Form **990**

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.

Department of the Treasury
Internal Revenue Service

OMB No. 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning , 2016, and ending ,

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return/terminated
- [ ] Amended return
- [ ] Application pending

C
FOUNDATION FOR THE CHILDREN
OF THE CALIFORNIAS
2508 HISTORIC DECATUR RD #100
SAN DIEGO, CA 92106-6138

D Employer identification number: 33-0415572

E Telephone number: 619-400-5999

G Gross receipts $ 1,162,316.

F Name and address of principal officer: SAME AS C ABOVE

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No

I Tax-exempt status: [X] 501(c) [ ] 527 [ ] 4947(a)(1) or [ ] 527

J Website: ▶ WWW.USFCC.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶ L Year of formation: 1990 M State of legal domicile: CA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: INPROVE THE HEALTH AND NUTRITION FOR THE CHILDREN OF THE REGION THROUGH OPERATION AND EXPANSION OF A MODEL PEDIATRIC SPECIALTY MEDICAL AND EDUCATION COMPLEX. LOCATED ONE HAMPSHIRE 3900 BAJA CALIFORNIA, MEXICO.

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	17
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	5	3
6	Total number of volunteers (estimate if necessary)	6	150
7a	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.

Revenue

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	4,276,020.	610,144.
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	101,338.	107,671.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,873.	27,475.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,189,231.	745,290.

Expenses

		Prior Year	Current Year
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	718,368.	584,437.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	340,078.	350,442.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 381,164.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	115,853.	155,586.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,174,299.	1,090,485.
19	Revenue less expenses. Subtract line 18 from line 12	3,014,932.	-345,195.

Net Assets or Fund Balances

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	5,600,591.	5,357,243.
21	Total liabilities (Part X, line 26)	19,255.	8,421.
22	Net assets or fund balances. Subtract line 21 from line 20	5,581,140.	5,348,822.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer — Date

▶ FRANK HOBBS, ESQ. — CHAIR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
CHERYL RHODE	CHERYL RHODE			P00234939

Firm's name ▶ WEST RHODE & ROBERTS
Firm's address ▶ 2741 4TH AVE
SAN DIEGO, CA 92103

Firm's EIN ▶ 33-0783983
Phone no. 619-615-5380

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

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2016)

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