** PUBLIC DISCLOSURE COPY **

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Department of the Treasury

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service 2018 JUL 1, 2017 and ending JUN 30, A For the 2017 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change INVISIBLE CHILDREN, INC. Name change 54-2164338 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ (619)562-2799P.O. BOX 73295 termin-ated 4,800,966. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return WASHINGTON, DC 20056 H(a) Is this a group return Applica-F Name and address of principal officer: LISA DOUGAN Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X = 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.INVISIBLECHILDREN.COM **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Trust Association Other > L Year of formation: 2004 M State of legal domicile: DC Part I Summary Briefly describe the organization's mission or most significant activities: SEE PART III, LINE 1. Activities & Governance Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 7 Number of voting members of the governing body (Part VI, line 1a) 6 Number of independent voting members of the governing body (Part VI, line 1b) 6 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 13 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 4,770,987. 1,054,695. Contributions and grants (Part VIII, line 1h) Revenue 325,168. 29,500. Program service revenue (Part VIII, line 2g) 182. -386. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 3.942. 409. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,383,987. 4.800.510. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 912,789. 2,103,543. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Ō. Benefits paid to or for members (Part IX, column (A), line 4) 421,174. 647,528. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,872,172. 288,625 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,622,588. 4,623,243. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -238,601 177,267. Revenue less expenses. Subtract line 18 from line 12 Assets or Balances Beginning of Current Year **End of Year** 1,061,950. 388,885. Total assets (Part X, line 16) 556,282. 60,484. 21 Total liabilities (Part X, line 26) Net/ 328,401. 505,668. Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign LISA DOUGAN, CEO & SECRETARY Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Check Paid self-employed ▶ GELMAN, ROSENBERG & FREEDMAN Firm's EIN 52-1392008 Preparer Firm's name Firm's address $\sqrt{4550}$ MONTGOMERY AVE SUITE 650N Use Only Phone no. (301) 951-9090BETHESDA, MD 20814-2930

X Yes No

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	n 990 (2017) INVISIBLE CHILDREN, INC. 54-216433	8 Page 2
Pa	rt III Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission: OUR MISSION IS TO END VIOLENCE AND EXPLOITATION FACING OUR WORLD' MOST ISOLATED AND VULNERABLE COMMUNITIES.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	77
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expe	nses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expense	ses, and
	revenue, if any, for each program service reported.	9,500.
4a	(Code:) (Expenses \$ 3,826,543. including grants of \$ 2,103,543.) (Revenue \$ 2 PROTECTION: INVISIBLE CHILDREN FOCUSES ON THE PROTECTION OF CIVIL	
	FROM VIOLENCE THROUGH CONNECTING PEOPLE TO EACH OTHER AND THE OUT	
	WORLD, VIOLENCE PREVENTION, AND COMMUNITY RESILIENCE. OVER THE PA	
	DECADE, INVISIBLE CHILDREN HAS CONNECTED REMOTE COMMUNITIES IN CE	
	AFRICA THROUGH ITS EARLY WARNING SYSTEM, FACILITATING TWICE-DAILY	
	AMONG COMMUNITIES IN ONE OF THE WORLD'S MOST INSECURE PLACES, AND	THUS
	INCREASING THE SAFETY OF MORE THAN 300,000 PEOPLE. THOUSANDS OF	
	INCIDENTS OF ARMED GROUP ACTIVITY REPORTED BY THESE COMMUNITIES T	
	THE EARLY WARNING SYSTEM HAVE BEEN REPORTED BY INVISIBLE CHILDREN	
	CRISIS TRACKER IN NEAR-REAL TIME, AN INNOVATIVE CRISIS-MAPPING SO	CIAL
	WEB PLATFORM, ENSURING THE WORLD CANNOT IGNORE THE SAFETY ISSUES	FACING
	THESE VULNERABLE POPULATIONS. INVISIBLE CHILDREN HAS ALSO PROMOTE	D THE
4b	(Code:) (Expenses \$ 52,482 • including grants of \$) (Revenue \$	
	AWARENESS AND ADVOCACY: INVISIBLE CHILDREN FOCUSES ON THE ADVANCE	MENT
	OF EFFECTIVE POLICIES THROUGH MOBILIZING GROUPS OF PEOPLE TO SUPP	ORT
		HROUGH
	ENSURING THAT AFFECTED POPULATIONS ARE ABLE TO ADVOCATE FOR THE N	
	OF THEIR COMMUNITY. OVER THE LAST DECADE, MILLIONS OF AMERICANS A	
	INTERNATIONAL ADVOCATES HAVE RAISED THEIR VOICES ABOUT THE VIOLEN	
	OCCURRING IN CENTRAL AFRICA AND HAVE CALLED ON THEIR ELECTED OFFI	
	TO PLAY THEIR PART IN ENHANCING THE SAFETY OF AFFECTED COMMUNITIE	
		i D •
	BECAUSE OF THE DEDICATED WORK OF THESE ACTIVISTS, WE'VE SEEN OUR LEADERS TAKE A NUMBER OF SIGNIFICANT ACTIONS TO HELP END VIOLENCE	7 7 7 7
		AND
	SUPPORT THE RECOVERY OF AFFECTED COMMUNITIES.	
4c	(Code:) (Expenses \$	
		·
	Otherways and the (Paradite in Oakedale C)	
4 0	Other program services (Describe in Schedule O.)	
<u></u>	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ► 3,879,025.	
		rm 990 (2017

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		37	
	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		v	
	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		v	
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		-21
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
	complete Schedule G, Part III	19		77

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Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		054		x
00	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			Х
~=	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			 ₩
	of any of these persons? 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):			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			,,
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			ا ۔۔
	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		Х
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	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	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	X	<u> </u>
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		Х
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		Х
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	Х	
		•		-

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V								
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	11						
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0						
	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportal	ole gaming						
	(gambling) winnings to prize winners?			1c	Х				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,								
	filed for the calendar year ending with or within the year covered by this return	2a	6						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b					
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
financial account in a foreign country (such as a bank account, securities account, or other financial account)?									
b	If "Yes," enter the name of the foreign country: ▶ CENTRAL AFRICAN REP, CONG								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the								
	any contributions that were not tax deductible as charitable contributions?			6a		Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contribut								
	were not tax deductible?			6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	$Did the organization \ receive \ a \ payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ services \ a$	vices p	rovided to the payor?	7a		Х			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	uired						
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	t?	7e		X			
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 Fo			7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation fil	,_	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the	, N/A						
				8					
9	Sponsoring organizations maintaining donor advised funds.		37 / 3						
	Did the sponsoring organization make any taxable distributions under section 4966?			9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? \dots		N/A	9b					
10	Section 501(c)(7) organizations. Enter:	ا ہے!							
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:	ایدا							
а	Gross income from members or shareholders N/A	11a							
р	Gross income from other sources (Do not net amounts due or paid to other sources against								
40-	amounts due or received from them.)	11b		40-					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	l 1		12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		N/A	120					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a					
h	·								
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b							
^	Enter the amount of reserves on hand	13c							
				14a		Х			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b					
					990	(2017			

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	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 1b 6									
2	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?	2		Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6										
7a										
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
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?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
b	Other officers or key employees of the organization	15b	Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (vailab	ole							
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
	LISA DOUGAN - (619)562-2799									
	P.O. BOX 73295, WASHINGTON, DC 20056									

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

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) LISA DOUGAN	45.00	Ι.,		3.7				05 000	0	1 000
CEO & SECRETARY	1 00	Х		Х				85,000.	0.	1,800
(2) MICHAEL POFFENBERGER	1.00	X		х				0.	0.	_
BOARD CHAIR (3) ADAM FINCK	1.00	₽		Δ				0.	0.	0
SOARD MEMBER	1.00	X						0.	0.	0
(4) PAUL RONAN	1.00	<u> </u>						0.	0.	0
BOARD MEMBER (UNTIL 2/1/17)	1.00	x						0.	0.	0
(5) NOELLE WEST	1.00	1							•	
BOARD MEMBER		x						0.	0.	0
(6) MARISSA SACKLER	1.00	Ħ							2 -	
BOARD MEMBER		Х						0.	0.	0
(7) JOCELYN KELLY	1.00									
BOARD MEMBER		Х						0.	0.	0
(8) JASON RUSSELL	1.00									
BOARD MEMBER		Х						0.	0.	0
(9) ANDREA RAMSAY	45.00									
CFO & COO		<u> </u>		Х				77,026.	0.	1,978
		-								
		-								
		\vdash								
		_								
		<u> </u>								
		1	l	ı	l	l		1		

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(A) Name an		(B) Average	(C) Position						(D) Reportable	(E) Reportable		Es	(F) stimate	ed
, tumo un		hours per week (list any	box offi	, unle	ss pe	rson	than is bot or/trus	h an	compensation from the	compensation from related organizations	on d	an	nount other	of
		hours for related organizations	ustee or director	trustee		96	npensated		organization (W-2/1099-MISC)	(W-2/1099-MIS		fr org	om the anizati d relate	e ion
		below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					anizatio	
			_											
			_											
			_											
			_											
			_											
			_											
									162,026.		0.		3,7	70
1b Sub-total c Total from continua								>	0.		0.			0.
	viduals (including but n								162,026. eceived more than \$100	0,000 of reportab	0 • le		3,7	78. 0
	the organization												Yes	No
-	list any former officer, <i>mplete Schedule J for</i> s				-	-	-		highest compensated e			3		Х
•	-	•							her compensation from for such individual	•		4		Х
* *	d on line 1a receive or a anization? <i>If</i> "Yes," com	=				-		elat	ed organization or indivi			5		Х
Section B. Independent1 Complete this table		mpensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100.000 of con	npens	ation	from	
· · · · · · · · · · · · · · · · · · ·	port compensation for	· ·	-						n the organization's tax					
	(A) Name and business	address	N	INC	3				(B) Description of s	ervices	C	(Compe	nsatio	n
			ot li	mite	d to		_	sted	d above) who received m	nore than				
\$100,000 of comper	nsation from the organi	zation 🕨				(0							

Form **990** (2017)

Form 990 (20			CHILDREN,	INC.
Part VIII	Statement	of Revenue		

		Check if Schedule O cont	ains a resnonse	or note to any li	ne in this Part VIII			
		Officer if Ochedule O conti	airis a response	or note to arry ii	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under
						revenue	revenue	sections 512 - 514
र ह	1 2	Federated campaigns	1a					312 311
an		Membership dues			-			
اع ق					-			
fts.		Fundraising events			-			
ig ig		Related organizations		067 252				
Sir		Government grants (contribut	· -	067,353.				
e ti	f	All other contributions, gifts, gran	· I I	500 604				
듗된		similar amounts not included above	ve 1f	703,634.				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines	1a-1f: \$					
<u>ā č</u>	h	Total. Add lines 1a-1f			4,770,987.			
				Business Code				
Se	2 a	PROTECTION REVE	NUE	900099	29,500.	29,500.		
e ₹	b							
Sc	С	: <u></u>						
Program Service Revenue	d	I						
δg.	е	·						
₫	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f			29,500.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	70.			70.
	4	Income from investment of tax	x-exempt bond p	roceeds				
	5	Royalties	<u></u>	<u>,</u>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)	<u></u>	<u></u>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses		456.				
	С	Gain or (loss)		-456.				
	d	Net gain or (loss)			-456.			-456.
ஓ	8 a	Gross income from fundraising	g events (not					
nua		including \$	of					
ě		contributions reported on line	1c). See					
Other Reven		Part IV, line 18	а					
Ě	b	Less: direct expenses	b					
١	С	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	а					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gam	ing activities	<u></u>				
	10 a	Gross sales of inventory, less	returns					
		and allowances						
	b	Less: cost of goods sold	b					
ļ	С	Net income or (loss) from sale	s of inventory	<u> </u>				
		Miscellaneous Revenu	е	Business Code				400
	11 a	OTHER INCOME		900099	409.			409.
	b	·						
	С				-			
	d				400			
		Total. Add lines 11a-11d			409.	20 500	^	0.0
	12	Total revenue. See instructions.		<u></u>	4,800,510.	29,500.	0.	23.

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Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon	se or note to any line in	this Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations	12 102	12 102		
	and domestic governments. See Part IV, line 21	13,103.	13,103.		
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	2,090,440.	2,090,440.		
	individuals. See Part IV, lines 15 and 16	2,030,440.	2,030,440.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	197,165.	58,521.	122,633.	16,011.
6	trustees, and key employees	157,105.	30,321.	122,033.	10,011.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	385,743.	231,941.	153,416.	386.
8	Pension plan accruals and contributions (include	303,743.	231,341.	133,110.	300.
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	17,049.	11,270.	5,679.	100.
10	Payroll taxes	47,571.	25,747.	20,438.	1,386.
11	Fees for services (non-employees):	17,73714	2377174	20,1301	1,5000
	Management				
b		800.	800.		
	Legal Accounting	137,530.	67.	137,463.	
		13773301	· · ·	13771031	
	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	741,153.	621,006.	120,147.	
12	Advertising and promotion	5,605.	3,203.	1,673.	729.
13	Office expenses	77,343.	67,083.	10,102.	158.
14	Information technology	37,338.	19,536.	17,716.	86.
15	Royalties	,	,	,	
16	Occupancy	66,174.	8,973.	57,201.	
17	Travel	243,364.	201,339.	42,025.	
18	Payments of travel or entertainment expenses	•	•		
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	556.	463.	93.	
23	Insurance	24,231.	5,926.	18,270.	35.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.) EOUIPMENT	496,570.	496,570.		
a	REPAIRS & MAINTENANCE	22,347.	22,347.		
b	MERCHANT ACCT. FEES	12,429.	22,347.		12 /20
C	PAYROLL PROCESSING FEES	3,451.		3,451.	12,429.
d		3,451.	690.	1,438.	1,153.
	All other expenses	4,623,243.	3,879,025.	711,745.	32,473.
25	Total functional expenses. Add lines 1 through 24e	4,043,443.	3,013,043.	111,140.	34,413.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	70,017.	69,549.	0.	468.
	Check here X if following SOP 98-2 (ASC 958-720)	10,011.	03,343.	U • [400.

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Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			137,397.	1	514,943.
	2	Savings and temporary cash investments		200,911.	2	23,392.	
	3	Pledges and grants receivable, net				3	454,886.
	4	Accounts receivable, net		30,300.	4	12,989.	
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensation					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	n 4958(d	c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501	(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr).	. Compl	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			12,848.	9	43,323.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	263,212.			_
	b	Less: accumulated depreciation	10b	263,212.	1,012.	10c	0.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			6,417.	15	12,417.
	16	Total assets. Add lines 1 through 15 (must equ	al line 3	4)	388,885.	16	1,061,950.
	17	Accounts payable and accrued expenses			30,984.	17	556,282.
	18	Grants payable	00 500	18			
	19	Deferred revenue			29,500.	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and former		· · · · · · · · · · · · · · · · · · ·			
ij		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	s 17-24)	. Complete Part X of			
		Schedule D			60 404	25	EEC 202
	26	Total liabilities. Add lines 17 through 25			60,484.	26	556,282.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ 🛕 and			
ces		complete lines 27 through 29, and lines 33 an			225 602		165 606
lan	27	Unrestricted net assets			325,683.	27	465,696. 39,972.
Ва	28	Temporarily restricted net assets			4,710.	28	33,314.
ınd	29					29	
r F		Organizations that do not follow SFAS 117 (A					
S O		and complete lines 30 through 34.				-00	
set	30	Capital stock or trust principal, or current funds			30		
As	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			328,401.	32	505 660
_	33	Total net assets or fund balances			388,885.	33	505,668.
	34	Total liabilities and net assets/fund balances			300,003.	34	1,061,950.

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Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)		1,80				
2	Total expenses (must equal Part IX, column (A), line 25)		1,62	<u>3,∠</u>	43.		
3	Revenue less expenses. Subtract line 2 from line 1	3			67.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	32	8,4	01.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10	50	5,6	<u>68.</u>		
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				Ш		
1							
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a					
b	Were the organization's financial statements audited by an independent accountant?		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,					
	consolidated basis, or both:						
	Separate basis X Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit					
	Act and OMB Circular A-133?	-	За	Х			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х			
			Form	990	(2017)		

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization INVISIBLE CHILDREN. INC. 54-2164338 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 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.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

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		· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Gifts, grants, contributions, and	, ,	` '	` '	`,	` '	.,	
	membership fees received. (Do not							
	include any "unusual grants.")	6,203,623.	2,172,959.	1,285,771.	1,054,695.	4,770,987.	15,488,035.	
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	6,203,623.	2,172,959.	1,285,771.	1,054,695.	4,770,987.	15,488,035.	
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)						2,308,309.	
	Public support. Subtract line 5 from line 4.						13,179,726.	
	ction B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Amounts from line 4	6,203,623.	2,172,959.	1,285,771.	1,054,695.	4,770,987.	15,488,035.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	4,222.	841.		182.	70.	5,315.	
_	and income from similar sources	4,222.	041.		102.	70•	3,313.	
9	Net income from unrelated business							
	activities, whether or not the							
10	business is regularly carried on Other income. Do not include gain							
10	or loss from the sale of capital							
	assets (Explain in Part VI.)		11,482.	5,240.	3,942.	409.	21,073.	
11	Total support. Add lines 7 through 10		22,1020	3,2101	0,3121	1000	15,514,423.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 1	,327,529.	
	First five years. If the Form 990 is for	•	,				, - ,	
	organization, check this box and stor				-		>	
Sec	ction C. Computation of Publ						·	
14	Public support percentage for 2017 (line 6, column (f) d	ivided by line 11, c	olumn (f))		14	84.95 %	
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	86.43 %	
	33 1/3% support test - 2017. If the					nore, check this bo	x and	
	stop here. The organization qualifies	as a publicly supp	orted organization				►X	
b	33 1/3% support test - 2016. If the	organization did no	ot check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box	
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶□	
17a	10% -facts-and-circumstances tes	•					•	
	and if the organization meets the "fac							
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a _l	publicly supported	l organization		▶□	
b	10% -facts-and-circumstances tes	-						
	more, and if the organization meets the							
	organization meets the "facts-and-cire						>	
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2017

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

(Complete only if you checked the box on line 10 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	, 1	,				
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include 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						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	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.)						
	ction B. Total Support		•		•	•	
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	. ,	, ,				,,
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties, and income from similar sources						
ŀ	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)						
	First five years. If the Form 990 is for	r the organization	s first, second this	rd, fourth, or fifth t	ax vear as a section	n 501(c)(3) organi	zation.
•		-			•		
Se	ction C. Computation of Publ						
	Public support percentage for 2017 (column (f))		15	%
	Public support percentage from 2016					16	%
	ction D. Computation of Inve					<u> </u>	
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
	a 33 1/3% support tests - 2017. If the					33 1/3%, and line	
	more than 33 1/3%, check this box a						
ŀ	33 1/3% support tests - 2016. If the						
-	line 18 is not more than 33 1/3%, che						
20	Private foundation If the organization						

19378__1

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 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.
- 2 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 12a or 12b 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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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 section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ).
- **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 9a) 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 9a) 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 section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b 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		
3с		
4a		
та		
4b		
4c		
5a		
5b		
5с		
6		
7		
8		
9a		
9b		
9c		
90		
10a		
10b		

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	e organization accepted a gift or contribution from any of the following persons?			
а	A pers	on who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below,	the governing body of a supported organization?	11a		
b	A famil	y member of a person described in (a) above?	11b		
		controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B	. Type I Supporting Organizations			
		,		Yes	No
1		e directors, trustees, or membership of one or more supported organizations have the power to			
	-	ly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	-	ar? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		lled the organization's activities. If the organization had more than one supported organization,			
		pe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
_		rations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported			
	U	zation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800		ised, or controlled the supporting organization.	2		
Sec	lion C	. Type II Supporting Organizations		V	Na
4	Mara	majority of the expanization's divertors by twistons during the toy year also a majority of the divertors		Yes	No
1		majority of the organization's directors or trustees during the tax year also a majority of the directors			
		tees of each of the organization's supported organization(s)? If "No," describe in Part VI how control agement of the supporting organization was vested in the same persons that controlled or managed			
		oported organization(s).	1		
Sec		. All Type III Supporting Organizations			
		· / · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the	e organization provide to each of its supported organizations, by the last day of the fifth month of the			110
		zation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organiz	zation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were a	iny of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organiz	zation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the org	anization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	son of the relationship described in (2), did the organization's supported organizations have a			
	signific	ant voice in the organization's investment policies and in directing the use of the organization's			
		e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		ted organizations played in this regard.	3		
-		. Type III Functionally Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions).	•		
a		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.		-1	
с 2		Γhe organization supported a governmental entity. <i>Describe in Part VI how you supported a government entity (see inst</i> es Test. Answer (a) and (b) below.	ructions	Yes	No
a		ostantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
а		opported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		e organization was responsive to those supported organizations, and how the organization determined			
		ese activities constituted substantially all of its activities.	2a		
b		e activities described in (a) constitute activities that, but for the organization's involvement, one or more			
		organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		s for the organization's position that its supported organization(s) would have engaged in these			
		es but for the organization's involvement.	2b		
3		of Supported Organizations. Answer (a) and (b) below.			
а	Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustee	s of each of the supported organizations? Provide details in Part VI.	За		
b	Did the	organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its s	upported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	izations			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. A					
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ctions A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion 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):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	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				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
5	Income tax imposed in prior year	5				
6	Distributable Amount. Subtract line 5 from line 4, unless subject to					
	emergency temporary reduction (see instructions)	6				
7	Check here if the current year is the organization's first as a non-functional	ly integrate	ed Type III supporting org	ganization (see		
	instructions)					

Schedule A (Form 990 or 990-EZ) 2017

Par	rt V │ Type III Non-Functionally Integrated 50	9(a)(3) Supporting Org	anizations _(continued)	
Secti	ion D - Distributions		•	Current Year
1	Amounts paid to supported organizations to accomplish ex			
2	Amounts paid to perform activity that directly furthers exen	npt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpo	าร		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	the organization is responsive	е	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

INVISIBLE CHILDREN, INC. 54-2164338

Organization type (check one): Filers of: Section: X = 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______
\$ _ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		ss	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

INVISIBLE CHILDREN, INC.

54-2164338

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		_				
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		_				
		<u> </u>				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		_				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		<u> </u>				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		_				
		 \$				
3453 11-01-	-17		990, 990-EZ, or 990-PF) (20			

Employer identification number

Name of organization

TMV/TQT	BLE CHILDREN, INC.			54-2164338	
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	columns (a) through (e) and the follo	wing line entry. For organizatior	(10) that total more than \$1,000 for	
	Use duplicate copies of Part III if addition		Litter tins line. Once		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
-		(e) Transfer of gif			
	Transferee's name, address, a			nsferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
Part I	(S). dipose of gift	(o) 000 of gift	(a) Desc	p.s.c. oon girt to flotu	
:					
		(e) Transfer of gif	t		
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gif	t		
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee	
-					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
.					
-		(e) Transfer of gif	 t		
	Transferee's name, address, a			nsferor to transferee	
.					
-					

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

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

Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Provide a description of the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 If Yes, "describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 5 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 5 There the amount of the filing organization is under the amount of the filing organization for section 527 exempt function activities 5 There the amount of the filing organization funds contributed to other organizations for section 527 exempt function activities 5 There the amount of the filing organization funds contributed to other organizations for section 527 exempt function activities 5 There the amount of the filing organization funds contributed to other organization for section 527 exempt function activities 6 There are amount of the filing organization funds funds for the filing organization to which the filing organization funds contributions received fund or a political orga
INVISIBLE CHILDREN, INC. 54-2164338 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures 3 Volunteer hours for political campaign activities Part I-B Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 4 Was a correction made? 54 Fart I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b 4 Did the filing organization file Form 1120-POL for this year? 5 Inter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filling organization made payments. For each organization listed, enter the amount paid from the filing organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political campaign activity expenditures
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(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political
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funds. If none, enter -0- promptly and directly
delivered to a separate
political organization.
If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017 $$ INVIS			164338 Page 2			
Part II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and fi	led Form 5768 (el	ection under			
Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). Check if the filing organization checked box A and "limited control" provisions apply.						
Limits on Lob	bying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to influence pub	olic opinion (grass roots lobbying)	65.				
b Total lobbying expenditures to influence a le	gislative body (direct lobbying)	965.				
c Total lobbying expenditures (add lines 1a an	d 1b)	1,030.				
d Other exempt purpose expenditures	4,622,213.					
e Total exempt purpose expenditures (add line	4,623,243.					
f Lobbying nontaxable amount. Enter the amo	381,162.					
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:					
Not over \$500,000	20% of the amount on line 1e.					
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.					
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.					
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.					
Over \$17,000,000	\$1,000,000.					
g Grassroots nontaxable amount (enter 25% of	of line 1f)	95,291.				
h Subtract line 1g from line 1a. If zero or less,		0.				
i Subtract line 1f from line 1c. If zero or less, e	enter -0-	0.				
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720						
reporting section 4911 tax for this year?	······		Yes No			
	4-Year Averaging Period Under section 501(h) a section 501(h) election do not have to complete all e the separate instructions for lines 2a through 2f.)	of the five columns be	elow.			
Lob	bying Expenditures During 4-Year Averaging Period					

	ood the departure mentalities and adjust any						
	Lobbying Expen	ditures During 4-Yea	ar Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total		
2a Lobbying nontaxable amount	319,224.	245,993.	231,129.	381,162.	1,177,508.		
b Lobbying ceiling amount (150% of line 2a, column(e))					1,766,262.		
c Total lobbying expenditures	3,038.	2,061.	966.	1,030.	7,095.		
d Grassroots nontaxable amount	79,806.	61,498.	57,782.	95,291.	294,377.		
e Grassroots ceiling amount (150% of line 2d, column (e))					441,566.		
f Grassroots lobbying expenditures	2,391.	1,126.	552.	65.	4,134.		

Schedule C (Form 990 or 990-EZ) 2017

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

	r each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		1)	(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
a	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?				
,	Direct contact with legislators, their staffs, government officials, or a legislative body?				
9 h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
i	Total. Add lines 1c through 1i				
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
•					
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2 3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ne prior year on 501(c)	? 3 (5), or se		ne 3, is
2 3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year on 501(c) "No," Of	? 3 (5), or se R (b) Par		ne 3, i
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2 3 Par 1 2 a b c	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, i:
2 3 Par 1 2 a b c 3 4	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section 162(e) dues are described by the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3		ne 3, i
2 3 Par 1 2 a b c 3 4	Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded section 162(e) dues are described by the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3		ne 3, i
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2 3 Par 1 2 a b c 3 4	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and perspenditure next year? Taxable amount of lobbying and political expenditures (see instructions) **EXEMPTION OF TAXABLE AGREEMENT	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i
2 3 Par 1 2 a b c 3 4	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i:
2 3 Par 1 2 a b c 3 4 5 Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i:
2 3 Par 1 2 a b c 3 4 5 Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i
2 3 Par 1 2 a b c 3 4 5 Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i:
2 3 Par 1 2 a b c 3 4 5 Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i:
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2 3 Par 1 2 a b c 3 4 5 Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c) "No," OF	? 3 (5), or se R (b) Par 1 2a 2b 2c 3	t III-A, lir	ne 3, i:

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INVISIBLE CHILDREN TNC **Employer identification number** 54-2164338

Pai	t I Organizations Maintaining Donor Advise		ther Similar Fund	ds or Accou	Ints Complete if the
ı aı			tilei Sililliai i uli	us of Accou	into:Complete il trie
	organization answered "Yes" on Form 990, Part IV, lin		advised funds	/b) Euro	ds and other accounts
		(a) Donor	auviseu iurius	(b) i di	ds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that the as	sets held in donor adv	vised funds	
	are the organization's property, subject to the organization's $% \left(1\right) =\left(1\right) \left(1$	exclusive legal co	ontrol?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing	that grant funds can b	oe used only	
	for charitable purposes and not for the benefit of the donor of	or donor advisor,	or for any other purpos	se conferring	
	impermissible private benefit?				
Pai	t II Conservation Easements. Complete if the org	ganization answei	ed "Yes" on Form 990), Part IV, line 7	
1	Purpose(s) of conservation easements held by the organizati	ion (check all that	apply).		
	Preservation of land for public use (e.g., recreation or e		\prod Preservation of a hi	storically impor	tant land area
	Protection of natural habitat	, L	Preservation of a ce		
	Preservation of open space		_ , , , , , , , , , , , , , , , , , , ,		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation	contribution in the for	m of a conserv	ation easement on the last
_	day of the tax year.	ned conservation	CONTRIBUTION IN THE ION	III OI a CONSEIV	Held at the End of the Tax Year
_	•			2a	Tierd at the End of the Tax Tear
a	Total number of conservation easements				
b					
С.	Number of conservation easements on a certified historic str				
d	Number of conservation easements included in (c) acquired a	•		l	
	listed in the National Register				
3	Number of conservation easements modified, transferred, rel	leased, extinguisl	ned, or terminated by t	the organization	n during the tax
	year				
4	Number of states where property subject to conservation ea	sement is located		_	
5	Does the organization have a written policy regarding the per	riodic monitoring,	inspection, handling of	of	
	violations, and enforcement of the conservation easements it	t holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violat	ions, and enforcing co	onservation eas	ements during the year
	>				
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations,	and enforcing conser	vation easeme	nts during the year
	▶ \$				
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requ	uirements of section 17	70(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservati				
	include, if applicable, the text of the footnote to the organizat		· · · · · · · · · · · · · · · · · · ·		
	conservation easements.			Ü	Ğ
Pai	t III Organizations Maintaining Collections o	f Art, Historic	al Treasures, or	Other Simil	ar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line	8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to re	oort in its revenue stat	ement and bala	ance sheet works of art,
	historical treasures, or other similar assets held for public exh	· ·			
	the text of the footnote to its financial statements that descri		,	·	,, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS		in its revenue stateme	ent and balance	sheet works of art_historical
-	treasures, or other similar assets held for public exhibition, ed				
	relating to these items:	dadation, or reset		Jabilo dei vide, i	stovide the following amounts
	-			.	\$
	(i) Revenue included on Form 990, Part VIII, line 1			_	\$ \$
^			imilar appata for financ		
2	If the organization received or held works of art, historical tre			Jiai gairi, provid	e
	the following amounts required to be reported under SFAS 1		~	_	Φ.
a	Revenue included on Form 990, Part VIII, line 1				\$
b	Assets included in Form 990, Part X				\$

732051 10-09-17

Schedule D (Form 990) 2017

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

Par	t III Organizations Maintaining C	Collections of Ar	t, Hist	orical Tr	easures, d	or Othe	r Similar A	ssets(cont	inued)	
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items									
	(check all that apply):									
а	Public exhibition	d		oan or exc	hange progra	ams				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	n how the	ey further t	he organizati	on's exen	npt purpose in	n Part XIII.		
5	During the year, did the organization solicit o	•		-	_					
	to be sold to raise funds rather than to be ma				•			Yes		□No
Par	t IV Escrow and Custodial Arran							t IV, line 9, o	or	
	reported an amount on Form 990, Pa	-		Ū						
1a	Is the organization an agent, trustee, custod	ian or other intermed	iary for c	contribution	ns or other as	sets not i	ncluded			
	on Form 990, Part X?							Yes		□No
b	If "Yes," explain the arrangement in Part XIII							•		
	, ,	•	Ü					Amou	nt	
С	Beginning balance						1c			
	Additions during the year									
	Distributions during the year									
f	Ending balance									
	Did the organization include an amount on F							Yes		No
	If "Yes," explain the arrangement in Part XIII.						•	•		Ī
Par										_
	·	(a) Current year		ior year	1		d) Three years b	back (e) For	ır years	back
1a	Beginning of year balance	(a) carrone year	(2)	ioi youi	(6)	, , , , , , , , , , , , , , , , , , ,	u,	(6) / 5	ar youro	- Duon
	Contributions									
	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
-	·									
_	and programs									
	Administrative expenses									
_	End of year balance	ront voor and halana	o /lino 1 o	, column ()\ bold oo:					
2	Provide the estimated percentage of the curr			j, column (a	a)) rieid as.					
	Board designated or quasi-endowment		_%							
	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c sho									
За	Are there endowment funds not in the posse	ession of the organiza	ation tha	t are neid a	ind administe	erea for th	e organization	1		
	by:							- m	Yes	No
	(i) unrelated organizations								1	
	(ii) related organizations								1	
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the		wment f	unds.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere				1					
	Description of property	(a) Cost or ot			or other		cumulated	(d) Bo	ok valu	е
		basis (investm	nent)	basis	(other)	dep	reciation			
	Land									
	Buildings									
С	Leasehold improvements						<u> </u>			
d	Equipment			26	3,212.	2	63,212.			0.
	Other									
Total	. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X, colum	n (B), line 1	10c.)		•	1		0.

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 INVISIBLE C	HILDREN, I.	NC.	54	-2164338 Page 3
Part VII Investments - Other Securities.				
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of v	/aluation: Cost or end	d-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part I\	/, line 11c. See Form 990,	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of v	/aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990. Part I\	/. line 11d. See Form 990.	Part X. line 15.	
	Description	,	,	(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)			
Part X Other Liabilities.	. 13.)			
Complete if the organization answered "Yes"	on Form 990 Part IV	/ line 11e or 11f See For	m 000 Part V lina 25	
(a) Description of lightith.	on romi 990, Part N	(b) Book value	111 990, Fart X, IIIIe 23	
		(b) Book value	-	
(1) Federal income taxes			-	
(2)			-	
(3)			-	
<u>(4)</u>			-	
(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 X

Schedule D (Form 990) 2017

Par	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.							
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.								
1	Total revenue, gains, and other support per audited financial statements			1	4,876,051.			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments		-1 101					
b	Donated services and use of facilities		71,196.					
С	Recoveries of prior year grants		1 000 000					
d	Other (Describe in Part XIII.)	2d	1,822,033.		4 000 000			
е	Add lines 2a through 2d			2e	1,893,229.			
3	Subtract line 2e from line 1			3	2,982,822.			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:							
	Investment expenses not included on Form 990, Part VIII, line 7b		1 01 5 600					
	Other (Describe in Part XIII.)	. 4b	1,817,688.		1 017 600			
С	Add lines 4a and 4b			4c	1,817,688.			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	4,800,510.			
Pai	T XII Reconciliation of Expenses per Audited Financial Staten		itn Expenses per	Retu	rn.			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a				/ 20E /12			
1	Total expenses and losses per audited financial statements			1	4,395,413.			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ما	71,196.					
_	Donated services and use of facilities		11,190.					
b	Prior year adjustments							
	Other losses		1,518,662.					
d	Other (Describe in Part XIII.)			0-	1,589,858.			
_	Add lines 2a through 2d			2e 3	2,805,555.			
3	Subtract line 2e from line 1 Amounts included on Form 900, Part IV, line 25, but not on line 1:			3	2,005,555			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ا مه ا						
	Investment expenses not included on Form 990, Part VIII, line 7b		1,817,688.					
	Other (Describe in Part XIII.) Add lines 4a and 4b			4c	1,817,688.			
5				5	4,623,243.			
	t XIII Supplemental Information.				1,023,223			
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV lines	1h and 2h: Part V line	4· Part	X line 2: Part XI			
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ad-			T, T UIT	λ, πιο Σ, Γαιτ λί,			
D 3 T	OM V TIND O							
PAF	RT X, LINE 2:							
FOE	R THE YEARS ENDED JUNE 30, 2018 AND 2017,	THE C	RGANIZATION	HA	S			
DOC	CUMENTED ITS CONSIDERATION OF FASB ASC 740)-10,	INCOME TAXE	S, S	ГНАТ			
PRO	OVIDES GUIDANCE FOR REPORTING UNCERTAINTY	TN TN	ICOME TAXES	AND	HAS			
DET	TERMINED THAT NO MATERIAL UNCERTAIN TAX PO	SITIC	NS QUALIFY	FOR	EITHER			
REC	COGNITION OR DISCLOSURE IN THE CONSOLIDATE	ED FIN	ANCIAL STAT	EME	NTS.			
PAF	RT XI, LINE 2D - OTHER ADJUSTMENTS:							
					1 000 000			
	VENUE OF RELATED ORGANIZATIONS INCLUDED IN				1,822,033.			
COI	SOLIDATED AUDIT REPORT BUT EXCLUDED FOR I	NVISI	BLE					
CH	LDREN, INC. FORM 990 REPORTING.							

Schedule D (Form 990) 2017 INVISIBLE CHILDREN, INC. Part XIII Supplemental Information (continued)	54-2164338 Page 5
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
LOSS ON DISPOSAL OF FIXED ASSETS REPORTED AS AN	
EXPENSE IN THE AUDIT REPORT AND REPORTED ON FORM 990,	
PART VIII, LINE 7C.	
GRANTS FROM INVISIBLE CHILDREN, INC. TO RELATED	1,818,144.
ORGANIZATIONS, ELIMINATED IN THE CONSOLIDATED AUDIT	
REPORT, BUT REPORTED AS A GRANT EXPENSE ON PART IX, LINE 3.	
TOTAL TO SCHEDULE D, PART XI, LINE 4B	1,817,688.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
EXPENSES OF RELATED ORGANIZATIONS INCLUDED IN THE	1,518,662.
CONSOLIDATED AUDIT REPORT BUT EXCLUDED FOR INVISIBLE	
CHILDREN, INC. FORM 990 REPORTING.	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
LOSS ON DISPOSAL OF FIXED ASSETS REPORTED AS AN	-456.
EXPENSE IN THE AUDIT REPORT AND REPORTED ON FORM 990,	
PART VIII, LINE 7C.	
GRANTS FROM INVISIBLE CHILDREN, INC. TO RELATED	1,818,144.
ORGANIZATIONS, ELIMINATED IN THE CONSOLIDATED AUDIT	
REPORT, BUT REPORTED AS A GRANT EXPENSE ON PART IX, LINE 3.	
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,817,688.

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Name of the organization

Employer identification number

	9					. ,	
IN	VISIBLE CHILD	REN, INC				54-216433	8
				tside the United States. Comple	ete if the organ		
	Form 990, Part IV						
1				ds to substantiate the amount of its gra			
	the grantees' eligibility to	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	stance? X	Yes No
2	For grantmakers Desc	rihe in Part V the	organization's	procedures for monitoring the use of it	e arante and o	ther assistance outs	side the
_	United States.	TIDE IIII AIT V III	organization 3	procedures for mornioning the use of it	o granto and o	inci assistance out	side tile
3		he following Parl	t I, line 3 table ca	an be duplicated if additional space is i	needed.)		
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region	(e) If activ	vity listed in (d)	(f) Total
		offices	employees, agents, and independent	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
		in the region	independent contractors	gram services, investments, grants to		specific type (s) in the region	investments
			in the region	recipients located in the region)	of service	(s) in the region	in the region
				CDANIES TO DESTRICT			
מזזי	-SAHARAN AFRICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION			2 000 440
006	-SANAKAN AFRICA	0	· · · · · ·		PROTECTION:	тик	2,090,440.
						N FOCUSES ON	
					PROTECTION		
SUB-	-SAHARAN AFRICA	0	8	PROGRAM SERVICE ACTIVITIES	CONNECTING		560,625.
2 -	Cub total	0	8				2,651,065.
	Sub-total Total from continuation	<u> </u>	· °				2,031,005.
D	sheets to Part I	0	0				0.
c	Totals (add lines 3a		, i				<u> </u>
٠	and 2h)	۱ ،	٩				2 651 065

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2017

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			PROVIDES SUPPORT TO					
			INVISIBLE CHILDREN'S					
		SUB-SAHARAN	USAID-FUNDED					
		AFRICA	COMMUNITY RESILIENCE	20,665.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
		AFRICA	PROTECTION	673 079.	WIRE TRANSFER	105,527.		
				, , , , , , ,				
		SUB-SAHARAN						
		AFRICA	PROTECTION	1,039,538.	WIRE TRANSFER	0.		
		SUB-SAHARAN						
		AFRICA	PROTECTION	234 151	WIRE TRANSFER	0.		
			THOTEGIES .	231,131.	WIRE HUMBIEN	· .		
0.51.11.1								
			recognized as charities by the ction 501(c)(3) equivalency letter					4

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance SUB-SAHARAN AFRICA 16,828. WIRE TRANSFER PROTECTION 2 0.

Page 4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization		
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign		
	Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign		
	Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"		
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To		
	Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a		
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,		
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund		
	(see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"		
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain		
	Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If		
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see		
	Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2017

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF ITS GRANTS AND OTHER ASSISTANCE OUTSIDE THE UNITED STATES.

ALL FUNDS ARE SENT THROUGH WIRE TRANSFERS DIRECTLY TO THE ACCOUNTS HELD

BY INVISIBLE CHILDREN'S ("IC") PROGRAM PARTNERS (NGO'S BASED IN CENTRAL

AND EAST AFRICA). THE TRANSFERS ARE SENT ONCE A MONTH TO COVER PROGRAM

NEEDS FOR THE CURRENT MONTH.

MONTHLY TRANSFERS ARE DIRECTLY RELATED TO THE ANNUAL BUDGET SUBMITTED BY

IC'S PROGRAM PARTNERS AND APPROVED BY IC'S BOARD OF DIRECTORS AS PART OF

IC'S ANNUAL BUDGET.

WIRE TRANSFERS ARE MADE ON THE 8TH DAY OF EVERY MONTH FOLLOWING THE
SUBMISSION OF A WIRE REQUEST DOCUMENT FROM IC'S PROGRAM PARTNERS. UPON
RECEIPT OF THE REQUEST DOCUMENT, THE REPORTS ARE GIVEN TO IC'S CHIEF
FINANCE AND OPERATIONS OFFICER AND DIRECTOR OF INTERNATIONAL PROGRAMS TO
REVIEW ANY ADDITIONAL FUNDING REQUESTS OR BUDGET REVISIONS. THE AMOUNT IS
COMPARED TO THE PRE-APPROVED BUDGET FOR THE MONTH AND EXPLANATIONS ARE
REQUIRED FOR ALL VARIANCES/CHANGES IN THE FUNDING NEEDS. UPON
SATISFACTION AND APPROVAL OF THE FUNDS REQUESTED, A WIRE IS RELEASED TO
SUPPORT PROGRAM ACTIVITIES FOR THE MONTH.

A CONFIRMATION EMAIL, COMMUNICATING THE DETAIL OF THE WIRE, IS SENT TO

THE PROGRAM PARTNERS' FINANCE AND MANAGEMENT TEAMS.

IN ADDITION, TO ENSURE FINANCIAL OVERSIGHT, PROGRAM PARTNERS SEND MONTHLY

Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

AND YEAR-TO-DATE BUDGET VS. ACTUAL REPORTS AS WELL AS MONTHLY ACTIVITY

REPORTS TO ENSURE PROPOSED PROGRAM DELIVERABLES ARE BEING ACHIEVED. THESE

REPORTS ARE REVIEWED TO ASSURE SPENDING IS IN LINE WITH BUDGET

EXPECTATIONS.

IC PAYS FULL-TIME EMPLOYEES AND CONSULTANTS TO WORK ON THE GROUND WITH

PROGRAM PARTNERS IN CENTRAL AND EAST AFRICA AS AN ADDITIONAL MONITORING

PROCESS.

ORGANIZATION'S WISHING TO PARTNER WITH INVISIBLE CHILDREN "IC" AS A GRANTEE SUBMIT A PROPOSAL OR STATEMENT OF WORK AND A DETAILED BUDGET TO IC FOR THE WORK TO BE PERFORMED. IC EVALUATES THAT PROPOSAL FOR ALIGNMENT WITH THE GOALS OF THE INITIATIVE BEING PURSUED AND FOR COST REASONABLENESS. ONCE IC DETERMINES THAT THE PARTNERSHIP WILL ENHANCE THE GOALS OF A CERTAIN INITIATIVE, THAT THE ORGANIZATION HAS THE OPERATIONAL CAPACITY TO SUCCESSFULLY IMPLEMENT THE PROPOSAL, AND THAT THE THE COSTS PROPOSED ARE REASONABLE AND IN COMPLIANCE WITH IC, DONOR, AND OTHER APPLICABLE RULES AND REGULATIONS, IC APPROVES THE GRANT TO THE PARTNER. DEPENDING ON THE NATURE OF THE ORGANIZATION OR INITIATIVE, IC DETERMINES WHETHER THE GRANT WILL BE DISTRIBUTED AS A FIXED AMOUNT OR AS A COST REIMBURSABLE GRANT. THROUGHOUT THE PERIOD OF PERFORMANCE OF THE GRANT, IC CLOSELY REVIEWS THE PERFORMANCE OF THE GRANTEE THROUGH MEETINGS, PHONE CONVERSATIONS, WRITTEN REPORTS, AND JOINT PROJECT ACTIVITIES. IC REVIEWS THE DETERMINED DELIVERABLES REQUIRED FOR PAYMENT (DEPENDENT ON THE TYPE OF GRANT MECHANISM CHOSEN) ONCE THEY ARE SUBMITTED BY THE GRANTEE. UPON DETERMINING THAT THE DELIVERABLES SATISFY THE TERMS OF THE AGREEMENT WITH THE GRANTEE, APPROVAL OF THE PAYMENT IS GIVEN.

Schedule F (Form 990) 2017 Part V | Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3, COLUMN (E):

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROTECTION: THE ORGANIZATION FOCUSES ON PROTECTION THROUGH CONNECTING PEOPLE TO EACH OTHER AND THE OUTSIDE WORLD, VIOLENCE PREVENTION, AND COMMUNITY RESILIENCE.

PART II, COLUMN (D):

REGION: SUB-SAHARAN AFRICA

USAID-FUNDED COMMUNITY RESILIENCE IN CENTRAL AFRICA PROJECT BY CONTRIBUTING TO COMMUNITY PROTECTION INITIATIVES, REGIONAL ANALYSIS, AND COMMUNITY SENSITIZATION ON THE LINK BETWEEN CONSERVATION AND PROTECTION IN GARAMBA NATIONAL PARK IN DEMOCRATIC REPUBLIC OF CONGO AND CHINKO NATURE RESERVE IN CENTRAL AFRICAN REPUBLIC.

(D) PURPOSE OF GRANT: PROVIDES SUPPORT TO INVISIBLE CHILDREN'S

SCHEDULE I (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" on Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **Open to Public**

Inspection

Name of the organization **Employer identification number** 54-2164338 INVISIBLE CHILDREN, INC. Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) AFRICAN WILDLIFE AFRICAN WILDLIFE FOUNDATION FOUNDATION (AWF) PROVIDES 1100 NEW JERSEY AVE SE, SUITE 900 SUPPORT TO INVISIBLE WASHINGTON, DC 20003 CHILDREN'S COMMUNITY 52-0781390 501(C)(3) 13,103. 0 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

40

Enter total number of other organizations listed in the line 1 table

Part III can be duplicated if additional space is needed.	[433]	())	len a le c		(0.5)
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, columr	n (b); and any other a	dditional information.	
PART I, LINE 2:					
ORGANIZATION'S WISHING TO PARTNER	WITH INV	ISIBLE CHI	LDREN "IC"	AS A GRANTEE	
SUBMIT A PROPOSAL OR STATEMENT OF	WORK AND	A DETAILE	ED BUDGET T	O IC FOR THE	
WORK TO BE PERFORMED. IC EVALUATES	THAT PR	OPOSAL FOR	R ALIGNMENT	WITH THE	
GOALS OF THE INITIATIVE BEING PURS	UED AND	FOR COST F	REASONABLEN	ESS. UNCE IC	
DETERMINES THAT THE PARTNERSHIP WI	LL ENHAN	CE THE GOA	ALS OF A CE	RTAIN	
INITIATIVE, THAT THE ORGANIZATION	HAS THE	OPERATIONA	AL CAPACITY	TO	
SUCCESSFULLY IMPLEMENT THE PROPOSA	L, AND T	HAT THE CO	STS PROPOS	ED ARE	
REASONABLE AND IN COMPLIANCE WITH	IC, DONO	R, AND OTH	HER APPLICA	BLE RULES AND	

REGULATIONS, IC APPROVES THE GRANT TO THE PARTNER. DEPENDING ON THE NATURE
OF THE ORGANIZATION OR INITIATIVE, IC DETERMINES WHETHER THE GRANT WILL BE
DISTRIBUTED AS A FIXED AMOUNT OR AS A COST REIMBURSABLE GRANT. THROUGHOUT
THE PERIOD OF PERFORMANCE OF THE GRANT, IC CLOSELY REVIEWS THE PERFORMANCE
OF THE GRANTEE THROUGH MEETINGS, PHONE CONVERSATIONS, WRITTEN REPORTS, AND
JOINT PROJECT ACTIVITIES. IC REVIEWS THE DETERMINED DELIVERABLES REQUIRED
FOR PAYMENT (DEPENDENT ON THE TYPE OF GRANT MECHANISM CHOSEN) ONCE THEY ARE
SUBMITTED BY THE GRANTEE. UPON DETERMINING THAT THE DELIVERABLES SATISFY
THE TERMS OF THE AGREEMENT WITH THE GRANTEE, APPROVAL OF THE PAYMENT IS
GIVEN.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: AFRICAN WILDLIFE FOUNDATION
(H) PURPOSE OF GRANT OR ASSISTANCE: AFRICAN WILDLIFE FOUNDATION (AWF)
PROVIDES SUPPORT TO INVISIBLE CHILDREN'S COMMUNITY RESILIENCE IN CENTRAL
AFRICA PROJECT BY CONTRIBUTING TO COMMUNITY PROTECTION INITIATIVES AND
COMMUNITY SENSITIZATION ON THE LINK BETWEEN CONSERVATION AND PROTECTION
IN THE BILI-UELE PROTECTED AREA OF DEMOCRATIC REPUBLIC OF CONGO.

Schedule I (Form 990)

SCHEDULE O

Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

INVISIBLE CHILDREN, INC.

Employer identification number 54-2164338

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: SAFE SURRENDER OF MEMBERS OF THE LORD'S RESISTANCE ARMY, CONTRIBUTING TO MORE THAN A 90% REDUCTION IN VIOLENCE OVER THE PAST DECADE, AND HELPED TO FACILITATE THEIR JOURNEY BACK HOME.

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

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY MANAGEMENT. A COPY OF THE FORM 990 WAS PROVIDED TO THE BOARD TO REVIEW AND COMMENT BEFORE FILING WITH THE IRS.

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

CONFLICT OF INTEREST REPORTING FORMS ARE FILLED OUT ANNUALLY BY ALL BOARD WHICH REPORT ALL CONFLICTS AND AFFIRM ADHERENCE TO THE FOLICY. THESE FORMS ARE REVIEWED BY INVISIBLE CHILDREN'S CHAIR OF THE BOARD AND THE ORGANIZATION'S SECRETARY. IF AN ISSUE IS TO BE DECIDED BY THE BOARD THATINVOLVES A POTENTIAL CONFLICT OF INTEREST FOR A BOARD MEMBER, IΤ IS THE RESPONSIBILITY OF THE BOARD MEMBER TO:

- IDENTIFY AND FULLY DISCLOSE ALL MATERIAL FACTS RELATING TO THE POTENTIAL CONFLICT OF INTEREST.
- 2. NOT PARTICIPATE IN DISCUSSION OF THE PROGRAM OR MOTION BEING CONSIDERED.
- NOT VOTE ON THE ISSUE.
- IS THE RESPONSIBILITY OF THE BOARD TO:
- ONLY HIRE OR CONTRACT WITH THE BOARD MEMBER OR THE BOARD MEMBER'S CLOSE RELATIVE IF HE OR SHE IS THE BEST QUALIFIED INDIVIDUAL AVAILABLE, AND WILLING TO PROVIDE THE GOODS OR SERVICES NEEDED AT THE BEST PRICE.
- RECORD THE POTENTIAL CONFLICT OF INTEREST AND THE USE OF THE PROCEDURES LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization INVISIBLE CHILDREN, INC.

Employer identification number 54-2164338

AND CRITERIA OF THIS POLICY IN THE BOARD MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE COMPENSATION COMMITTEE HAS THE RESPONSIBILITY OF OVERSEEING INVISIBLE CHILDREN'S EXECUTIVE COMPENSATION PROGRAM. THE COMMITTEE RECOGNIZES THAT IN ORDER FOR INVISIBLE CHILDREN TO ACHIEVE ITS AMBITIOUS GOALS, THE ORGANIZATION MUST BE ABLE TO ATTRACT, RETAIN, AND REWARD QUALIFIED EXECUTIVES WHO WILL BE ABLE TO OPERATE EFFECTIVELY IN A CHALLENGING AND COMPLEX ENVIRONMENT. THE COMMITTEE IS CHAIRED BY A DISINTERESTED BOARD MEMBER. THE COMMITTEE RESEARCHES SALARIES OF COMPARABLE POSITIONS, REVIEWS PERFORMANCE OF EXECUTIVES, AND THEN RECOMMENDS THE COMPENSATION OF SUCH INDIVIDUALS TO THE BOARD AT LARGE. COMPENSATION IS SET BY A BOARD VOTE AFTER REVIEWING THE RECOMMENDATION OF THE COMMITTEE. THE EXECUTIVES ARE NOT PRESENT FOR THE VOTE. THE MOST RECENT REVIEW TOOK PLACE IN JUNE 2018.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AR,CA,FL,GA,HI,IL,KS,KY,MD,MI,MN,MS,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT,VA

WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

FINANCIAL STATEMENTS AND ANNUAL REPORTS DATING BACK TO 2006 ARE AVAILABLE

TO THE PUBLIC ON INVISIBLE CHILDREN'S WEBSITE. COPIES ARE ALSO PROVIDED

UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

RECRUITING:

PROGRAM SERVICE EXPENSES

6,660.

Name of the organization INVISIBLE CHILDREN, INC.	Employer identification number 54-2164338
MANAGEMENT AND GENERAL EXPENSES	41,273.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	47,933.
SECURITY SERVICES:	
PROGRAM SERVICE EXPENSES	58,739.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	58,739.
OTHER PROFESSIONAL FEES:	
PROGRAM SERVICE EXPENSES	555,607.
MANAGEMENT AND GENERAL EXPENSES	78,874.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	634,481.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	741,153.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2017

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

INVISIBLE CHILDREN, INC.

 $\begin{array}{c} \text{Employer identification number} \\ 54-2164338 \end{array}$

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controllir entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	Section 5 contr enti	olled
				501(c)(3))		Yes	No
INVISIBLE CHILDREN, DEMOCRATIC REPUBLIC OF	COMMUNITY PROTECTION						
CONGO, 09, AVENUE DU COMMERCE, QUARTIER	PROGRAMMING AND NATIONAL				INVISIBLE		
NGILIMA, DUNGU, HAUT-UELE, CONGO (KINSHASA)	PARTNER CAPACITY BUILDING	CONGO (KINSHASA)	501(C)(3)		CHILDREN, INC.	X	
INVISIBLE CHILDREN, CENTRAL AFRICAN REPUBLIC	COMMUNITY PROTECTION						
1 ARRONDISSEMENT, AVENUE CISSONGO N 274	PROGRAMMING AND NATIONAL	CENTRAL AFRICAN			INVISIBLE		
BANGUI, CENTRAL AFRICAN REPUBLIC	PARTNER CAPACITY BUILDING	REPUBLIC	501(C)(3)		CHILDREN, INC.	X	

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

	THE STATE OF THE BUILDING STATE OF THE STATE
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
Part III	organizations treated as a partnership during the tax year.

	1 (1)		1		/m	· .	T				1
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage
of related organization		(state or	entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	income	end-of-year	1	itions?	amount in box 20 of Schedule K-1 (Form 1065)	managin nartner	Percentage ownership
		foreign country)		sections 512-514)		assets		NIa	20 of Schedule	Va - N	_
		country)		300010113 0 12 0 14)			Yes	No	K-1 (1 01111 1003)	resino	<u> </u>
	1										
							<u> </u>	<u> </u>		\vdash	
	1										
-							-			\vdash	-
•											
							-			 	+
	1										

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(t contr ent	tion b)(13) rolled tity?
		country)		Or trusty		assets			No
									<u> </u>
	_								
									<u> </u>
	_								
	_								
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	_								
		1							
732162 09-11-17		47				Sche	dule R (For	n 990)	2017

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

Page 3

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		<u> </u>
b Gift, grant, or capital contribution to related organization(s)					X	
c Gift, grant, or capital contribution from related organization(s)				1c		X
d Loans or loan guarantees to or for related organization(s)						X
e Loans or loan guarantees by related organization(s)						X
f Dividends from related organization(s)				1f		_X_
g Sale of assets to related organization(s)				1g		X
h Purchase of assets from related organization(s)				1h		X
i Exchange of assets with related organization(s)				1i		X
j Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		X
k Lease of facilities, equipment, or other assets from related organization(s)				1k		X
I Performance of services or membership or fundraising solicitations for related orga						X
m Performance of services or membership or fundraising solicitations by related orga						Х
n Sharing of facilities, equipment, mailing lists, or other assets with related organizati						Х
Sharing of paid employees with related organization(s)				1o	X	
p Reimbursement paid to related organization(s) for expenses						X
q Reimbursement paid by related organization(s) for expenses				1q		X
r Other transfer of cash or property to related organization(s)						X
s Other transfer of cash or property from related organization(s)						Х
2 If the answer to any of the above is "Yes," see the instructions for information on w	vho must complete t	this line, including covered	relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount involved		
INVISIBLE CHILDREN, DEMOCRATIC REPUBLIC OF						
(1) CONGO	В	1.039.538.	ACTUAL AMOUNT			
INVISIBLE CHILDREN, CENTRAL AFRICAN	_					
(2) REPUBLIC	В	778,606.	ACTUAL AMOUNT			
(-)		,				
(3)						
(4)						
(5)						
(6)						
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Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d)	(e) Are al partners 501(c) orgs.]	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	Sec.	Share of	Share of	Disp	ropor- nate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	Percentag
of entity		(state or foreign	excluded from tax under	orgs.	(3) ?	total	end-of-year	alloca	tions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes 1		income	assets	Yes	No	(Form 1065)	Yes N	ю
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