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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.

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

Open to Public Inspection

<u> A I</u>	For th	e 2014 calendar year, or tax year beginning and ending					
	Check if applicab	C Name of organization	D Employ	/er identifica	tion number		
	Addre						
L	Name chang	Doing business as		52-17	06059		
	lnıtıal return	Number and street (or P.O. box if mail is not delivered to street address) Room/s	te E Telepho	one number			
	Final	1726 M STREET, NW 202			72-0417		
	termir	City or town, state or province, country, and ZIP or foreign postal code	G Gross rec		6,664,688.		
	Amen			a group retu	·		
	Applic			s a group retu ibordinates?	Yes X No		
_	pendi						
	 Γαν-αν	empt status		subordinates inclu			
		te: > WWW.FIGHTFORCHILDREN.ORG			t (see instructions)		
				exemption r			
	art I	Summary	ar of formation	1990 M S	State of legal domicile: DC		
	т '						
ဗ္	1	Briefly describe the organization's mission or most significant activities SEE PART	<u> </u>	.NE 1			
Governance							
err		Check this box 🕨 🔛 if the organization discontinued its operations or disposed of i	ore than 25% o	of its net asse			
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	15		
	1	Number of independent voting members of the governing body (Part VI, line 1b)		4	14		
Activities &	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	11		
Ξ	6	Total number of volunteers (estimate if necessary)		6	90		
ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.		
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.		
			Prior Ye	ear	Current Year		
a	8	Contributions and grants (Part VIII, line 1h)		,033.	5,196,010.		
z Revenue	9	Program service revenue (Part VIII, line 2g)		,000.	122,000.		
eee	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		,639.	99,461.		
2 00		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,088.	-1,363,429.		
2	i .	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		,584.	4,054,042.		
·—		and the second s		,196.	2,546,196.		
· •	1	Grants and similar amounts paid (Part IX, column (A), lines 1:3) Benefits paid to or for members (Part IX, column (A), line (1))		0.	0.		
		Salaring other componentian employee honofite (Part IX)	1 140	,704.	1,192,012.		
Sec	l .	Salaries, other compensation, employee benefits (Part IX column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line (14)) NOV 1 8 2015	1,140	0.			
Expenses		Professional fundraising fees (Part IX, column (A), line 119) Total fundraising expenses (Part IX, column (D), line 25)			0.		
X	!		0.01	156	1 170 005		
	ŧ	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		,156.	1,172,887.		
		Total expenses Add lines 13 17 (must equal Part IX, column (A), line 25)		,056.	4,911,095.		
<u>_ s</u>	19	Revenue less expenses Subtract line 18 from line 12		,472.	-857,053.		
Net Assets or Fund Balances		T (D V.)	Beginning of Cu		End of Year		
SSE	20	Total assets (Part X, line 16)	9,040		8,353,923.		
et	21	Total liabilities (Part X, line 26)	2,506		2,661,678.		
7	22	Net assets or fund balances Subtract line 21 from line 20	6,534	,613.	<u>5,692,245.</u>		
	art II	Signature Block					
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta			nowledge and belief, it is		
true,	correc	t, and complete. Declaration of preparer (other thangofficer) is based on all information of which prep	er has any know	/ledge			
		I huly organ		1////:	<u> </u>		
Sıgı	1	Signature of officer	Dat	e / / '			
Her	е	MICHELA ENGLISH, PRESIDENT/CEO					
		Type or print name and title		_			
		Print/Type preparer's name Preparer's signature	Date	Check	PTIN		
Paid		DAVID F GRALING CPA VANN F Brok CPA	//-//-/5	self employed	P 00366995		
Prep	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN			52-1392008	0	
Use Only Firm's address 4550 MONTGOMERY AVE SUITE 650N							
	-	BETHESDA, MD 20814-2930	Phr	one no (301	l) 951-9090 💙	_	
Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)	11110	2.10 10 (2 0 2	X Yes No		
	01 11-0			_	Form 990 (2014)		
					101111 000 (2014))	
					' V'		

<u>Form</u>	990 (2014) FIGHT FOR CHILDREN, INC. 52-1706059 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission FIGHT FOR CHILDREN FIGHTS TO ENSURE THAT LOW-INCOME CHILDREN IN WARRENDER OF THE PROPERTY OF THE
	WASHINGTON, DC RECEIVE A GREAT EDUCATION AND STAY HEALTHY SO THEY CAN LEARN.
	Did the organization undertake any significant program services during the year which were not listed on
2	the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses 1,190,019. including grants of \$) (Revenue \$ 122,000.) STRONG EARLY CHILDHOOD EDUCATION: FFC OPERATES JOE'S CHAMPS, A MULTI-YEAR PROGRAM DESIGNED TO ENSURE THAT DC'S PRESCHOOL AND
	PREKINDERGARTEN CLASSROOMS ARE PROVIDING STUDENTS WITH THE HIGHEST
	QUALITY EARLY CHILDHOOD FOUNDATION AND THE TOOLS NECESSARY TO SUCCEED
	IN KINDERGARTEN AND BEYOND. THE PROGRAM FOCUSES ON DEVELOPING EFFECTIVE
	SCHOOL PRINCIPALS TO BETTER SUPPORT AND MANAGE THEIR EARLY CHILDHOOD
	TEACHERS, RESULTING IN HIGHER ACADEMIC AND SOCIO-EMOTIONAL OUTCOMES FOR
	THREE- AND FOUR-YEAR OLDS.
4b	(Code)(Expenses \$ 2,546,196. Including grants of \$ 2,546,196.) (Revenue \$) STRATEGIC GRANTS: TO MAGNIFY OUR IMPACT BEYOND OUR OWN PROGRAMS, FFC WORKS COLLABORATIVELY WITH SELECTED HIGH-PERFORMING, LOCAL NONPROFITS THAT SHARE OUR MISSION. IN 2014, FFC AWARDED \$2,546,196 TO 10
	ORGANIZATIONS IN DC AND BALTIMORE.
	ORGANIZATIONS IN DC AND BALITMORE.
4c	(Code) (Expenses \$329,160 . including grants of \$) (Revenue \$)
	QUALITY K-12 SCHOOLS: FFC'S QUALITY SCHOOLS INITIATIVE PROGRAM INCLUDES
	TWO STRANDS: 1) BI-ANNUAL CONFERENCES PROVIDING DC SCHOOL LEADERS WITH
	OPPORTUNITIES TO LEARN FROM ONE ANOTHER AND FROM EDUCATION EXPERTS. 2)
	TARGETED RESOURCES AWARDED TO TWO SCHOOLS EACH YEAR THAT HAVE DEMONSTRATED SUCCESS AND HAVE SPECIFIC PLANS FOR FURTHERING THEIR
	STUDENTS'ACADEMIC ACHIEVEMENT.
	DIODENIO ACADENIC ACHIEVEMENT.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► 4,065,375.
43200	Form 990 (2014)
11-07-	

Form 990 (2014) FIGHT FOR CHILDREN, INC.

Part IV Checklist of Required Schedules

				r
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	No
•	If "Yes," complete Schedule A	1	х	
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			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	,	Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 109 If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more 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		_ <u>X</u> _
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		·-	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI and XII	40-	v	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	X	
U	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	10h		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
_	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	- 1	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	_17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2014)

Form 990 (2014) FIGHT FOR CHILDREN, INC.

Part IV Checklist of Required Schedules (continued)

	The state of the s		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		.	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u>X</u> _	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	00		v
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	_23_	_X_	
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
	Schedule K If "No", go to line 25a	24a		X
_	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
С	, , , , , , , , , , , , , , , , , , , ,			
	any tax-exempt bonds? Did the exemptation set as an "an hebalf of" requer for hands outstanding at any time during the year?	24c		
	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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		v
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		_X_
D	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	OEL		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		- 41
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	-		
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	х
b		28b		X
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			_
	Schedule N, Part II	32		_X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity]	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		_X_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37_		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (2014)

Part V Statem	nents Regarding Other IRS I	Filings and Tax Compliance
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Yes No No Press Press No Press No Press Press No Press Pres		Check if Schedule 0 contains a response or note to any line in this Part V			
b Enter the number of Forms W.26 included in line 1a. Enter, 0-if not applicable				Yes	No
country (summing to purs with seakup withholding rules for reportable payments to vendors and reportable gaming (gambling) withmings to purs with services of the results of the services of the results of the services of th	1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 43			
gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. 3 Idea of the calendar year ending with or within the year covered by this return. 3 Idea of the calendar year ending with or within the year covered by this return. 3 Idea of the same of the calendar year and or within the year covered by this return. 3 Idea of the same of the same of the organization file all required federal employment tax returns? 3 Note. If the sam of lines 1 and 2 as a greater than 250, you may be required to endle (see instructions). 3 Idea of the organization have unrelated business gross income of \$1,000 or more during the year? 3 If year, and the same of the foreign country (such as a bank account, sourced an explanation in Schedule O. 4 If year, and the same of the foreign country (such as a bank account, securities account, or other rinancial accountry (such as a bank account, securities account, or other rinancial accountry (such as a bank account securities account, or other rinancial accountry (such as a bank account, securities account, or other rinancial accountry (such as a bank account, securities account, or other rinancial Accounts (FBAR). 5 If year, and the organization that it was or is a prity to a prohibitorial stay self is a prity of a prohibitorial stay self is a prity of a prohibitorial stay self is a prity of a prohibitorial stay of a prohibitorial stay with a self in the se	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendary year ending with or within the year covered by this return. b If at loast one is reported on line 2a, did the organization file all required federal employment tax returns? 3a Dut the organization have unrelated business gross income of \$1,000 or more during the calendary and an explanation of the wall of the organization have during the calendary rear, did the organization have an explanation or their authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a At any time during the calendary rear, 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)? 5b If *Yes,* Test the financial for finCEN Form 114, Roport of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization and that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* To line 5 or 55b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If *Yes,* To line 5 or 55b, did the organization that it was or is a party to a prohibited that when the organization solicit any contributions that were not tax deductible as chariable contributions? 5c If *Yes,* To line 5 or 55b, did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chariable contributions are pure to the organization has been accessed as a committed to the party of the organization has been yeceved eductible contributions or of the value of the goods as services provided? 5c Organization that may receive deductible as chariable contributions or off the value of the meaning that the organization receive a pyriment meaning the provided to the party of the organization for th	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
tiled for the calendar year ending with or within the year covered by this return 1		(gambling) winnings to prize winners?	1c	Х	
b If a least one is reported on line 2a, did the organization file all required deferal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to effe (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5b If "Yes," has it field a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedulo O 4 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 foreign country (such as a bank account, securities account, or other financial account; FBAR) 5b If "Yes," the first he name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5b If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5b Was the organization of the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5c Was the organization of the organization that it was a responsible to the foreign Bank and Financial Accounts (FBAR) 5c Was the organization of the organization that it was or is a party to a prohibited that sheller transaction? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited that sheller transaction? 6c If "Yes," indicate the organization micked with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Obst the organization necked eductible contributions under section 170(c). 6c If "Yes," indicate the number of Foreign S827 finand party is a contribution and party for goods and services provided to the payor? 7c X 7c X 7d X 7d If "Yes," indicate the number of Foreign S828 filed during the year 9c Did the organization and services of the value of the goods or services provided? 9c Did the some services of the service of the value of the goods or services provide	2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
Note. If the sum of fines 1s and 2 as greater than 250, you may be required to e file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return 2a 11			
3a De the organization have unrelated business gross income of \$1,000 or more during the year? 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 accounts (FBAR) 5 If "Yes," refer the name of the foreign country ≥ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization party to a prohibited tax shelter transaction? 5 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization stat may receive deductible contributions under section 170(c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 If "Yes," did the organization state any receive deductible contributions under section 170(c). 9 If "Yes," did the organization state any receive deductible contributions under section 170(c). 9 If "Yes," did the organization state any receive deductible contributions under section 170(c). 10 If "Yes," did the organization state any receive deductible contributions under section 170(c). 2 If "Yes," did the organization state any receive deductible contributions under section 170(c). 3 If "Yes," did the organization state any receive deductible contributions under section 170(c). 4 If "Yes," include on plant type organization section 170(c). 5 Sponsoring organization received a contribution of qualifi	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
b if "Yes," has at field a Form 990 T for this year? If "No," to fine 3b, provide an explanation in Schedule O 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)? 5 if "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions filing		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the N/A sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? b Gross receipts, included on Form 990, Part VIII, line 12 corserved from members or shareholders b Gross income from members or shareholders n Did b Gross income from members or shareholders l Gross income from members or shareholders l Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b 13b Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X 14b If "Yes," has it	d	,			
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Form 990 (2014) FIGHT FOR CHILDREN, 52-1706059 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 Section A. Governing Body and Management No Yes 15 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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. b Enter the number of voting members included in line 1a, above, who are independent 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 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? X 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11a 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 c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Did the organization have a written whistleblower policy? Х 13 13 Х 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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? X 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website LX Upon request Other (explain in Schedule O) 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 20 JUDY WRENCH - 202-772-0417

1726 M STREET, NW, NO.

202, WASHINGTON.

432006 11-07-14

DC

20036

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization r (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average	Position (do not check more than one					000	Reportable	Reportable	Estimated
	hours per box, unless person i		on is both an		compensation	compensation	amount of			
	week		cer ar	na a a	recto	or/trus	itee)	from	from related	other
	(list any hours for	recto				_		the	organizations	compensation
	related	0 10 9	ee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	Individual trustee or director	Institutional trustee		yee	mper		(** 27 1000 101100)		and related
	below	lenpi	utton	5	Key employee	est co	5			organizations
	line)	Indi	Instri	Officer	Key	Highest compensated employee	Former			_
(1) MICHELA ENGLISH	40.00									
PRESIDENT & CEO/SECRETARY		Х		X				261,162.	0.	5,146
(2) RAUL FERNANDEZ	1.00									
CHAIRMAN		X		X				0.	0.	0
(3) FREDRICK SCHAUFELD	1.00									
VICE CHAIR		X		X				0.	0.	0
(4) ANTHONY WILLIAMS	1.00									
TREASURER		X		X				0.	0.	0
(5) JAMES ABDO	1.00								-	
BOARD MEMBER		X						0.	0.	0
(6) GINA ADAMS	1.00									_
BOARD MEMBER		X	_	_				0.	0.	0
(7) NEIL COHEN	1.00									
BOARD MEMBER		X						0.	0.	0
(8) G. DAVID FENSTERHEIM	1.00					l				
BOARD MEMBER		X						0.	0.	0
(9) ADRIAN M. FENTY	1.00						İ			
BOARD MEMBER		X						0.	0.	0
(10) MICHELE HAGANS	1.00									
BOARD MEMBER		X						0.	0.	0
(11) MIKE HARRELD	1.00									
BOARD MEMBER		X					ļ	0.	0.	0
(12) CHARLES KUHN	1.00		ŀ							
BOARD MEMBER		X						0.	0.	0
(13) ANTHONY LEWIS	1.00									
BOARD MEMBER		X						0.	0.	
(14) KURT NEWMAN	1.00									
BOARD MEMBER		X						0.	0.	0
(15) JOSEPH E. ROBERT, III	1.00									
BOARD MEMBER	ļ	X		L				0.	0.	0
(16) JOHN MCKOY	40.00									
DIR., PROG. INITIATIVES (END 12/14)					X	<u> </u>	L	178,496.	0.	10,331
(17) JEFFREY TRAVERS	40.00									
DIRECTOR OF EXTERNAL RELATIONS	<u> </u>			Ш		X		138,788.	0.	15,632.
32007 11-07-14										Form 990 (2014

Га	Tt VII Section A. Officers, Directors, Tru		ploy	ees/	<u>, an</u>	d Hi	ghe	st (
	(A) Name and title	(B) Average hours per week	I (do not check more than one					h an	compensation	(E) Reportable compensation			(F) stimate nount	of
		(list any hours for related organizations below line)	itee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Ė	the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS	- 1	fı org an	other opensation the panization d relate anization	ation ne tion ted
												-		
			-											
					-									
	Sub-total Total from continuation sheets to Part V	/II Section A	L	l	l	<u> </u>		>	578,446.		0.	3	1,1	09.
	Total (add lines 1b and 1c)							_	578,446.		0.	3	1,1	
	Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	ed al	oove	e) wr	o r	received more than \$100	,000 of reportable		. ,		3
3	Did the organization list any former officer			e, ke	y en	nplo	yee,	or	highest compensated ei	mployee on	ſ		Yes	No
4	line 1a? If "Yes," complete Schedule J for a For any individual listed on line 1a, is the s			ompe	ensa	ation	anc	l ot	her compensation from	the organization	-	3_	_	X
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									dual for convoce	-	4	Х	<u></u>
	rendered to the organization? If "Yes," con							-iai		dual for services		_5		х
Sec 1	tion B. Independent Contractors Complete this table for your five highest co	mnensated inc	tene	ende	nt c	ontr	acto	rs t	that received more than	\$100,000 of comm		ation f	rom	
	the organization Report compensation for											10111		
	(A) Name and business	s address							(B) Description of s	ervices	C	(C) nsatio	ın
WO	RLD BOXING COUNCIL								EVENT MANAGE				- Carlo	-
<u>95</u>	01 S.W. 65 STREET, MIA	MI, FL	331	L73	3			,	SERVICES			27	1,0	00.
		-						-						<u> </u>
								\dashv						
													<u> </u>	
	Total number of independent contractors (including but n	ot lır	nited	d to	thos	se lis	tec	d above) who received m	ore than			· <u>-</u>	-
	\$100,000 of compensation from the organ	=				1	<u> </u>							
43200	В										ŀ	Form !	990 (2014)

		Check if Schedule O con	tains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ıts	1 a	Federated campaigns	1a					
ar our	b	Membership dues	1b					
S, G	С	Fundraising events	1c	4,223,718.		[
ar a	d	Related organizations	1d					
IS, E	е	Government grants (contribut	tions) 1e	535,250,				
r S	f	All other contributions, gifts, gran	nts, and					
a g		similar amounts not included abo	ove 1f	437,042.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	s 1a-1f \$			ĺ		
<u>8 8</u>	h	Total. Add lines 1a 1f		•	5,196,010.			
				Business Code				
<u>8</u>	2 a	SCHOOL PARTICIPATION F	EES	900099	122,000.	122,000.		
e c	b							
n S	С							
F a	d							
Program Service Revenue	е							
-		All other program service reve	enue	L	···		· · · · · · · · · · · · · · · · · · ·	
		Total. Add lines 2a-2f			122,000.			
	3	Investment income (including	i dividenas, intere	est, and				
		other similar amounts)			77,660.		-	77,660,
	4 5	Income from investment of ta Royalties	x-exempt bond p	proceeds				
	5	noyaliles	(ı) Real	(II) Personal				
	6 2	Gross rents	(I) Meal	(ii) Fersonai		i		
		Less rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)	<u> </u>	•				
		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	945,443.					
	b	Less cost or other basis		-				
		and sales expenses	923 642.					
	С	Gain or (loss)	21,801.					
	d	Net gain or (loss)			21,801.			21,801.
an	8 a	Gross income from fundraisin	•					
en		including \$ 4,223	.718. of					
Other Reven		contributions reported on line	1c) See					
Ē		Part IV, line 18	а	323,575.				
₽		Less direct expenses	b	1,687,004.	ļ			
		Net income or (loss) from fund	•	•	-1,363,429.			-1,363,429.
	9 a	Gross income from gaming ac						
		Part IV, line 19	a	<u> </u>				
		Less direct expenses	b					
		Net income or (loss) from game Gross sales of inventory, less	-	<u> </u>				
	ю а	and allowances						
	h	Less cost of goods sold	a b	-				
		Net income or (loss) from sale						
ŀ		Miscellaneous Revenu		Business Code			·	
İ	11 a			Dusiness Code				
[b							
	c							
		All other revenue						
ŀ		Total. Add lines 11a-11d		•				
	12	Total revenue See instructions			4 054 042	122,000.	0	-1 263 968
432009	14							Form 990 (2014)

Form 990 (2014) FIGHT FOR CHILDREN, INC.

Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must comp	•		omplete column (A)	
_	Check if Schedule O contains a respon-	se or note to any line in (A)	this Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	2,546,196.	2,546,196.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				***************************************
4	Benefits paid to or for members				**···
5	Compensation of current officers, directors,	455 405			
	trustees, and key employees	455,135.	312,539.	89,334.	<u>53,262.</u>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	500 455	405 546	00 400	
7	Other salaries and wages	600,466.	407,516.	92,433.	100,517.
8	Pension plan accruals and contributions (include	05 000	16 550	4 3 4 5	4 400
	section 401(k) and 403(b) employer contributions)	25,288.	16,759.	4,347.	4,182. 9,583.
9	Other employee benefits	59,976.	39,395.	10,998.	9,583.
10	Payroll taxes	51,147.	34,799.	8,837.	7,511.
11	Fees for services (non-employees)				
a ·	Management				
b	Legal	22 000		22 000	
C	Accounting	23,000.		23,000.	-
	Lobbying				
	Professional fundraising services. See Part IV, line 17	23,108.		22 100	
f	Investment management fees	23,108.		23,108.	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	716,257.	654,811.	61 446	
40	· • • • • • • • • • • • • • • • • • • •	/10,25/.	054,011.	61,446.	
12 13	Advertising and promotion Office expenses	54,159.	1,009.	51,620.	1,530.
14	Information technology	32,672.	3,784.	28,888.	1,550.
15	Royalties	32,012.	3,704.	20,000.	
16	Occupancy	80,957.	- · · · · · · · · · · · · · · · · · · ·	80,957.	
17	Travel	5,954.	1,201.	4,722.	31.
18	Payments of travel or entertainment expenses	3,334.	1,201.	3,122.	<u></u>
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	38,937.	36,024.	2,913.	
20	Interest	23,23,.	20,022	2,515	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	44,728.		44,728.	
23	Insurance	5,262.		5,262.	
24	Other expenses. Itemize expenses not covered			3/2021	*****
	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	90,000.		90,000.	
b	MEDIA, PRINTING & PUBS.	45,231.	10,661.	31,955.	2,615.
c	DUES AND SUBSCRIPTIONS	4,130.	114.	926.	3,090.
d	EXECUTIVE SERVICES	3,343.		3,093.	250.
e	All other expenses	5,149.	567.	3,977.	605.
25	Total functional expenses Add lines 1 through 24e	4,911,095.	4,065,375.	662,544.	183,176.
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)				

τX	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
<u> </u>		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	289,727.	1	334,494
2	Savings and temporary cash investments		2	850,525
3	Pledges and grants receivable, net	3,505,769.	3	4,275,273
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			
	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	_8_	
9	Prepaid expenses and deferred charges	15,451.	9_	16,799.
10a				
b	Less accumulated depreciation 10b 219,984.			3,656. 2,373,847.
11	Investments - publicly traded securities			2,373,847.
12	·	552,374.	12	499,329.
13			_ 13	
14	-			
				0.
				8,353,923.
	• •			319,482.
	-		_	2,330,196.
		1,000.		12,000.
	·	· -		 -
	·		21	
22				
00	·			
	, ,			
			24	
25				
			25	
26		2 506 383.		2,661,678.
		273007303	20	2,001,070.
27	- '	2.680.205	27	2,759,722.
				2,932,523.
	·			2750275251
-	·			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund			
32	Retained earnings, endowment, accumulated income, or other funds		32	
O.E.				
33	Total net assets or fund balances	6,534,613.	33	5,692,245.
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 30 30 30 30 30 30 30 30 30 30 30 30	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Coans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis Complete Part IV of Schedule D Less accumulated depreciation Linvestments - publicity traded securities Investments - publicity traded securities Investments - other securities See Part IV, line 11 Intragible assets Other assets See Part IV, line 11 Intangible assets Other assets See Part IV, line 11 Total assets, Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses Grants payable Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17:24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Temporarily restricted net assets Permanently restricted net asset	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing 28.9, 727.	Check if Schedule O contains a response or note to any line in this Part X Cash - non-interest-bearing 28.9 , 72.7 . 1 2 , 32.8 , 61.9 . 2 3 , 25.05 , 76.9 . 3 3 , 50.5 , 76.9 . 3 3 , 50.5 , 76.9 . 3 3 , 50.5 , 76.9 . 3 3 , 50.5 , 76.9 . 3 4 Accounts receivable, net 3 , 50.5 , 76.9 . 3 4 Accounts receivable, net 3 , 50.5 , 76.9 . 3 4 Accounts receivable from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Cana and other receivables from other disqualified persons (as defined under section 4958(n)(1)), persons described in section 4958(n)(3)(6), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr) Complete Part II of Sch. L 6 Notes and loans receivable, net 7 Notes and loans and deferred charges 15 45.1 9 9.984 48 3.84 10 10 10 2.23 6.40 10 2.23 6.40 10 2.30 0.182 11 11 11 11 11 11 11

	990 (2014) FIGHT FOR CHILDREN, INC.	52-	1706059	Pa	ıge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8 9	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	1 2 3 4 5 6 7 8 9	6,53	1,0 7,0 4,6	95. 153.
10	column (B))	10	5,69	າ າ	15
Pa	rt XII Financial Statements and Reporting	10	3,03	4,4	4 J.
	Check if Schedule O contains a response or note to any line in this Part XII				
1 2a	Accounting method used to prepare the Form 990		2a	Yes	No X
b	separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat consolidated basis, or both		2b	х	
	X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in School.	edule O	2c	Х	
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits	•	ıt 3a		x
	Si addito, explain with in Odrieddie O and describe any steps taken to undergo such addits		3b Eorm	990	(2014)
			FORM	33U ((2014)

SCHEDULE A

(Form 990 or 990-EZ)

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.

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization Employer identification number INC. FIGHT FOR CHILDREN, 52-1706059 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 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 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (III) Type of organization (IV) Is the organization (i) Name of supported (ii) EIN (v) Amount of monetary (vi) Amount of listed in your organization (described on lines 1.9 support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No (see instructions))

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014 FIGHT FOR CHILDREN, INC. 52-1706059 Page 2 | Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support	•						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
	Gifts, grants, contributions, and					• •		
	membership fees received (Do not							
	include any "unusual grants ")	2,368,123.	2,258,507.	6,752,750.	5,029,033.	5,196,010.	21,604,423.	
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	2,368,123.	2,258,507.	6,752,750.	5,029,033.	5,196,010.	21 604 423.	
5	The portion of total contributions				•			
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						6,103,587.	
	Public support. Subtract line 5 from line 4						15 500 836	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	Amounts from line 4	2,368,123.	2,258,507.	6,752,750.	5,029,033.	5 196 010.	21,604,423.	
8	Gross income from interest,			1				
	dividends, payments received on					,		
	securities loans, rents, royalties							
	and income from similar sources	17,465.	9,141.	4,062.	26,798.	77,660.	135,126.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on			•				
10	Other income Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI)		386.	651.			<u> 1,037.</u>	
11	Total support. Add lines 7 through 10						21,740,586.	
12	Gross receipts from related activities,	etc (see instruction	ons)			12	242,000.	
13	First five years. If the Form 990 is for		first, second, third	d, fourth, or fifth tax	x year as a section	n 501(c)(3)		
500	organization, check this box and stop	here	·oontono				<u>▶</u>	
	ction C. Computation of Publ							
	Public support percentage for 2014 (I			olumn (f))		14	71.30 %	
	Public support percentage from 2013	•	•			15	71.85 %	
16a	33 1/3% support test - 2014. If the c	-		line 13, and line 1	4 is 33 1/3% or m	nore, check this bo		
	stop here. The organization qualifies	, , , , , ,	•	40 40 11	15 00 1 (00)		▶ X	
b	33 1/3% support test - 2013. If the c	-		·	line 15 is 33 1/3%	or more, check th	is box	
47.	and stop here. The organization qual	. ,			10 10 - 10	11 44 4004		
1/a	7a 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization							
				-		t vi now the organ	ization	
L	meets the "facts-and-circumstances"	•			•	170 ond be 45 : :	100/	
a	10% -facts-and-circumstances test							
	more, and if the organization meets the				•			
10	organization meets the "facts-and-circ		-					
<u>18</u>	Private foundation. If the organization	n did not check a t	50x 011 line 15, 10a	<u>, 100, 174, 01 170,</u>	-	dule A (Form 990		

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

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

Se	ction A. Public Support	sion, piodes com	pioto i dit ii j	·		 -	
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions,			-			
	merchandise sold or services per-						
	formed, 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		L				
4	Tax revenues levied for the organ-						
	ızatıon'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 8	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)					<u> </u>	
	ction B. Total Support			1	γ		
	ndar year (or fiscal year beginning in) 🖊	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources					-	
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is				1		
40	regularly carried on					-	
12	Other income Do not include gain or loss from the sale of capital						1
	assets (Explain in Part VI)			 			
	Total support (Add lines 9, 10c, 11, and 12)		L				
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	rd, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
50	check this box and stop here	a Support Da	roontogo				
	ction C. Computation of Publi			1 (0)		T I	
	Public support percentage for 2014 (li Public support percentage from 2013		•	column (I))		15	<u>%</u>
<u>16</u> Se	ction D. Computation of Inves				·	16	%
		·				17	
	Investment income percentage for 20 Investment income percentage from 2			ie is, column (i))		17	<u>%</u>
	a 33 1/3% support tests - 2014. If the			on line 14 and line	a 15 ie mara than 1	18	7 is not
196	more than 33 1/3%, check this box ar						/ IS NOT
ı	33 1/3% support tests - 2013. If the						▶ ∟
	line 18 is not more than 33 1/3%, cher					· ·	anu 🛌 🦳
20	Private foundation. If the organization					•	
<u> </u>	i medic roundation, il the organization	- GIO HOL CHECK A	DOX OIT MIE 14, 19	a, or rab, check th	no box and see in	atractions	

Part IV Supporting Organizations

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

Section A.	ΑII	Supporting	Organizations
------------	-----	------------	----------------------

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported
- organization was described in section 509(a)(1) or (2)

 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?
 If "Yes," complete Part I of Schedule L (Form 990)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
1		
2		
3a		
3b		
Зс		
4a		
1.4		
4b		
4c		
5a		
5b		
5c		
6		
7		
7		
8		
9a		
9b		
9c		
10a		
10b		
990 or 99	n-F7)	2014

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

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions)

Schedule A (Form 990 or 990-EZ) 2014

b

and 4c

Breakdown of line 7

d Excess from 2013e Excess from 2014

Excess distributions carryover to 2015. Add lines 3j

rt VI Supplementa	Z) 2014 FIGHT FOR	the explanations rec	nured by Part II I	ine 10 Part II line 1	52-1706059 7a or 17b, and Part III, line 1	12
	s part for any additional inf	ormation (See instri	quired by Fart II, I Lictions)	ine 10, Part II, line I	7a or 17b, and Fait III, line	12
, Also complete this	s part for any additional in	ornation (See instit	uctions			
						
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		<u> </u>				

SCHEDULE D

(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 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

		FIGHT FOR CHILDREN					<u>52-170</u>	
Par	t I	Organizations Maintaining Donor Advise	ed Funds o	Other Similar Fund	ds or A	Account	S. Complete	if the
		organization answered "Yes" to Form 990, Part IV, line	e 6					
			(a) Do	nor advised funds	İ	(b) Funds	and other acc	counts
1	Total	number at end of year						
2	Aggre	gate value of contributions to (during year)						
3	'Aggre	gate value of grants from (during year)						
4	Aggre	gate value at end of year						
5	Did th	e organization inform all donors and donor advisors in	writing that the	assets held in donor adv	/ised fur	nds		
	are th	e organization's property, subject to the organization's	exclusive lega	Il control?			Yes	☐ No
6	Did th	e organization inform all grantees, donors, and donor a	dvisors in writ	ing that grant funds can b	e used	only		
	for ch	aritable purposes and not for the benefit of the donor o	or donor adviso	or, or for any other purpos	e confe	rring		
		missible private benefit?					Yes	☐ No
Par	t II	Conservation Easements. Complete if the org	ganization ans	wered "Yes" to Form 990,	Part IV,	line 7		
1	Purpo	se(s) of conservation easements held by the organizati	ion (check all t	hat apply)				
		Preservation of land for public use (e.g., recreation or e	education)	Preservation of a his	storically	y importan	t land area	
		Protection of natural habitat		Preservation of a ce	rtified h	istoric stru	ıcture	
		Preservation of open space						
2	Comp	lete lines 2a through 2d if the organization held a qualif	fied conservati	on contribution in the forr	n of a co	onservatio	n easement c	on the last
		f the tax year						
						He	ld at the End o	f the Tax Year
а	Total	number of conservation easements				2a		
b	Total	acreage restricted by conservation easements				2b		
С	Numb	er of conservation easements on a certified historic str	ucture include	d in (a)		2c		-
d	Numb	er of conservation easements included in (c) acquired	after 8/17/06,	and not on a historic struc	cture			
	listed in the National Register					2d		
3	Numb	er of conservation easements modified, transferred, re	leased, extingi	uished, or terminated by t	he orgar	nization du	ring the tax	
	year 🕽	>			_			
4	Numb	er of states where property subject to conservation ea	sement is loca	ted >	_			
5	Does	the organization have a written policy regarding the pei	riodic monitorii	ng, inspection, handling o	f			
	violati	ons, and enforcement of the conservation easements i	t holds?				Yes	☐ No
6	Staff a	and volunteer hours devoted to monitoring, inspecting,	and enforcing	conservation easements	during t	:he year ►	•	
7	Amou	nt of expenses incurred in monitoring, inspecting, and	enforcing cons	servation easements durir	ng the ye	ear ▶ \$ _		
8	Does	each conservation easement reported on line 2(d) above	e satisfy the r	equirements of section 17	⁷ 0(h)(4)(E	3)(ı)		
	and s	ection 170(h)(4)(B)(ii)?					Yes	No
9	In Par	t XIII, describe how the organization reports conservati	on easements	in its revenue and expens	se state	ment, and	balance shee	et, and
	ınclud	e, if applicable, the text of the footnote to the organization	tion's financial	statements that describe	s the or	ganization	's accounting	j for
		rvation easements						
Par	t III	Organizations Maintaining Collections of	f Art, Histo	rical Treasures, or	Other	Similar .	Assets.	
		Complete if the organization answered "Yes" to Form	990, Part IV, II	ne 8				
1a	If the	organization elected, as permitted under SFAS 116 (AS	SC 958), not to	report in its revenue state	ement a	nd balance	e sheet works	s of art,
	histor	ical treasures, or other similar assets held for public ext	nibition, educa	tion, or research in further	rance of	public ser	vice, provide	, in Part XIII,
		xt of the footnote to its financial statements that descri						
b		organization elected, as permitted under SFAS 116 (AS						
	treasu	ires, or other similar assets held for public exhibition, ed	ducation, or re	search in furtherance of p	ublic se	rvice, prov	ride the follow	ving amounts
	relatır	g to these items						
	` '	evenue included in Form 990, Part VIII, line 1				> \$_		
	• •	ssets included in Form 990, Part X				> \$_		
2		organization received or held works of art, historical tre			al gain,	provide		
	the fo	llowing amounts required to be reported under SFAS 1	16 (ASC 958)	relating to these items				
а	Rever	nue included in Form 990, Part VIII, line 1				> \$_		<u>-</u>
b	Asset	s included in Form 990, Part X				> \$_		

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Schedule D (Form 990) 2014

Sche		OR CHILDRE				!	<u> 52-17</u>	06059	Page 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, Historica	l Treasures,	or Othe	er Simila	ar Asse	ts(continu	ed)
3	Uşing the organization's acquisition, accessi	on, and other record	ds, check any o	f the following tha	at are a s	ignificant i	use of its	collection i	tems
	(check all that apply)								
а	Public exhibition	(d Loan o	r exchange progr	ams				
b	Scholarly research	•	Other_						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	in how they furt	her the organizat	ion's exe	mpt purpo	se in Par	t XIII	
5	During the year, did the organization solicit o	r receive donations	of art, historical	treasures, or oth	er sımılaı	r assets			
	to be sold to raise funds rather than to be ma							Yes	No_
Pai	rt IV Escrow and Custodial Arran	gements. Compl	ete if the organi	zation answered	"Yes" to	Form 990.	, Part IV, I	line 9, or	
	reported an amount on Form 990, Par	rt X, line 21							
1a	Is the organization an agent, trustee, custodi	an or other interme	diary for contrib	utions or other as	ssets not	ıncluded			
	on Form 990, Part X?							Yes	No No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table			·			
								Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	9					lity?		Yes	☐ No
	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanation has l	oeen provided in	Part XIII				
Pai	rt V Endowment Funds. Complete	f the organization ar	nswered "Yes" t	o Form 990, Part	IV, line 1	0			
		(a) Current year	(b) Prior yea	ar (c) Two yea	rs back	(d) Three y	ears back	(e) Four ye	ears back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance		<u> </u>					<u></u>	
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1g, colui	mn (a)) held as					
а	Board designated or quasi-endowment		%						
b	Permanent endowment	%							
С	Temporarily restricted endowment	%							
	The percentages in lines 2a, 2b, and 2c shou	•							
3а	Are there endowment funds not in the posse	ssion of the organiz	ation that are h	eld and administe	ered for t	he organız	ation	_	
	by							<u>\Y</u>	es No
	(ı) unrelated organizations							3a(i)	
	(II) related organizations							3a(ıi)	
b	If "Yes" to 3a(II), are the related organizations	<u>.</u>						3b	
4	Describe in Part XIII the intended uses of the		owment funds		-				
Pai	rt VI Land, Buildings, and Equipm				_				
-	Complete if the organization answered		ì						
	Description of property	(a) Cost or o	' '	Cost or other	1 ' '	ccumulate	d	(d) Book v	value
		basis (investi	ment) b	asıs (other)	dej	preciation			
1a	Land	ļ							
b	•		<u> </u>						
	Leasehold improvements			0 405			 -		
d	' '			9,437.		7,73			<u>,702.</u>
	Other			214,203.		<u> 212,24</u>	49.		<u>,954.</u>
Total	I. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. column (B). I	ine 10c)				3	. 656.

Schedule D (Form 990) 2014

1	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
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

Schedule D (Form 990) 2014

	ule D (Form 990) 2014 FIGHT FOR CHILDREN, INC.		52-	1706059 Page
Part	XI Reconciliation of Revenue per Audited Financial Statem	nents With Revenue per F		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	a		
1	Fotal revenue, gains, and other support per audited financial statements		1	5,945,737
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a 14,685.	.]	
b	Donated services and use of facilities	2b 190,006.	.]	
С	Recoveries of prior year grants	2c]	
d	Other (Describe in Part XIII)	2d 1,687,004.	.]	
е	Add lines 2a through 2d		2e	1,891,695
3	Subtract line 2e from line 1		3	4,054,042
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	nvestment 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		4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	4,054,042
	XII Reconciliation of Expenses per Audited Financial States	ments With Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	•		
1	Total expenses and losses per audited financial statements		1	6,788,105
	Amounts included on line 1 but not on Form 990, Part IX, line 25			<u> </u>
	Donated services and use of facilities	2a 190,006.		
-	Prior year adjustments	2b	1	
	Other losses	2c	1	
d	Other (Describe in Part XIII)	2d 1,687,004.	1	
	Add lines 2a through 2d		2e	1,877,010
	Subtract line 2e from line 1		3	4,911,095
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			<u> </u>
	nvestment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII)	4b	1	
c .	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	4,911,095
	XIII Supplemental Information.		<u> </u>	
Provid	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	urt IV, lines 1b and 2b, Part V, line	4, Part	X, line 2, Part XI,
lines 2	d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any ac	dditional information		,
<u>PAR</u>	TX, LINE 2:			
<u>FOR</u>	THE YEARS ENDED DECEMBER 31, 2014 AND 2	<u>013, FFC HAS DOCU</u>	MEN'	red its
G017	STREET OF THE TOTAL TOTA			. _
CON	SIDERATION OF FASB ASC 740-10, INCOME TA	XES, THAT PROVIDE	is Gi	JIDANCE FOR
משם	DOMENIC INCORPORATION IN THEOMER MAYER AND IT	AC DEMEDATION MILA		
KEP	ORTING UNCERTAINTY IN INCOME TAXES AND H	AS DETERMINED THA	V.T. M) MATERIAL
IINC	ERTAIN TAX POSITIONS QUALIFY FOR EITHER	PECOCNITION OF DI	CCT.	אלווסט דאו
<u>UIIC</u>	MINITED NOT THERE & CHOTTED THE TANK .	RECOGNITION ON DI	. БСЦ	DOOKE IN
THE	FINANCIAL STATEMENTS.			
			-	
<u>FED</u>	ERAL FORM 990, RETURN OF ORGANIZATION EX	EMPT FROM INCOME	TAX	, IS
<u>SUB</u>	JECT TO EXAMINATION BY THE INTERNAL REVE	NUE SERVICE, GENE	RALI	LY FOR
mttr	TO VENDO REMODE TO TO STATE			
THR	EE YEARS AFTER IT IS FILED.			
<u>P</u> AR	Y XI, LINE 2D - OTHER ADJUSTMENTS:			
432054		-	Caba	- I - D /F 000\ 004

Schedule D (Form 990) 2014 FIGHT FOR CHILDREN, INC.	52-1706059 Page 5
Part XIII Supplemental Information (continued)	
SPECIAL EVENTS EXPENSES SHOWN AS EXPENSE ON	1,687,004.
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON THE FORM 990, PART VIII, LINE 8B.	
PART_XII, LINE 2D - OTHER ADJUSTMENTS:	
SPECIAL EVENTS EXPENSES SHOWN AS EXPENSE ON	1,687,004.
THE FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE	
ON THE FORM 990, PART VIII, LINE 8B.	

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
	OR CHILDREN, INC.					52-1706	
Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part							
1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the	e Solicitat f Solicitat g Special or oral agreement with any individual tart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) fundr have co or con contribu	trol 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				
-							-,

-							
7				.,			
				_			
		_		-			
					<u> </u>		<u></u>
						-	
Total							
List all states in which the organization or licensing	in is registered or licensed to solicit	contrib	utions	or has been notified	d it is	exempt from re	egistration
					-		
							 -
			-				
				· · · · · · · · · · · · · · · · · · ·			

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

Schedule G (Form 990 or 990-EZ) 2014

	art II Fundraising Events. Complete if t	he organization answered	d "Yes" to Form 990, Part	IV, line 18, or reported	
	of fundraising event contributions and g	(a) Event #1 FIGHT NIGHT	0-EZ, lines 1 and 6b List 6 (b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through
a		(event type)	(event type)	(total number)	col (c))
Revenue	1 Gross receipts	4,547,293.			4,547,293.
	2 Less Contributions	4,223,718.			4,223,718.
	3 Gross income (line 1 minus line 2)	323,575.			323,575.
ŀ	4 Cash prizes				
Se	5 Noncash prizes				
Direct Expenses	6 Rent/facility costs				
Irect E	7 Food and beverages	558,316.			558,316.
ا ''	8 Entertainment	517,751.			517,751.
Ì	9 Other direct expenses	610,937.	-		610,937.
	10 Direct expense summary Add lines 4 through	gh 9 in column (d)		>	1,687,004.
	11 Net income summary Subtract line 10 from				-1,363,429.
Pa	art III Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
	\$15,000 on Form 990-EZ, line 6a				
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1 Gross revenue				
	1 Gross revende		_		
ses	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
Direct	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	Yes% No	Yes% No	Yes% No	
	7 Direct expense summary Add lines 2 through	gh 5 in column (d)		>	
	8 Net gaming income summary Subtract line	7 from line 1, column (d)			
9	Enter the state(s) in which the organization cond	fucts gaming activities			
-	a Is the organization licensed to conduct gaming	· · -	states?		Yes No
	b If "No," explain				
	Were any of the organization's gaming licenses	revoked, suspended or te	erminated during the tax y	rear?	Yes No
b	b If "Yes," explain				
43208	082 08-28-14			Schedule G (Fo	orm 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-EZ) 2014 FIGHT FOR CHILDREN, INC.	52-1706059 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	formed
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	
a The organization's facility	13a %
b An outside facility	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books	
Name	
Address ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming rev	enue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ an	d the amount
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name ►	
Address ►	
16 Gaming manager information	
Name ▶	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations	s or spent in the
organization's own exempt activities during the tax year ▶ \$	
Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions)	d (v), and Part III, lines 9, 9b, 10b, 15b,
	·
	

Schedule G (Form 990 or 990-EZ)	FIGHT FOR CHILDREN,	INC.	52-1706059 Page 4
Part IV Supplemental Inf	FIGHT FOR CHILDREN, ormation (continued)		
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No 1545-0047	2014

Open to Public

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

mber 59 Inspection

Name of i	Name of the organization	Employer identification number
	FIGHT FOR CHILDREN, INC.	52-1706059
Part I	Part I General Information on Grants and Assistance	
1 Doe	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	; -
crite	rnteria used to award the grants or assistance?	X Yes

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any Part II

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

recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II car	be duplicated if additive	onal space is need	ed .			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non cash assistance	(h) Purpose of grant or assistance
ALEXANDRIA BOXING CLUB 1726 M STREET, NW	202127	(6)(0)(0)	000	c			STRUCTURED AFTER-SCHOOL
APPLETREE INSTITUTE FOR EDUCATION	, , , , , , , , , , , , , , , , , , ,	(6) / 2) + 20					SUPPORT THEIR WORK TO REFINE, MODIFY AND
415 MICHIGAN AVENUE, NW, 3RD FLOOR WASHINGTON, DC 20017	04-3331760	501(C)(3)	100 000	0			DOCUMENT ITS EVERY CHILD READY MODEL
BALTIMORE COMMUNITY FOUNDATION							GRANT TO SUPPORT THE
2 EAST READ STREET, 9TH FLOOR				•		-	EXPANSION OF JUDY CENTERS
BALTIMORE, MD 21202	23-7180620	501(C)(3)	150,000	0			WITHIN BALTIMORE CITY
CAL RIPKIN, SR. FOUNDATION							SUPPORTS THE RENOVATION
1427 CLARKVIEW ROAD, SUITE 100	, , , , , , , , , , , , , , , , , , ,		6	ć			OF THE FIELD AT THE
BALLIMONE, ML 41409	0000107-70	201(5)(3)	*000,000,T				KANDALL COMMUNITY CENTER SUPPORTS THE
CENTRONIA							IMPLEMENTATION AND
1420 COLUMBIA ROAD, NW							EVALUATION OF THE
WASHINGTON, DC 20009	25-1689720	501(C)(3)	75,000.	0.			UNPACKING CLASS TOOL KIT
CHILDREN'S HOSPITAL FOUNDATION							SUPPORT THE GROWTH OF
111 MICHIGAN AVENUE, NW	E2 1640402	76770710	000	c			THEIR IMPACT DC ASTHMA
MASHINGTON DC 20010		JU1 (C / (J / L) L UC	140,000,	0.1			CARE PROGRAM IN DC

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

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

Schedule I (Form 990) (2014)

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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), Part II)	CHILDREN Assistance to Gov	I, INC.	Uzations in the U	nited States (Sche	dule I (Form 990). Pa		52-1706059 Page 1
1	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DC PUBLIC EDUCATION FUND 3407 14TH STREET, NW WASHINGTON, DC 20010	26-1607955	501(C)(3)	213,000,	0			SUPPORT OT THE STANDING OVATION FOR DC TEACHERS, OSI RISING STAR AWARD TO KELLY MILLER MIDDLE
DC SPECIAL ED COOP 1488 NEWTON STREET, NW, #2 WASHINGTON, DC 20010	52-2260620	501(C)(3)	87,000.	0			SUPPORTS THE REFINEMENT AND IMPLEMENTATION OF INCLUDE DC WHICH PROVIDES PARTIFIPANTS WITH A
FRIENDSHIP PUBLIC CHARTER SCHOOL 1345 POTOMAC AVENUE, SE WASHINGTON, DC 20003	522204468	501(C)(3)	100,000.	0			OSI RISING STAR AWARD
GEORGETOWN UNIVERSITY P.O. BOX 571485 WASHINGTON, DC 20057	53-0196603	501(C)(3)	.98,196.	0			TO FUND THE DEVELOPMENT OF A VERSION OF AN EARLY CHILDHOOID MENTAL HEALTH CONSULTATION MODEL THAT
PLAYWORKS WASHINGTON 600 PENNSYLVANIA AVENUE, SE WASHINGTON, DC 20003	94-3251867	501(C)(3)	158,000,	0			SUPPORT THEIR WORK IN AN ADDITIONAL SIX ELEMENTARY SCHOOLS
READING PARTNERS 1274 M STREET, NW WASHINGTON, DC 20005	77-0568469	501(C)(3)	100,000.	0			TO SUPPORT THE EXPANSION OF THEIR PROGRAM IN 17 SCHOOLS.
SMITHSONIAN INSTITUTE 1000 JEFFERSON DRIVE, SW WASHINGTON, DC 20560	50-0206027	501(C)(3)	100,000.	0			TO SUPPORT THEIR SCIENCE IN PRE-K PROGRAM
TURNING THE PAGE 1625 K STREET, NW WASHINGTON, DC 20006	52-2081934	501(C)(3)	75,000,	0	:		SUPPORTS THE EXPANSION AND EVALUATION OF THEIR FAMILY ENGAGEMENT PROGRAMS
		501(C)(3)	97,000	0.			SUPPORT TO EXPAND THEIR CAPACITY TO PROVIDE THERAPEUTIC SERVICES FOR 3-8 YEAR OLD CHILDREN IN

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) FIGHT FOR CHILDREN ONLY GIVES GRANTS TO ORGANIZATIONS THAT MEET ITS OVERALL Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information FIGHT FOR CHILDREN KEEPS RECORDS OF THE AMOUNTS GIVEN TO ORGANIZATIONS PURPOSE OF HELPING KIDS IN NEED. FIGHT FOR CHILDREN ALSO REQUESTS AND (d) Amount of non-cash assistance RECEIVES ANNUAL REPORTS FROM THE GRANTEES AND INTERIM REPORTS, NAME OF ORGANIZATION OR GOVERNMENT: DC PUBLIC EDUCATION FUND (c) Amount of cash grant (b) Number of recipients COLUMN (H): (a) Type of grant or assistance LINE 1, LINE 2: APPLICABLE PART II PART I,

Schedule I (Form 990) (2014)

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Page'2

52-1706059

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

INC.

FIGHT FOR CHILDREN,

Schedule I (Form 990) (2014)

Part III

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.

INC

Open to Public Inspection ► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

FIGHT FOR CHILDREN.

Employer identification number

52-1706059

OMB No 1545-0047

Pa	rrt 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			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	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,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			•
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			
	The organization?	6a		_X_
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	Į		
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		_X_
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	۱۵		Ī

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

Schedule J (Form 990) 2014

FIGHT FOR CHILDREN, INC.

52-1706059

Page 2

Schedule J (Form 990) 2014

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

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

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(D)·(I)(B)	in column (B) reported as deferred in prior Form 990
(1) MICHELA ENGLISH	Ξ	221,162.	40,000.	0	5,000.	146.	266,308.	0
PRESIDENT & CEO/SECRETARY	Ξ		0.	0	0	0	f 1	0
(2) JOHN MCKOY	Ξ	160,49	18,000.	0.	2,000.	5,331.	188,827.	0
DIR, PROG, INITIATIVES (END 12/14)	Ξ	0.	0.	0.	• 0	0	1	
(3) JEFFREY TRAVERS	(E)	118,788.	20,000.	0.	2,000.	10,632.	154,420.	
DIRECTOR OF EXTERNAL RELATIONS	▣	0	0	0.	• 0	€ .	0	0
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Schedule J (Form 990) 2014

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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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 Inspection

Name of the organization

FIGHT FOR CHILDREN, INC. Employer identification number 52-1706059

OMB No 1545-0047

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

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:

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. 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.

- THE CHAIRPERSON OF THE BOARD OR COMMITTEE, IF APPROPRIATE, APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT
- AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2014) 432211 08-27-14

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization FIGHT FOR CHILDREN, INC. GIVE RISE TO A CONFLICT OF INTEREST.

Employer identification number 52-1706059

WHETHER THE ORGANIZATION CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT

- 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 REOUIREMENTS 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:

THE ORGANIZATION IS CURRENTLY CREATING APPROPRIATE PROCESSES FOR DETERMINING THE COMPENSATION FOR THE CEO. IN 2014, 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 COMPLETED IN FEBRUARY 2014.

THE CHAIRMAN AND EXECUTIVE DIRECTOR REVIEW AND APPROVE THE COMPENSATION FOR ALL OTHER STAFF.

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Schedule O (Form 990 or 990-EZ) (2014)

SCHEDULE R (Form 990) Name of the organization

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

▶ Attach to Form 990.

2014

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number 52-1706059 INC. FIGHT FOR CHILDREN,

(g) Section 512(b)(13) S controlled entrty? 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 'IGHT FOR CHILDREN End-of-year assets Public charity status (if section <u>e</u> 501(c)(3)) LINE 7 Total income Exempt Code 9 section 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) 2014

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52-1706059

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Schedule R (Form 990) 2014 FIGHT FOR CHILDREN, INC.

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year

									1	-	
(a)	(q)	<u>©</u>	(g	(e)	_	Œ	(6)	£	9	9	₹ <u>,</u>
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from fax under		Share of total income	Share of end-of-year	Disproportionate allocations?			General or Percentage managing ownership partner?
The second secon		toreign country)		sections 5	12-514)		doodlo	Yes No	k·1 (Form 1065)		
						•					
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year	ganizations Taxable a	as a Corpo	ration or Trust Co	mplete if the	organization a	answered "Yes	' on Form 990,	Part IV, line (34 because it had	d one or mor	e related
(a)			(q)	(၁)	(p)	(a)		(£)	(6)	(F)	Ξ,
Name, address, and EIN of related organization	<u> </u>	Prima	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)		Share of total income	Share of end-of-year assets	Percentage ownership	Section 512(b)(13) controlled entity?
							- 12				
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Schedule R (Form 990) 2014

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	ž
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 re	lated organizations listed	J in Parts II:IV?			
a Receipt of (I) interest, (II) annuities, (III) royalties, or (IV) rent from a controlled entity	K:			-a		×
 Gift, grant, or capital contribution to related organization(s) 				4	×	
c Gift, grant, or capital contribution from related organization(s)				5		×
d Loans or loan guarantees to or for related organization(s)				1d		×
e Loans or loan guarantees by related organization(s)				1e		×
f Dividends from related organization(s)				*		×
				-		; ;
				<u>6</u>	1	4
h Purchase of assets from related organization(s)				=		×
i Exchange of assets with related organization(s)				=		×
j Lease of facilities, equipment, or other assets to related organization(s)				÷		×
k Lease of facilities, equipment, or other assets from related organization(s)				¥		×
l 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)	anization(s)			Ē		×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			£		×
o Sharing of paid employees with related organization(s)				10		×
 P Reimbursement paid to related organization(s) for expenses 				- e		×
q Reimbursement paid by related organization(s) for expenses				ţ		×
						:
				=		×
اء.				1s		×
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 th	is line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	volved		
(1) ALEXANDRIA BOXING CLUB	М	50,000.	,000.GENERAL LEDGER			
(2) ALEXANDRIA BOXING CLUB	ı	0	0.SERVICES AS NEEDED			
(3)						
(4)						ŀ
(5)						-
(9)						
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Part Vi Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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

Schedule R (Form 990) 2014

ocijednie r	R (Form 990) 2014	FIGHT FOR CH	ILDKEN,	INC.	⊃.₄	<u>2-1706059</u>	Page 5
Part VII	R (Form 990) 2014 Supplemental Info	rmation			·		
	Provide additional inform	nation for responses to ques	stions on Sche	edule R (see instructions)			
	Frovide additional inform	lation for responses to ques	stions on oche	sadie in (see instructions)			
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