBER		X						0.	0.	0
(15) JOHN MCKOY	40.00									
DIRECTOR OF PROGRAMMATIC INITIATIVES					Х			<u>184,674.</u>	0.	10,899
(16) JEFFREY TRAVERS	40.00									
DIRECTOR OF EXTERNAL RELATIONS						X		<u>1</u> 30,300.	0.	<u> 15,747</u>
				- 1		l				

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Form 990 (2013)

Form 990 (2013)

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

\$100,000 of compensation from the organization

	•	Check if Schedule O cont	tains a response	or note to any lin	e 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
nts	1 a	Federated campaigns	1a					
ă. Our	b	Membership dues	1b					
s, C	С	Fundraising events	1c	3,264,625.				
ar.	ď	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contribut	ions) 1e	69,250.				
e เ	,	All other contributions, gifts, gran	· —					
the Et		similar amounts not included abo		1,758,158,				
ĒÓ	а	Noncash contributions included in lines	·					
a Co	_	Total. Add lines 1a-1f		<b>•</b>	5 092 033	1		
			· -	Business Code				
é	2 a	SCHOOL PARTICIPATION F		900099	120,000.	120,000.		
2 4	b				,			
Se	С							
am eve	d	·						
Program Service Revenue	е							
	f	All other program service reve	enue					
	q	Total. Add lines 2a-2f		<b>•</b>	120,000.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	26,798.	i		26.798.
	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties		▶ ]				
		•	(ı) Real	(II) Personal				
	6 a	Gross rents			:			
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b>•</b>				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	44,693.					
	b	Less cost or other basis	,					
		and sales expenses	19,852.					
	С	Gain or (loss)	24.841.					
	d	Net gain or (loss)			24.841.		<u>.</u>	24.841.
e	8 a	Gross income from fundraising	g events (not					
ne l		including \$3,264	<u>,625.</u> of					
ě		contributions reported on line	1c) See			`		
P.		Part IV, line 18	а	668,618.				
Other Reven	b	Less direct expenses	b	1,515,706.		1		
	С	Net income or (loss) from fund	fraising events	<b>•</b>	-847,088.			-847,088.
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b			į		
		Net income or (loss) from gam		<b>•</b>	·			
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
		Less cost of goods sold	b	L				
	с	Net income or (loss) from sale	s of inventory	<b>•</b>				
		Miscellaneous Revenu	e	Business Code				
	11 a							<u> </u>
	b							
	С							
ļ	d	All other revenue	,					
	е	Total. Add lines 11a-11d		<b>▶</b>				
	12	Total revenue See instructions		<b></b>	4,416,584,	120 000	0	
332009	9 13							Form <b>990</b> (2013)

Form 990 (2018) FIGHT FOR CHILDREN, INC. 52-1706059 Page 10
Part IX Statement of Functional Expenses

Sec	ion 501(c)(3) and 501(c)(4) organizations must com			mplete column (A)	
	Check if Schedule O contains a respon				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21	2,300,196.	2,300,196.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	452,021.	314,018.	86,713.	51,290
6	Compensation not included above, to disqualified		]		
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	551,410.	338,909.	135,812.	76,689.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	26,793.	15,842.	-6,856.	4,095
9	Other employee benefits	47,843.	29,479.	11,574.	6,790
10	Payroll taxes	62,637.	40,569.	14,000.	8,068.
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	24,510.	24,510.		
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	662,645.	595,868.	66,777.	
12	Advertising and promotion				
13	Office expenses	52,230.	2,060.	48,851.	1,319.
14	Information technology	28,467.		28,467.	
15	Royalties				
16	Occupancy	80,470.		80,470.	
17	Travel	5,442.	1,177.	4,265.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	26,091.	25,379.	712.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	44,578.		44,578.	
23	Insurance	4,982.		4,982.	·
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 0.)				
а	BAD DEBT	25,000.		25,000.	
b	DUES AND SUBSCRIPTIONS	9,770.	5,000.	1,300.	3,470.
С	MEDIA, PRINTING & PUBS.	6,355.	1,430.	4,925.	
d	ENTERTAINMENT	4,397.	996.	3,330.	71.
е	All other expenses	6,219.		6,219.	
25	Total functional expenses Add lines 1 through 24e	4,422,056.	3,695,433.	574,831.	151,792.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X	Balance Sheet			
•	Check if Schedule O contains a response or note to any line in this Part X			
		(A)		(B)
		Beginning of year	ļ	End of year
1	Cash - non-interest bearing	12,535.	1	289,727
2	Savings and temporary cash investments	3,036,295.		2,328,619
3	Pledges and grants receivable, net	<u>4,032,929.</u>	3_	3,505,769
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
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			
왊	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
<b>⋖</b>   8	Inventories for sale or use		8	<del></del>
9	Prepaid expenses and deferred charges	15,027.	9	<u> 15,451</u>
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 223,640.			
b	Less accumulated depreciation 10b 175,256.	89,956.	10c	48,384
11	Investments publicly traded securities	* **	11	2,300,182
12	Investments - other securities See Part IV, line 11		12	552,374
13	Investments · program related See Part IV, line 11	. ,	13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	0.	15	490
16	Total assets. Add lines 1 through 15 (must equal line 34)	7,186,742.	16	9,040,996
17	Accounts payable and accrued expenses	268,488.	17	417,187
18	Grants payable	523,000.	18	2,088,196
19	Deferred revenue	19,000.	19	1,000
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D	· • • • • • • • • • • • • • • • • • • •	21	
စ္မ 22	Loans and other payables to current and former officers, directors, trustees,			
≝	key employees, highest compensated employees, and disqualified persons			
Liabilities N	Complete Part II of Schedule L		22	
ے   23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third		İ	
	parties, and other liabilities not included on lines 17-24) Complete Part X of			
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	810,488.	26	<u>2,506,383</u>
	Organizations that follow SFAS 117 (ASC 958), check here ▶ 🐰 and			
S S	complete lines 27 through 29, and lines 33 and 34.			
을 27	Unrestricted net assets	2,445,001.	27	2,680,205
rg 28	Temporarily restricted net assets	3,931,253.	28	3,854,408
[ 29	Permanently restricted net assets		29	····
Net Assets or Fund Balances 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Organizations that do not follow SFAS 117 (ASC 958), check here ▶		İ	
5	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
ဖွဴ 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
Z 33	Total net assets or fund balances	6,376,254.	33	6,534,613.
34	Total liabilities and net assets/fund balances	7,186,742.	34	9,040,996

Form **990** (2013)

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

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3b

Form 990 (2013)

### SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Public Charity Status and Public Support

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number FIGHT FOR CHILDREN. 52-1706059 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) 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) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(IV). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 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 that describes the type of supporting organization and complete lines 11e through 11h b \_\_\_ Type II c Type III - Functionally integrated d Type III Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 1<u>1g(ııı)</u> Provide the following information about the supported organization(s) (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (II) EIN (iii) Type of organization (vii) Amount of monetary organization in col. n col (i) listed in your organization in col. organization (described on lines 1-9 (i) organized in the support governing document? above or IRC section (1) of your support? (see instructions)) Yes No Yes LHA For Paperwork Reduction Act Notice, see the Instructions for Schedule A (Form 990 or 990-EZ) 2013

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Form 990 or 990-EZ.

Schedule A (Form 990 or 990 EZ) 2013 FIGHT FOR CHILDREN, INC. 52-17060

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)

Se	ction A. Public Support		<u> </u>			<del></del>	
	endar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Gifts, grants, contributions, and	(-,	197=3:3	(0) = 0 1	197	(6) 20.0	(1) 1010.
•	membership fees received (Do not						•
	include any "unusual grants ")	2,762,859.	2,368,123.	2,258,507.	6,752,750.	5,029,033.	19,171,272.
2	Tax revenues levied for the organ-				,		
	ization's benefit and either paid to						
	or expended on its behalf			•			
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						·
4	Total. Add lines 1 through 3	2,762,859.	2,368,123.	2,258,507.	6,752,750.	5,029,033.	19,171,272.
	The portion of total contributions	2,702,033.	2,300,123.	2,230,307.	0,752,750.	3,029,033.	19,1/1,2/2.
Ü	by each person (other than a					j	
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		İ				
	column (f)						
6	``						5,329,048.
	Public support. Subtract line 5 from line 4 ction B. Total Support		I	<u></u> !			13,842,224.
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(0) 2011	(d) 2012	(-) 2012	(f) Total
	Amounts from line 4	· - I	(b) 2010	(c) 2011		(e) 2013	(f) Total
	ł	2,762,859.	2,368,123.	2,258,507.	6,752,750.	5,029,033.	19,171,272.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	26 051	17 465	0 141	4 062	26 700	04 217
_	and income from similar sources	36,851.	17,465.	9,141.	4,062.	26,798.	94,317.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						<del></del>
10	Other income Do not include gain						
	or loss from the sale of capital	f		206	654		4 225
	assets (Explain in Part IV)			386.	651.		1,037.
	Total support. Add lines 7 through 10		<u>.</u>				19,266,626.
	Gross receipts from related activities,	•	,		L	12	<u> 120,000.</u>
13	First five years. If the Form 990 is for		first, second, third	, fourth, or fifth tax	year as a section	n 501(c)(3)	. $\square$
<u> </u>	organization, check this box and stop ction C. Computation of Publi		contogo				
	<del></del>	• • • • • • • • • • • • • • • • • • • •			<u> </u>		
	Public support percentage for 2013 (li	,	•	lumn (f))	-	14	71.85 %
	Public support percentage from 2012				Į	15	<u>68.38 %</u>
16a	33 1/3% support test - 2013. If the o	rganization did not	check the box on	line 13, and line 14	1 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies a		•				$\triangleright \bot X \bot$
t	33 1/3% support test - 2012. If the o	rganization did not	check a box on lin	e 13 or 16a, and li	ne 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization quali	fies as a publicly s	upported organizat	ion			
17a	10% -facts-and-circumstances test	t - <b>2013</b> . If the orga	ınızatıon dıd not ch	eck a box on line	13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fact	ts-and-circumstanc	es" test, check this	s box and <b>stop he</b>	re. Explain in Parl	t IV how the organ	ization
	meets the "facts-and-circumstances"	test The organizat	ion qualifies as a p	ublicly supported (	organization		
b	10% -facts-and-circumstances test	: - <b>2012</b> . If the orga	ınızatıon dıd not ch	eck a box on line <sup>.</sup>	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	e "facts-and-circur	nstances" test, che	eck this box and st	t <b>op here.</b> Explain	in Part IV how the	
	organization meets the "facts-and-circ	umstances" test 1	The organization qu	alifies as a publicl	y supported orga	nızatıon	▶□
18	Private foundation. If the organization	n did not check a b	ox on line 13, 16a,	16b, 17a, or 17b,	check this box ar	nd see instructions	<u> </u>
					Scher	dule A (Form 990	or 990-F7\ 2013

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	edule A (Form 990 or 990-EZ) 2013						Page <b>3</b>
Pa	rt III Support Schedule for C	-		•			
	(Complete only if you checked	the box on line 9	of Part I or if the o	rganization failed	to qualify under Pa	art II If the organiza	ation fails to
_	qualify under the tests listed b	elow, please com	plete Part II)				<del></del>
Se	ction A. Public Support			,			
Cale	ndar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6) tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income				 		
	(less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						_
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital		,				
13	assets (Explain in Part IV) Total support (Add lines 9, 10c, 11, and 12)					_	
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax vear as a sectio	n 501(c)(3) organiz	ation.
	check this box and stop here	<u> </u>		, , , , , , , , , , , , , , , , , , , ,	,	V-1/V-1-9-11	
Sec	tion C. Computation of Publi	c Support Pe	rcentage				
	Public support percentage for 2013 (lii			column (fl)		15	%
	Public support percentage from 2012		•	VII		16	- <u>'</u>
	tion D. Computation of Inves						
	Investment income percentage for 20		<del></del>	ne 13, column (fl)		17	%
	Investment income percentage from 2			(1)		18	%
	33 1/3% support tests - 2013. If the			on line 14, and line	e 15 is more than 3	33 1/3%, and line 1	

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. 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

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nedule A art IV	(Form 990 or 990 EZ) 2013 FIGH	IT FOR CHILDREN	,_INC.	52-1706059 Pag
artiv	Supplemental Information.	Provide the explanations red	quired by Part II, line	10, Part II, line 17a or 17b, and Part III, line 12
	Also complete this part for any add	litional information (See instri	uctions)	
			<del></del>	
			<del></del>	
	· · · · · · · · · · · · · · · · · · ·		<del></del>	
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				·
	-			
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			<del></del>	
		<u> </u>		
-				

### SCHEDULE D

Department of the Treasury

Internal Revenue Service

(Form 990)

### Supplemental Financial Statements

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 OMB No. 1545-0047 Open to Public Inspection

Name of the organization

FIGHT FOR CHILDREN, INC.

Employer identification number

52-1706059 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only 6 for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements 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 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (II) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2013

		OR CHILDRE							70605		age 2
	rt III   Organizations Maintaining (										
З,	Using the organization's acquisition, access	ion, and other record	ds, check a	any of the	following tha	it are a s	significa	nt use of its	collectio	ın item	ıs
	(check all that apply)										
а	Public exhibition	C	d LL Lo	an or exc	hange progra	ams					
b	Scholarly research	•	e 01	ther							
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	in how the	y further tl	he organizati	on's exe	empt pu	rpose in Pa	rt XIII		
5	During the year, did the organization solicit of					er sımıla	r assets	; _	_		_
	to be sold to raise funds rather than to be m					_			Yes_		<u>No</u>
Pa	rt IV Escrow and Custodial Arran		ete if the o	rganizatio	n answered '	"Yes" to	Form 9	90, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for co	ontribution	s or other as	sets not	t include	ed	_		٦.
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing tal	ole				<del>"</del>			
									Amoun	<u>t</u>	
С	Beginning balance						10	:			
d	Additions during the year						10				
е	Distributions during the year						1e				
f	Ending balance						1f				1
2a	Did the organization include an amount on F	· · · · · · · · · · · · · · · · · · ·						<u></u>	Yes	 	No
Pai	If "Yes," explain the arrangement in Part XIII								<del></del>		
Га	rt V Endowment Funds. Complete		T						1		<del></del>
	De sur sur sur of versus below so	(a) Current year	(b) Pric	or year	(c) Two year	s back	(d) Inre	e years back	<b>(e)</b> Fou	<u>r years</u>	back
1a	Beginning of year balance		<u> </u>								
b	Contributions		<del>,</del>						+		
C	Net investment earnings, gains, and losses						<del>_</del>		<del></del>		
a -	Grants or scholarships								-		
е	Other expenditures for facilities										
	and programs			_					+		
1	Administrative expenses				-				+		
g	End of year balance	ront year and balanc	) ) (line 1 a	ook (mo /o	)) bold oo				<u>.l</u>		<del></del>
2	Provide the estimated percentage of the cur Board designated or quasi-endowment	rent year end barant	e (ime rg, %	column (a	i)) neid as						
a	Permanent endowment	%									
b	Temporarily restricted endowment	%									
·	The percentages in lines 2a, 2b, and 2c shou										
32	Are there endowment funds not in the posse		ation that s	are held a	nd administa	red for t	he orga	nization			
Ou	by	osion of the organiz	ation that t	are ricid ai	na aariiinste	ica ioi ti	ne orga	inzation		Yes	No
	(i) unrelated organizations								3a(ı)	163	140_
	(ii) related organizations								3a(II)	-+	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedul	e B?					3b		
4	Describe in Part XIII the intended uses of the	•							[ 00 ]		
	t VI Land, Buildings, and Equipm										
	Complete if the organization answere		), Part IV, III	ne 11a Se	ee Form 990.	Part X.	line 10				
	Description of property	(a) Cost or o		(b) Cost			ccumula	ated	(d) Boo	k valu	<del></del>
	, , , , , , , , , , , , , , , , , , , ,	basis (investr	į.	basis (	<b>I</b>		preciation	- 1	, 2, 200		-
1a	Land										
	Buildings		_								
c	Leasehold improvements								_		
d	Equipment	-			9,437.		5.	847.		3,5	90.
	Other				4,203.		169,			4,7	
	. Add lines 1a through 1e (Column (d) must e	gual Form 990 Part	X column							8.3	

Schedule D (Form 990) 2013

	Investments - Other Securities.

Part VII Investments - Other Securities.			
Complete if the organization answered "Yes" t	o Form 990, Part IV, line 1	1b_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 en	d-of-year market value
(1) Financial derivatives		<del> </del>	
(2) Closely-held equity interests			
(3) Other		· ·	
(A) LIQUID ALTERNATIVES	552,374.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			<del> </del>
(D)			
(E)			
(F)			
(G)			
(H)			
Total (Col. (b) must equal Form 990, Part X, col (B) line 12 )	552,374.		<del></del>
Part VIII Investments - Program Related.	•		
Complete if the organization answered "Yes" to	o Form 990, Part IV, Ine 1	1c See Form 990, Part X, line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end	d-of-year market value
(1)			· · · · · · · · · · · · · · · · · · ·
(2)			· <del>-</del> · <u></u> -
(3)			·
(4)			
(5)			
(6)			
(7)			
(8)	-		
(9)			
Total (Col. (b) must equal Form 990, Part X, col (B) line 13 )			· <del>// / / / / / / / / / / / / / / / / / </del>
Part IX Other Assets.	· · · · · ·		
Complete if the organization answered "Yes" to	o Form 990, Part IV, line 1	1d See Form 990, Part X, line 15	
	escription		(b) Book value
(1)			
(2)			* =
(3)			
(4)			-
(5)			
(6)			
(7)	<del> </del>		
(8)			
(9)			· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)	•	
Part X Other Liabilities.			
Complete if the organization answered "Yes" to	o Form 990. Part IV. line 1	1e or 11f See Form 990. Part X. line 25	
1. (a) Description of liability		a) Book value	
(1) Federal income taxes	<del></del>		
(2)	<del></del>		
(3)	<del></del>	1	
(4)		<del></del>	
(5)			
(6)			
(7)			

(8) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 

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 X

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 FIGHT FOR CHILDREN, INC.	. 1101		<u> 1706059                                   </u>
Part XI Reconciliation of Revenue per Audited Financial Statem	•	Return	1.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			
1 Total revenue, gains, and other support per audited financial statements		1	6,267,
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		1	
a Net unrealized gains on investments	2a 163,831	.]	
b Donated services and use of facilities	2b 171,776		
c Recoveries of prior year grants	2c	7	
d Other (Describe in Part XIII )	2d 1,515,706		
e Add lines 2a through 2d		2e	1,851,
3 Subtract line 2e from line 1		3	4,416,
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1			1/110/
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII )	4b	1	
c Add lines 4a and 4b	40	ا ۵۵ ا	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		4c	4,416,
Part XII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses ne		
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	•	netu	
		TT	6,109,
1 Total expenses and losses per audited financial statements		1	6,109,
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1-1 171 776		
a Donated services and use of facilities	2a 171,776	<u>•</u>	
b Prior year adjustments	2b	4	
c Other losses	2c 1 515 706	4	
d Other (Describe in Part XIII )	2d 1,515,706.		4 65-
e Add lines 2a through 2d		2e	<u>1,687,</u>
3 Subtract line 2e from line 1		3	4,422,
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	4	
b Other (Describe in Part XIII)	4b	- I	
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	4,422,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional information		
		-	_
PART X, LINE 2:			
EXPLANATION: FOR THE YEARS ENDED DECEMBER 31	, 2013 AND 2012,	, FFC	CHAS
DOCUMENTED ITC CONCIDEDATION OF FACE ACC 740	10 INCOME HAVE	7.C 0	nii a m
DOCUMENTED ITS CONSIDERATION OF FASB ASC 740	-10, INCOME TAXE	<u> </u>	LIAI
PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY	IN INCOME TAXES	AND	HAS
			<u> </u>
DETERMINED THAT NO MATERIAL UNCERTAIN TAX PO	SITIONS QUALIFY	FOR	EITHER
RECOGNITION OR DISCLOSURE IN THE FINANCIAL S	TATEMENTS.		
•			
		_	
FEDERAL FORM 990, RETURN OF ORGANIZATION EXE	MPT FROM INCOME	TAX	, IS
CUDITION TO BUILDING TO BUILDING TOTAL	TIE (IDDI <i>II</i> CE CES-		
SUBJECT TO EXAMINATION BY THE INTERNAL REVEN	UE SERVICE, GENE	SKALI	JY FOR
מינים אמאחמ אפתפת די די די פדו פי			
THREE YEARS AFTER IT IS FILED.	<del></del>		
PART XI, LINE 2D - OTHER ADJUSTMENTS:			
332054 09-25-13 24		Sched	ule D (Form 99
	EOD CHIIDDEN T	NTC!	1 5 2 5
040923 745960 15374 2013.04030 FIGHT	FOR CHILDREN, I	NC.	1537

Part XIII   Supplemental Information (continued)	52-1706059 Page 5
•	<del></del>
SPECIAL EVENTS AND GAMING EXPENSES SHOWN AS EXPENSE ON	
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON THE FORM 990, PART VIII, LINE 8B.	
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS AND GAMING EXPENSES SHOWN AS EXPENSE ON	
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON THE FORM 990, PART VIII, LINE 8B.	
	<del></del> -
	-
	·

### SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

► 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/form 990.

OMB No 1545-0047

Open To Public Inspection

Name of the organization						Employer ide	ntification number
FIGHT F	OR CHILDREN, INC.					52-1706	059
Part I Fundraising Activities required to complete this part	- Complete if the organization answert	ered "Y	'es" to	Form 990, Part IV, I	ine 1	Form 990 EZ	filers are not
Indicate whether the organization rai	e Solicitat f Solicitat g Special  or oral agreement with any individual Part VII) or entity in connection with p iividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional t	overnment grants rnment grants events fficers, directors, true fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) fundr have c or con contrib	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total							
Total  3 List all states in which the organization or licensing	on is registered or licensed to solicit of	contrib	utions	or has been notified	d it is	exempt from re	gistration
					•		
LHA For Paperwork Reduction Act Noti	ice, see the Instructions for Form 9	990 or	990-E	Z. S	ched	ule G (Form 99	90 or 990-EZ) 2013

332081 09-12-13

Fundraising Events. Complete if the of fundraising event contributions and good fundraising event contributions and good fundraising event contributions and good fundraising event contributions.  Gross receipts  Gross income (line 1 minus line 2)	(a) Event #1  FIGHT NIGHT (event type)  3,933,243.  3,264,625.	(b) Event #2 (event type)		
Gross receipts  Less Contributions  Gross income (line 1 minus line 2)	(a) Event #1  FIGHT NIGHT (event type)  3,933,243.  3,264,625.	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through
Less Contributions  Gross income (line 1 minus line 2)	FIGHT NIGHT (event type)  3,933,243.  3,264,625.	(event type)	NONE	(add col (a) through
Less Contributions  Gross income (line 1 minus line 2)	(event type) 3,933,243. 3,264,625.			
Less Contributions  Gross income (line 1 minus line 2)	(event type) 3,933,243. 3,264,625.		(total number)	- coi (c))
Less Contributions  Gross income (line 1 minus line 2)	3,264,625.			
Less Contributions  Gross income (line 1 minus line 2)	3,264,625.			3,933,243
Gross income (line 1 minus line 2)				
				3,264,625
Cook prizes	668,618.			668,618
Cash prizes				
Noncash prizes				
Rent/facility costs	1			
Food and beverages	535,248.			535,248
Entortonment	252 212			252 212
				353,212 627,246
•				1,515,706
	• • •			-847,088
		990, Part IV, line 19, or r	eported more than	047,000
\$15,000 on Form 990-EZ, line 6a				
	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add col (a) through col (c
		Singo/progressive singe		cor (a) throught cor (c)
Gross revenue				
5,000,1000,100				-
Cash prizes				
Noncash prizes				
Rent/facility costs				
Other direct evenence				
Other direct expenses	Van 9/	V 0/		
Volunteer labor	No No	No No	No %	
Direct expense summary Add lines 2 throug	h 5 ın column (d)		•	
Net gaming income summary. Subtract line:	7 from line 1 column (d)		•	
,			<u>F</u>	<del>-</del>
ter the state(s) in which the organization opera	ates gaming activities			
the organization licensed to operate gaming a	ctivities in each of these s	states?		Yes No
No," explain				
ere any of the organization's gaming licenses r	evoked suspended or te	rminated during the tax v	rear?	Yes N
	· ·	• .		
	· · · · · · · · · · · · · · · · · · ·			
	Food and beverages  Entertainment Other direct expenses Direct expense summary Add lines 4 throug Net income summary Subtract line 10 from III Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a  Gross revenue  Cash prizes Noncash prizes Rent/facility costs Other direct expenses  Volunteer labor Direct expense summary Add lines 2 throug Net gaming income summary Subtract line interest the state(s) in which the organization operate organization licensed to operate gaming and tho," explain	Food and beverages  Entertainment Other direct expenses Direct expense summary Add lines 4 through 9 in column (d)  Net income summary Subtract line 10 from line 3, column (d)  III Gaming. Complete if the organization answered "Yes" to Form \$15,000 on Form 990-EZ, line 6a  Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary Add lines 2 through 5 in column (d)  Net gaming income summary Subtract line 7 from line 1, column (d)  ter the state(s) in which the organization operates gaming activities in each of these store, "explain  ere any of the organization's gaming licenses revoked, suspended or ter expense "explain"	Food and beverages  Food and beverages  Entertainment  Other direct expenses  Direct expense summary Add lines 4 through 9 in column (d)  Net income summary. Subtract line 10 from line 3, column (d)  III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or in \$15,000 on Form 990-EZ, line 6a  (a) Bingo  (b) Pull tabs/instant bingo/progressive bingo  Gross revenue  Cash prizes  Noncash prizes  Rent/facility costs  Other direct expenses  Volunteer labor  Direct expense summary. Add lines 2 through 5 in column (d)  Net gaming income summary. Subtract line 7 from line 1, column (d)  ter the state(s) in which the organization operates gaming activities in each of these states?  No," explain  ere any of the organization's gaming licenses revoked, suspended or terminated during the tax y Yes," explain	Food and beverages  Food and beverages  Entertainment  Other direct expenses  Direct expense summary Add lines 4 through 9 in column (d)  Net income summary Subtract line 10 from line 3, column (d)  I 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  Gross revenue  Cash prizes  Noncash prizes  Noncash prizes  Noncash prizes  Volunteer labor  Direct expenses summary Add lines 2 through 5 in column (d)  Net gaming income summary Subtract line 7 from line 1, column (d)  Net gaming income summary Subtract line 7 from line 1, column (d)  Let the state(s) in which the organization operates gaming activities the organization licensed to operate gaming activities in each of these states?  No, ' explain  Pres any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes, " explain

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2013 FIGHT FOR CHILDREN, INC. 52	<u>-170</u>	<u> 605</u> 9	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No.
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in			
	The organization's facility	13a	.	%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records			<del></del>
•	Enter the hand and address of the person the propagation of gaming openial 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 ▶\$			
С	If "Yes," enter name and address of the third party			
	Name ►			
	Address ►			
16	Garning manager information			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
_	retain the state gaming license?		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 > \$			
Pa	T IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part I	II, lines 9	, 9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)			_
	•			
_				

SCHEDULEI (Form 990) Department of the Treasury Internal Revenue Service

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

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.

OMB No 1545-9047 2013

Open to Public Inspection 2 \_

Employer identification number 52-1706059 X Yes 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 FIGHT FOR CHILDREN Part I General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization

	orm 990. Part IV. line 21, for any		taga to especial (h) Purasse of again
	d "Yes" to Fo		(c)
	anization answered		(f) Method of
d States	omplete if the orga	[ed	(e) Amount of
funds in the United	e United States.	ional space is neec	(d) Amount of (e) Amount of
toring the use of grant	d Organizations in the	be duplicated if addit	(c) IRC section
cedures for monit	Governments and	55,000 Part II can	(b) EIN
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990. Part IV. line 21, for any	recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	1 (a) Name and address of organization
2 Des	Part II		1 (a) N

corporate intercontrol and in the car be adolinated in additional space in Heeded	מיים	ו מס מטוונים וו מסחונים	Idial space is lieed	na en			
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA BOXING CLUB							
1726 M STREET, NW							STRUCTURED AFTER-SCHOOL
WASHINGTON, DC 20036	54-1611597	501(c)(3)	60,000.	0			PROGRAM FOR KIDS
							SUPPORT THEIR WORK TO
APPLETREE INSTITUTE FOR EDUCATION							REFINE, MODIFY AND
415 MICHIGAN AVENUE, NW, 3RD FLOOR							DOCUMENT ITS EVERY CHILD
WASHINGTON, DC 20017	04-3331760	501(C)(3)	100,000.	0			READY MODEL
			_				SUPPORTS THE LATROBE PARK
CAL RIPKIN, SR. FOUNDATION							LOWER FIELD AND WESTERN
1427 CLARKVIEW ROAD, SUITE 100				•			HIGH SCHOOL AND BALTIMORE
BALTIMORE, MD 21209	52-2310500	501(C)(3)	850,000,	0			DESIGN SCHOOL GYM/WEIGHT
							SUPPORTS THEIR TRAINING
CENTRONIA							OF EARLY CHILDHOOD CENTER
1420 COLUMBIA ROAD, NW							DIRECTORS AND STAFF IN DC
WASHINGTON, DC 20009	25-1689720	501(c)(3)	120,000.	0			CENTERS
CHILDREN'S HOSPITAL FOUNDATION	•					<b>V</b>	SUPPORT THE GROWTH OF
111 MICHIGAN AVENUE, NW						•	THEIR IMPACT DC ASTHMA
WASHINGTON, DC 20016	52-1640402	501(C)(3)	100,000,	0.			CARE PROGRAM IN DC
TOORD Gemeral of feller tributite or							
DO DIEINGONE FOREIC CHANIEN SCHOOL		_					
1420 COLUMBIA ROAD, NW							QUALITY SCHOOLS
WASHINGTON DC 20009	11-6207481	501(C)(3)	100,000,	0			INITIATIVE AWARD WINNER
2 Enter total number of section 501(c)(3) and government organizations	and government or		isted in the line 1 table				▶ 15.
3 Enter total number of other organizations listed in the line 1 table	s listed in the line	1 table					•

SEE PART IV FOR COLUMN (H) DESCRIPTIONS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

332101 10-29-13

Schedule I (Form 990) (2013)

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52-1706059 Page 1	(=	
Schedule I (Form 990) FIGHT FOR CHILDREN, INC.	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Par	

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   (Form 990), Part II)	Assistance to Go	vernments and Organ	nizations in the Ur	ilted States (Scrie	dule I (rorm 990), rai	τ    )	
(a) Name and address of organization or government	(b) EIN	(c) IRC sectron 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
DC SPECIAL ED COOP 1488 NEWTON STREET, NW, #2							SUPPORTS THE REFINEMENT AND IMPLEMENTATION OF INCLUDE DC WHICH PROVIDES
. 0	52-2260620	501(C)(3)	113,000,	0			PARTICIPANTS WITH A
							TO FUND THE DEVELOPMENT
GEORGETOWN UNIVERSITY P.O. BOX 571485							OF A VERSION OF AN EARLY CHILDHOOD MENTAL HEALTH
WASHINGTON, DC 20057	53-0196603	501(C)(3)	98,196,	0			CONSULTATION MODEL THAT
T. TARA T.							SUPPORTS THE LIVE "IT"
735 8TH STREET, SE, SUITE 300							LEARN IT PROGRAM AND THE POTENTIAL EXPANSION
WASHINGTON, DC 20003	35-2247059	501(C)(3,	100,000.	0			OF THIS PROGRAM
MARY'S CENTER							PROVIDES SUPPORT FOR
2333 ONTARIO ROAD, NW	6		,				THEIR HOME VISITING
WASHINGTON DC 20009	52-1594116	501(C)(3)	100,000.	0			PROGRAM
MILTICHTUMEN CAREER INTERN							COLUMBIA HEIGHTS
PROGRAM INC 3101 16TH STREET							EDUCATION CAMPUS QUALITY
N	52-1263933	501(C)(3)	100,000.	0			WINNER
NEWSCHOOLS FUND							1001100
WASHINGTON, DC 20009	94-3281780	501(C)(3)	150,000.	0			IO FUND INE MI SCHOOL DO PROJECT
800 MYMAN BABY DETITE CITTUE 010							TO SUPPORT THEIR
	52-1349346	501(C)(3)	150,000	0			INNER-CITY YOUTH SPORTS PROGRAMMING IN 2014
REACH, INCORPORATED				•			5
218 D STREET, SE	0,1000		, c				THEIR AFTER-SCHOOL
WASHINGTON, DC ZOOUS	20-4022113	501(C)(3)	92,000	0			PROGRAM
THE FAMILY PLACE							SUPPORTS THEIR FAMILY
3309 16TH STREET, NW							LITERACY AND ENGAGEMENT
WASHINGTON, DC 20010	52-1190146	501(c)(3)	20,000	0.			PROGRAM
							Schedule I (Form 990)
332241							

Schedule I (Form 990) (2013)

Part III | Grants and Other

Page 2

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(Form 990) (2013) FIGHT FOR CHILDREN, INC.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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
	•				
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	ured in Part I, line	e 2, Part III, column	(b), and any other a	dditional information	
PART I, LINE 2:					
EXPLANATION: FIGHT FOR CHILDREN KEEPS		RDS OF THE	RECORDS OF THE AMOUNTS GIVEN TO	IVEN TO	
ORGANIZATIONS. FIGHT FOR CHILDREN ONLY GIVES GRANTS TO ORGANIZATIONS THAT	ONLY GIVE	ES GRANTS	TO ORGANIZ	ATIONS THAT	
MEET ITS OVERALL PURPOSE OF HELPING KIDS IN NEED.	G KIDS IN		GHT FOR CH	FIGHT FOR CHILDREN ALSO	
REQUESTS AND RECEIVES ANNUAL REPORTS		THE GRANTE	ES AND INT	FROM THE GRANTEES AND INTERIM REPORTS,	
IF APPLICABLE.					

COLUMN (H): LINE 1, PART II,

FOUNDATION SR. NAME OF ORGANIZATION OR GOVERNMENT: CAL RIPKIN,

332102 10-29-13

### 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. ➤ See separate instructions.

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

2013

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

FIGHT FOR CHILDREN, INC.

Employer identification number

52-1706059

P	art i Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		ľ	
	First-class or charter travel Housing allowance or residence for personal us	se e		
	Travel for companions Payments for business use of personal residen	ce		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1.5		<del> </del>
_	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
		<u></u>	<del>                                     </del>	<del></del>
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	<b>I</b>		
	establish compensation of the CEO/Executive Director, but explain in Part III	j		
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation commit	ittee	1	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b		4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			1
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		į į	1
	contingent on the revenues of			1
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			<b>_</b>
	ınıtıal contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule J (Forr	n 990)	2013

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Page 2

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

FIGHT FOR CHILDREN, INC.

Schedule J (Form 990) 2013

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base compensation	(II) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(O)·(I)(B)	reported as deferred In prior Form 990
(1) MICHELA ENGLISH	Ξ	214,583.	40,000.	0.	0	1,865.	256,448.	0
PRESIDENT & CEO	Ξ	0	0.	0	0.	1	0	0
	Ξ	161,174.	23,500.	0	5,000.	5,899.	195,573.	0
DIRECTOR OF PROGRAMMATIC INITIATIVES (II)	3	0.	0	0	0	0		0
	Ξ							
	(II)							
	(1)							
	Ξ							
	(ı)							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
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332112 09-13-13

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

### SCHEDULE'O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

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.

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

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

FIGHT FOR CHILDREN, INC.

Employer identification number 52-1706059

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: PARENTS: FFC WORKS TO GIVE PARENTS USEFUL INFORMATION SO THEY CAN MAKE GOOD CHOICES ON WHERE TO SEND THEIR CHILDREN TO PRESCHOOL AND BE ACTIVELY INVOLVED IN THEIR CHILDREN'S EDUCATION.

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY SENIOR MANAGEMENT. A COPY OF THE FORM 990 WAS MADE AVAILABLE TO THE BOARD. THE BOARD REVIEWED THE FORM 990 AND, WHEN BOARD MEMBERS WERE SATISFIED, THE FORM 990 WAS APPROVED BY THE BOARD AND FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION: EACH DIRECTOR, PRINCIPAL OFFICER AND MEMBER OF A COMMITTEE WITH BOARD-DELEGATED POWERS ANNUALLY SIGNS THE CONFLICT OF INTEREST POLICY. AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE/SHE LEAVES THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS DECIDE IF A CONFLICT OF INTEREST EXISTS.

IF A CONFLICT OF INTEREST EXISTS, THE FOLLOWING PROCEDURES ARE FOLLOWED: AN INTERESTED PERSON MAKES A PRESENTATION AT THE BOARD OR COMMITTEE MEETING, BUT AFTER SUCH PRESENTATION, LEAVES THE MEETING DURING THE DISCUSSION OF AND THE VOTE ON THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST.

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

Schedule O (Form 990 or 990-EZ) (2013)

Page 2 Name of the organization Employer identification number FIGHT FOR CHILDREN, INC. 52-1706059 THE CHAIRPERSON OF THE BOARD OR COMMITTEE, IF APPROPRIATE, APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT. C. AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES WHETHER THE ORGANIZATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. D. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST, THE BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS: WHETHER THE TRANSACTION OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST AND FOR ITS OWN BENEFIT; WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO THE ORGANIZATION; AND MAKES ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION. E. IN ALL EVENTS, THE ORGANIZATION ATTEMPTS TO COMPLY WITH THE REQUIREMENTS FOR INVOKING THE REBUTTABLE PRESUMPTION UNDER SECTION 53.4958-6 OF THE TREASURY REGULATIONS, WHICH DEALS WITH EXCESS COMPENSATION FOR RELATED INDIVIDUALS. FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: THE ORGANIZATION IS CURRENTLY CREATING APPROPRIATE PROCESSES FOR DETERMINING THE COMPENSATION FOR THE CEO. IN 2013, THE CHAIRMAN OF THE BOARD APPROVED THE BONUS AND COMPENSATION OF THE ORGANIZATION'S CEO. THE COMPENSATION PROCESS IS DOCUMENTED. THE LAST COMPENSATION REVIEW WAS

Schedule O (Form 990 or 990-EZ) (2013)

PROGRAM SERVICE EXPENSES	44,217.
MANAGEMENT AND GENERAL EXPENSES	3,154.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	47,371.

### EVALUATION SERVICES:

PROGRAM SERVICE EXPENSES

MANAGEMENT AND GENERAL EXPENSES	4,940.
FUNDRAISING EXPENSES	0.

TOTAL EXPENSES 74,183.

\_\_\_ 69,243.

Schedule O (Form 990 or 990-EZ) (2013)  Name of the organization  FIGHT FOR CHILDREN, INC.	Employer identification number 52-1706059
	1 52-1706059
PARTNERSHIP & RESIDENT SERVICES:	
PROGRAM SERVICE EXPENSES	406,966
MANAGEMENT AND GENERAL EXPENSES	29,034
FUNDRAISING EXPENSES	0
TOTAL EXPENSES	436,000
PROGRAM MANAGERS:	
PROGRAM SERVICE EXPENSES	19,204
MANAGEMENT AND GENERAL EXPENSES	1,370
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	20,574
EMPLOYEE RECRUITMENT:	
PROGRAM SERVICE EXPENSES	16,801
MANAGEMENT AND GENERAL EXPENSES	1,199
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	18,000
CONTRACT LABOR:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	24,267
FUNDRAISING EXPENSES	0 .
TOTAL EXPENSES	24,267
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	662,645

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

FIGHT FOR CHILDREN, INC.

Related Organizations and Unrelated Partnerships

►Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

▶ See separate instructions.

2013

Open to Public Inspection

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

Employer identification number 52-1706059

(g) Section 512(b)(13) controlled Š entity? Direct controlling Yes × entity 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 Direct controlling entity FIGHT FOR CHILDREN End-of-year assets Public charity status (if section (e) 501(c)(3)) LINE 7 Total income Exempt Code section ਉ DISTRICT OF COLUMBIA 501(C)(3) ਉ Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) PROMOTE CHARACTER GROWTH, SELF-RESPECT & ACADEMIC ACHIEVEMENT IN CHIDREN Primary activity Primary activity Name, address, and EIN (if applicable) ALEXANDRIA BOXING CLUB - 54-1611597 Name, address, and EIN of related organization of disregarded entity WASHINGTON, DC 20036 1726 M STREET, NW Part II Part

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

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Schedule R (Form 990) 2013

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Schedule R (Form 990) 2013 FIGHT FOR CHILDREN, INC.

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 Part III

General or Percentage managing ownership Schedule R (Form 990) 2013 Yes No (I) Section 512(b)(13) controlled entity? 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 3 Percentage ownership Yes Ξ Code V-UBI amount in box 720 of Schedule -K-1 (Form 1065) Share of end-of year assets (g Disproportionate Yes No allocations? Ξ Share of total Share of end-of-year assets Type of entity (C corp, S corp, or trust) **e** Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) 41 <u>0</u> (d) (d) Direct controlling entity Primary activity <u>a</u> Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization 332162 09-12-13 Part IV

# 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?	ns with one or more i	elated organizations listec	ın Parts II:IV?	•
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				ta X
<ul> <li>b Gift, grant, or capital contribution to related organization(s)</li> </ul>				1b X
c Gift, grant, or capital contribution from related organization(s)				tc X
d Loans or loan guarantees to or for related organization(s)				
e Loans or loan guarantees by related organization(s)				
f Dividends from related organization(s)				#     X
g Sale of assets to related organization(s)				
h Purchase of assets from related organization(s)				1+ X
<ul> <li>Exchange of assets with related organization(s)</li> </ul>				
J Lease of facilities, equipment, or other assets to related organization(s)				
k Lease of facilities, equipment, or other assets from related organization(s)				¥
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			×
m Performance of services or membership or fundraising solicitations by related organization(s)	anızatıon(s)			<del> </del>
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			
o Sharing of paid employees with related organization(s)				ot X
				d X
<ul> <li>Reimbursement paid by related organization(s) for expenses</li> </ul>				1q X
r Other transfer of cash or property to related organization(s)				
				- \ \ \ \ \
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	who must complete t	his line, including covered	relationships and transaction thresholds	
<b>(a)</b> Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved
(1) ALEXANDRIA BOXING CLUB	Д	.000,09	60,000.GENERAL LEDGER	
(2) ALEXANDRIA BOXING CLUB	Ц	0	SERVICES AS NEEDED	
(3)				
(4)				
(5)				
(9)				
332163 09-12-13	42		Schedul	Schedule R (Form 990) 2013

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

(k) centage nership					
ow o	<u></u>				
(J) General or managing partner? Yes No				 _	
25-10 -10 -10 -10	<del></del>				
(h)         (i)         (j)         (k)           Dispropor- tionale allocations?         Code V-UBI amangung         General or managung         Percentage           allocations?         of Schedule K-21 partner?         partner?         ownership           Yes         No         (Form 1065)         Yes No					
e am		 			
(h) Disproportionate allocations?					
(g) Share of end-of year assets					
(f) Share of total income					
(e) Are all Are all partners sec 501c)(3) 01gs 2  4) Yes No					
(d)  Predominant income parties sec (related, unrelated, 50/160/3) excluded from tax under section 512-514) yes No					
(c) Legal clomicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 FIGHT FOR CHILDREN, INC.	52-1706059 Page 5
Schedule R (Form 990) 2013 FIGHT FOR CHILDREN, INC.  Part VII Supplemental Information	
Provide additional information for responses to questions on Schedule R (see instructions)	
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