

2006

Open to Public Inspection

Form 990

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury Internal Revenue Service

A For the 2006 calendar year, or tax year beginning July 1 2006, and ending June 30 20 07

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: Farm of the Child, Inc. D Employer identification number: 43 1776877. E Telephone number: (727) 475-4459. F Accounting method: Cash, Accrual, Other.

G Website: www.farmofthechild.org. H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? H(d) Is this a separate return filed by an organization covered by a group ruling?

J Organization type (check only one): 501(c)(3), 4947(a)(1), 527.

K Check here if the organization is not a 508(a)(3) supporting organization and its gross receipts are normally not more than \$25,000.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with columns for Revenue, Expenses, and Net Assets. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less: rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less: cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less: direct expenses; 9c Net income or (loss); 10a Gross sales of inventory; 10b Less: cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets; 21 Net assets or fund balances at end of year.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2006)

Form 990
Farm of the Child Inc MO
Employer ID# 43-1776877

July 1, 2006 – June 30, 2007

Part I – Revenues, Expenses, and Changes in Net Assets or Fund Balance
Line 20 – Other changes in net assets or fund balances

\$319 in unrealized gains due to appreciation in value of stock.

Form 990
Farm of the Child Inc MO
Employer ID# 43-1776877

July 1, 2006 – June 30, 2007

Part II – Statement of Functional Expenses
Line 43g – Other Expenses

	A	B	C	D
	Total	Program	General	Fundraising
Construction & Maintenance	43,523	43,523	0	0
Community Aid & Disaster Relief	28,894	28,894	0	0
	<u>72,417</u>	<u>72,417</u>	<u>0</u>	<u>0</u>

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash—non-interest-bearing	209,241	45	214,904	
	46 Savings and temporary cash investments	195,000	46	195,000	
	47a Accounts receivable	47a	-0-		
	b Less: allowance for doubtful accounts	47b	-0-	47c -0-	
	48a Pledges receivable	48a	-0-		
	b Less: allowance for doubtful accounts	48b	-0-	48c -0-	
	49 Grants receivable		-0-	49 -0-	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		-0-	50a -0-	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		-0-	50b -0-	
	51a Other notes and loans receivable (attach schedule)	51a	-0-		
	b Less: allowance for doubtful accounts	51b	-0-	51c -0-	
	52 Inventories for sale or use		-0-	52 -0-	
	53 Prepaid expenses and deferred charges		-0-	53 -0-	
	54a Investments—publicly-traded securities	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	1,978	54a	2,297
	b Investments—other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	-0-	54b	-0-
	55a Investments—land, buildings, and equipment: basis	55a	-0-		
	b Less: accumulated depreciation (attach schedule)	55b	-0-	55c -0-	
	56 Investments—other (attach schedule)		-0-	56 -0-	
	57a Land, buildings, and equipment: basis	57a	-0-		
	b Less: accumulated depreciation (attach schedule)	57b	-0-	57c -0-	
58 Other assets, including program-related investments (describe ▶)		-0-	58 -0-		
59 Total assets (must equal line 74). Add lines 45 through 58		406,219	59	412,201	
Liabilities	60 Accounts payable and accrued expenses	-0-	60	-0-	
	61 Grants payable	-0-	61	-0-	
	62 Deferred revenue	-0-	62	-0-	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	-0-	63	-0-	
	64a Tax-exempt bond liabilities (attach schedule)	-0-	64a	-0-	
	b Mortgages and other notes payable (attach schedule)	-0-	64b	-0-	
	65 Other liabilities (describe ▶)	-0-	65	-0-	
	66 Total liabilities. Add lines 60 through 65	-0-	66	-0-	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	-0-	67	-0-	
	68 Temporarily restricted	-0-	68	-0-	
	69 Permanently restricted	-0-	69	-0-	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds	406,219	70	412,201	
	71 Paid-in or capital surplus, or land, building, and equipment fund	-0-	71	-0-	
	72 Retained earnings, endowment, accumulated income, or other funds	-0-	72	-0-	
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	406,219	73	412,201		
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	406,219	74	412,201		

Form 990
Farm of the Child Inc MO
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July 1, 2006 - June 30, 2007

Part IV - Balance Sheet
Line 54 - Investments

<u>Description</u>	<u>Symbol</u>	<u>Quantity</u>	<u>Price</u>	<u>Market Value</u>
General Electric Company Stock	GE	60	\$38.28	\$2,297.00

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 12, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12). Add lines c and d		e	

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	N/A
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify):	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17). Add lines c and d		e	

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
Zulena Pescatore 1616 Nottingham Knoll Drive, Jacksonville, FL	President, 8 hours	-0-	-0-	-0-
Christine Turner, MD 6117 Hillview Ave., Alexandria, VA	Vice-president, 8 hours	-0-	-0-	-0-
Nicholas St. Ores 5150 Muir Ave N., Stillwater, MN	Treasurer, 8 hours	-0-	-0-	-0-
Katherine King 328 E. 14th St., Apt. #20, New York, NY	Secretary, 8 hours	-0-	-0-	-0-
Timothy Dolan 3041 Dominion Ct., Safety Harbor,	Director, 8 hours	-0-	-0-	-0-
Michael Frisby 190 Pierce Street Ph09, Clearwater, FL	Director, 8 hours	-0-	-0-	-0-
Thomas Ryan Murphy 2311 Clubside Ct. #1522, Palm Harbor, FL	Director, 8 hours	-0-	-0-	-0-
Tom Purekal 1673 34th Street NW, Washington, DC	Director, 8 hours	-0-	-0-	-0-
Tricia Zackrisson 361 1/2 Lawson Ave., Steubenville, OH	Director, 8 hours	-0-	-0-	-0-
Bruce Schratz, MD 190 Pebble Beach Dr., Little Rock, AR	Director, 8 hours	-0-	-0-	-0-

Form 990
 Farm of the Child Inc MO
 Employer ID# 43-1776877

July 1, 2006 – June 30, 2007

Part V-A – Current Officers, Directors, Trustees and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation	(D) Contribution to employee benefit plan	(E) Expense account and other allowances
Felicia Johnson-O'Brien 53112 Bracken Farm Ct, South Bend, IN	Director, 8 hours	0	0	0
Monica O'Reilly 262 Canner St, New Haven, CT	Director, 8 hours	0	0	0
Mary Beth Stryker 442 Walnut St, Newtonville, MA	Director, 8 hours	0	0	0
Timothy Boatright 12902 Oak Shadow Place, Tampa, FL	Director, 8 hours	0	0	0
Rev. Gilberto Quintero 820 Jasmine Way, Clearwater, FL	Director, 8 hours	0	0	0
Andrea McMerty-Brummer 1616 Nottingham Knoll Dr, Jacksonville, FL	Program Administrator, 30 hours	15,035	0	18,756***

***\$10,000 of this total is an academic scholarship awarded for the pursuit of a Masters degree in Non-profit Management. \$8,756 accounts for reimbursement for expenses incurred and purchased made on behalf of the organization during the 2006-2007 fiscal year.

Form 990
Farm of the Child Inc MO
Employer ID# 43-1776877

July 1, 2006 – June 30, 2007

Part V-A – Current Officers, Directors, Trustees and Key Employees
Line 75b – Explanation of relationships

Tim Dolan (Director) is the owner of Intergro, Inc., an agricultural products distributor in Florida. Thomas Ryan Murphy (Director) is an employce of Intergro, Inc.

Part VI Other Information (continued)

		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b 9,000		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	<input checked="" type="checkbox"/>
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	<input checked="" type="checkbox"/>
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.	88a	<input checked="" type="checkbox"/>
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	<input checked="" type="checkbox"/>
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	<input checked="" type="checkbox"/>
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	<input checked="" type="checkbox"/>
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	<input checked="" type="checkbox"/>
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	<input checked="" type="checkbox"/>
90a	List the states with which a copy of this return is filed		
b	Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b	1
91a	The books are in care of Thomas E. Murphy Telephone no. (813) 448-4009 Located at 2311 Clubside Ct. Apt. 1522, Palm Harbor, FL ZIP + 4 34683		
b	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)? If "Yes," enter the name of the foreign country Honduras See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	<input checked="" type="checkbox"/>

Part VI Other Information (continued)

- c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country **Honduras**
- 92** Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year **92**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a	N/A				
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))					
105 Total (add line 104, columns (B), (D), and (E))					

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	N/A

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfer Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes No

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.

Please Sign Here

N. St. Ores
Signature of officer
Nicholas St. Ores, Treasurer
Type or print name and title

12/15/2008
Date

Paid Preparer's Use Only

Preparer's signature
Firm's name (or yours if self-employed), address, and ZIP + 4

Date
Check if self-employed
Preparer's SSN or PTIN (See Gen. Inst. X)
EIN
Phone no.



SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2006

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.**

Name of the organization

Farm of the Child, Inc. MO

Employer identification number

43 1776877

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				
Total number of other employees paid over \$50,000 ▶				

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
N/A		
Total number of others receiving over \$50,000 for professional services ▶		

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
N/A		
Total number of other contractors receiving over \$50,000 for other services ▶		

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

Cat. No. 11285F

Schedule A (Form 990 or 990-EZ) 2006

Part III Statements About Activities (See page 2 of the instructions.)

Yes No

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 ✓

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)

a Sale, exchange, or leasing of property?

2a ✓

b Lending of money or other extension of credit?

2b ✓

c Furnishing of goods, services, or facilities?

2c ✓

d Payment of compensation (or payment or reimbursement of expenses) if more than \$1,000?

2d ✓

e Transfer of any part of its income or assets?

2e ✓

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a ✓

b Did the organization have a section 403(b) annuity plan for its employees?

3b ✓

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c ✓

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d ✓

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a ✓

b Did the organization make any taxable distributions under section 4963?

4b

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c

d Enter the total number of donor advised funds owned at the end of the tax year ▶

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶

-0-

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶

-0-

Schedule A
Farm of the Child Inc MO
Employer ID# 43-1776877

July 1, 2006 – June 30, 2007

Part III – Statements about activities

Line 3a – Did the organization make grants for scholarships, fellowships, student loans?

A scholarship for \$10,000 was awarded to Andrea McMerty-Brummer, the current Program Administrator of Farm of the Child, in order to support her pursuit of a Masters in Non-profit Management. Qualifications to receive the scholarship include: demonstrated financial need, commitment to the improvement of management in the non-profit sector, including but not limited to the management of Farm of the Child, and commitment to non-profit leadership in the developing world. As the Program Administrator for Farm of the Child, living in Honduras, and working for a modest salary, Ms. McMerty-Brummer meets all qualifications for the academic scholarship received.

