Form	9	9	0
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EXTENDED TO NOVEMBER 15, 2018

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.



Department of the Treasury Internal Revenue Service - 0047

<u>A</u> F	or th	and a second ar year, or tax year beginning and	a enaing		
B C a	heck if pplicab	e: C Name of organization		D Employer identific	cation number
X	Addre chang	CHILDREN IN CONFLICT, INC.			
	Name	Doing business as		81-42	282343
	Initial	, , , , , , , , , , , , , , , , , , , ,	Room/suite	E Telephone number	
	Final	379 WEST BROADWAY	511	(929) 218-2845
	termii ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	1,329,434.
	Amer	NEW IORK, NI IOUIZ		H(a) Is this a group re	
	Appli tion	F Name and address of principal officer: ELISABETH LITTLE		for subordinates	? 🗌 Yes X No
	pend	^{ng} SAME AS C ABOVE		H(b) Are all subordinates in	
IT	ax-ex	empt status: 🚺 501(c)(3) 🛄 501(c) ()◀ (insert no.) 🛄 4947(a)(1) or 📃 527	If "No," attach a	list. (see instructions)
J۷	Vebsi	te: CHILDRENINCONFLICT.ORG		H(c) Group exemptior	n number 🕨
κF	orm o	f organization: 🔀 Corporation 🔄 Trust 🔄 Association 🔄 Other 🕨	L Year	of formation: 2016 M	State of legal domicile: DE
Pa	irt I	Summary			
e	1	Briefly describe the organization's mission or most significant activities: CHII	LDREN I	N CONFLICT	PROTECTS,
ũ		EDUCATES, AND PROVIDES HOPE FOR CHILDREN	N CAUGH	T UP IN CON	FLICT.
in a	2	Check this box 🕨 🛄 if the organization discontinued its operations or disp	osed of more	e than 25% of its net as	sets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3
ڻ ح	4	Number of independent voting members of the governing body (Part VI, line 1b)			3
es 6	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)		3	
viti	6	Total number of volunteers (estimate if necessary)			15
Activities & Governance	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
٩		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
Ð	8	Contributions and grants (Part VIII, line 1h)		6,779.	904,263.
nué	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	50.
£	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,779.	904,313.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	374,815.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10		0.	101,914.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
épe		Total fundraising expenses (Part IX, column (D), line 25) 134, 3	349.		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,419.	189,817.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,419.	666,546.
	19	Revenue less expenses. Subtract line 18 from line 12		-6,640.	237,767.
or ces				ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		7,433.	874,113.
d Bő	21	Total liabilities (Part X, line 26)		14,073.	636,376.
Fund		Net assets or fund balances. Subtract line 21 from line 20		-6,640.	237,737.
		Signature Block		-	-
Unde	er pen	alties of perjury, I declare that I have examined this return, including accompanying schedu	les and statem	ents, and to the best of my	/ knowledge and belief, it is

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer ELISABETH LITTLE, EXEC Type or print name and title	CUTIVE DIRECTOR		Date			
Paid	Print/Type preparer's name LAUREN CRESCI	Preparer's signature	Date	Check PTIN if self-employed P01268493			
Preparer		CPAS LLP		Firm's EIN 🕨 13-1655065			
Use Only	Firm's address 551 FIFTH AVENUE NEW YORK, NY 101			Phone no. 212 – 697 – 2299			
May the II	Aay the IRS discuss this return with the preparer shown above? (see instructions)						
732001 11-2	8-17 LHA For Paperwork Reduction Act Noti	ce, see the separate instructions.		Form 990 (2017)			

) (Revenue \$) (Revenue \$	
) (nevenue ¢) (needing \$	
	CIARIES WERE REACHED) (Revenue \$	INCLUDING
	RE TRAINED IN IDENTI ON POSITIVE HEALTH A	
	D INCLUDING 59% GIRL	
	EFICIARIES WERE REAC ON 12,300 PHONE CALL	
	Y PROGRAMS INCLUDING	
	LDREN IN WAR AFFECTE	
	374,815.) (Revenue \$ R CHILD UK A GRANT T	פווססחסיי
-	of grants and allocations to others, the to	• •
	ee largest program services, as measure	
program services?	nducts, any program services?	Yes X No
	which were not listed on the	Yes X N
	-	
	WORK TIRELESSLY TO R PROTECTION, EDUCATIO	
	IT IS UNACCEPTABLE	
<u></u>		Σ
		82343

Form 990 (2017)

CHILDREN IN CONFLICT, INC. 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)?		77	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	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? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	11b		x
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	101		v
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	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			<u> </u>
10	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			<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х

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CHILDREN IN CONFLICT, INC.

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		X
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23		X
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	04-		x
b	Schedule K. If "No", go to line 25a	24a		_ A
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
h	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
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	234		
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		x
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	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			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	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? <i>If</i> "Yes," <i>complete</i>			x
22	Schedule N, Part II	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		- 23
54		34		x
35a	Part V, line 1 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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	

Form **990** (2017)

Form	990 (2017) CHILDREN IN CONFLICT, INC. 81-4282	343	Р	age 5
Pa	t 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 2			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	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)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			l
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		37	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
		7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	_		x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		- 23
g b	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ũ	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	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?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 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:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans 13b			
с	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2017)

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CHILDREN IN CONFLICT, INC.

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

X

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.

			3	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1 a	2		
	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 0.				
h	Enter the number of voting members included in line 1a, above, who are independent	1b	3		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh		4		
2	officer, director, trustee, or key employee?		2		x
3	Did the organization delegate control over management duties customarily performed by or under th				
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form				Х
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint one or			
	more members of the governing body?		7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	persons other than the governing body?		7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the following:			
	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 read				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X
ec	tion B. Policies (This Section B requests information about policies not required by the Internal R	levenue Code.)			
				Yes	No
	Did the organization have local chapters, branches, or affiliates?		10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of				
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ .$		10b	37	
	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			37	
	• • • • • • • • • • • • • • • • • • • •		12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			v	
_	in Schedule O how this was done			X	
3	Did the organization have a written whistleblower policy?			X X	
4 -	Did the organization have a written document retention and destruction policy?		14	~	
5	Did the process for determining compensation of the following persons include a review and approv	•			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		45	x	
	The organization's CEO, Executive Director, or top management official		15a	X	
b	Other officers or key employees of the organization		15b		
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	mont with -			
oa	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange		16-		x
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		<u>16a</u>		
a	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization				
			16b		
Sec.	exempt status with respect to such arrangements?			1	I
7	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright NY , DE				
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(c)(3) c only)	availah		
	for public inspection. Indicate how you made these available. Check all that apply.		availat		
		n in Schedule O)			
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	,	nd finan	cial	
-	statements available to the public during the tax year.	and the set of policy, a	un		
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records:			
	KIWI PARTNERS - (212) 532-7171				
	237 WEST 35TH ST, STE 1101, NEW YORK, NY 10036				
32006	3 11-28-17		Form	990	(2017)
	6			-	
91	112 759420 CIC 2017.04030 CHILDREN IN CO	NFLICT, INC.	CIC	2	1

CIC___1

Part VII	Compensation of Officers,	Directors, Tru	ustees, Key	y Employees,	Highest Compensated	ĺ
	Employees, and Independe	ent Contracto	ors			

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.

Check this box if neither the organization nor any rela	ed organization com	npensated any curre	ent officer, directo	r, or trustee
---	---------------------	---------------------	----------------------	---------------

(A)	(B)	(C)						(D)	(E)	(F)		
Name and Title	Average	(-1	Position					Reportable	Reportable	Estimated		
	hours per	box	(do not check more than one box, unless person is both an			is bot	h an	compensation	compensation	amount of		
	week		officer and a director/trustee)			or/trus	tee)	from	from related	other		
	(list any	ector						the	organizations	compensation		
	hours for	or dir	e a			ited		organization	(W-2/1099-MISC)	from the		
	related	stee	ruste			cen se		(W-2/1099-MISC)		organization		
	organizations	lal tru	onal t		oloye	com se				and related		
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) AMANDA GARDINER	1.00	드	-	đ	Αŝ	포등	요					
CHAIR	1.00	x		x				0.	0.	0.		
(2) SACHA DESHMUKH	1.00					-		0.	•	0.		
TRUSTEE	1.00	x		x				0.	0.	0.		
(3) CYNTHIA PIERCE	1.00					-	-	0.	•	0.		
SECRETARY	1.00	x		x				0.	0.	0.		
(4) ROBERT WILLIAMS	1.00	<u>^</u>						0.	0.	0.		
TREASURER	1.00			x				0.	0.	0.		
(5) ELISABETH LITTLE	40.00							0.	•	0.		
EXECUTIVE DIRECTOR	40.00			x				54,737.	0.	26,769.		
				11				51,157.	•	20,705.		
732007 11-28-17										Form 990 (2017)		

2017.04030 CHILDREN IN CONFLICT, INC.

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Forn	1 990 (2017) CHILDREN	IN CON	ΥĽ.	IC.	Г,	11	NC	•		81-42	282	343	Page 8
Pa	rt VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	vees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week	box	not c , unle	ss pe	ition ^{more} rson) than is bot pr/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoun othe	
		(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)	organization (W-2/1099-MIS	s	com fr org and	pensation om the anization d related anizations
			lno	u	Off	Kei	Hi	Fo					
с	Sub-total Total from continuation sheets to Part VI	I, Section A							54,737. 0.		0.		6,769. 0.
d 2	Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization								54,737. received more than \$100),000 of reportabl	0. e	2	6,769. 0
3	Did the organization list any former officer,	,		·				·	0			3	Yes No
4	line 1a? <i>If</i> "Yes," <i>complete Schedule J</i> for su For any individual listed on line 1a, is the su and related organizations greater than \$150	im of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from			4	X
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i> ction B. Independent Contractors	-				-			-			5	X
1	Complete this table for your five highest co the organization. Report compensation for	-	-								pensa	ation f	rom
5	(A) Name and business DESIGN, LLC	address							(B) Description of s AUDIO,VISUA		C	(C ompei	;) nsation
	0 EAST 42ND STREET, NEW	V YORK,	N	Y 1	L 0 0)1'	7		LIGHTING AND			10	0,355.
2	Total number of independent contractors (i		ot li	mite	d to			steo	d above) who received n	nore than			
73200	\$100,000 of compensation from the organiz 8 11-28-17	zation 🕨				-	1					Form	990 (2017)

8 11291112 759420 CIC 2017.04030 CHILDREN IN CONFLICT, INC. CIC___1

Form	n 990) (:	2017) CHILI	DREN IN	CONFLICT,	INC.		81-4282	343 Page 9
Pa	rt V		I Statement of Reve	nue					
			Check if Schedule O cont	tains a respons	e or note to any lin	e in this Part VIII			
				·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Its	1	а	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues						
Am (с	Fundraising events	1c	13,973.				
Gifi		d	Related organizations	1d					
ns, Simi		е	Government grants (contribut	tions) 1e					
er S		f	All other contributions, gifts, gran						
-tp			similar amounts not included abo	ove 1f	890,290.				
onti od (-	Noncash contributions included in lines			004 060			
<u>a</u> C		h	Total. Add lines 1a-1f			904,263.			
	_				Business Code				
/ice	2								
Serv		b							
s n		с 4			·				
Program Service Revenue		d e			·				
Pro		f	All other program service reve	enue	-				
		a	Total. Add lines 2a-2f						
	3	9	Investment income (including						
			other similar amounts)			50.			50.
	4		Income from investment of ta						
	5		Royalties	· <u></u>	►				
				(i) Real	(ii) Personal				
			Gross rents						
			Less: rental expenses						
			Rental income or (loss)						
	'	a	Gross amount from sales of assets other than inventory	(i) Securities	s (ii) Other				
		h	Less: cost or other basis						
		~	and sales expenses						
		с	Gain or (loss)						
			Net gain or (loss)						
Other Revenue			Gross income from fundraisin including \$ 13,9	ng events (not					
evel			contributions reported on line						
r Re			Part IV, line 18		a 425,121.				
the		b	Less: direct expenses		ь 425,121.				
0		с	Net income or (loss) from fund	draising events	►	0.			
	9	а	Gross income from gaming ad						
			Part IV, line 19						
			Less: direct expenses		b				
			Net income or (loss) from gan						
	10	а	Gross sales of inventory, less						
		h	and allowances Less: cost of goods sold		ab				
			Net income or (loss) from sale						
		-	Miscellaneous Revenu		Business Code				
	11	а							
		b							
		с							
		d	All other revenue						
		е	Total. Add lines 11a-11d			004 212			
	12		Total revenue. See instructions.		►	904,313.	0.	0.	50.
73200	9 11-	-28	-17						Form 990 (2017)

Part IX Statement of Functional Expenses

CHILDREN IN CONFLICT, INC.

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	374,815.	374,815.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	01 506		F 4 000	
	trustees, and key employees	81,506.		54,322.	27,184
6	Compensation not included above, to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
	persons described in section 4958(c)(3)(B)	10 001			10 001
7	Other salaries and wages	18,021.			18,021
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	262			
9	Other employee benefits	262.		262.	2 000
0	Payroll taxes	2,125.		26.	2,099
1	Fees for services (non-employees):				
а	Management	10,459.		10,459.	
b		43,616.		43,616.	
	Accounting	45,010.		45,010.	
	Lobbying Professional fundraising services. See Part IV, line 17				
e					
f	Investment management fees				
g	column (A) amount, list line 11g expenses on Sch 0.)	13,859.		12,774.	1,085
2	Advertising and promotion	10,000.			1,005
2 3	Office expenses	1,635.		1,534.	101
3 4	Information technology				
5	Royalties				
6	Occupancy	7,081.		7,081.	
7	Traval	32,543.		13,736.	18,807
8	Payments of travel or entertainment expenses	- ,			
•	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	895.		895.	
3	Insurance				
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	INDIRECT BENEFIT EXPENS	45,130.			45,130
b	LICENSES AND FEES	23,878.		11,445.	12,433
с	MISCELLANEOUS	6,864.		1,232.	5,632
d	TRAINING AND DEVELOPMEN	3,857.			3,857
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	666,546.	374,815.	157,382.	134,349
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

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Form 990 (2017)	CHILDREN	IN	CONFLICT,	INC.
Part X Balance Sheet	<u>t</u>			

		Check if Schedule O contains a response or no	te to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments		2	516,082.		
	3	Pledges and grants receivable, net			3	316,300.	
	4	Accounts receivable, net				4	21,913.
	5	Loans and other receivables from current and fe	ormer c	fficers, directors,			
		trustees, key employees, and highest compens	ated er	nployees. Complete			
		Part II of Schedule L		5			
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec	tion 50	1(c)(9) voluntary			
ets		employees' beneficiary organizations (see instr)	. Comp	lete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
4	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			7,433.	9	6,091.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		5,372.			
	b	Less: accumulated depreciation		895.	0.	10c	4,477.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			0.	15	9,250.
	16	Total assets. Add lines 1 through 15 (must equ	7,433.	16	874,113.		
	17	Accounts payable and accrued expenses			14,073.	17	68,668.
	18	Grants payable				18	374,815.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ies	22	Loans and other payables to current and forme					
ollit		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrela				23	100.000
	24	Unsecured notes and loans payable to unrelate				24	192,893.
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	\$ 17-24	. Complete Part X of			
		Schedule D	Γ	14,073.	25	636,376.	
	26	5			14,073.	26	030,370.
		Organizations that follow SFAS 117 (ASC 958		ck here 🕨 🕰 and			
ces	07	complete lines 27 through 29, and lines 33 ar			-6,640.		237,737.
lan	27	Unrestricted net assets			-0,040.	27	<u> 237,137.</u>
Ba	28	Temporarily restricted net assets				28	
pur	29			N - h h - h - m - N		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (A					
s S	200	and complete lines 30 through 34.					
set	30	Capital stock or trust principal, or current funds				30	
As	31	Paid-in or capital surplus, or land, building, or ed		F		31	
Net	32	Retained earnings, endowment, accumulated in		F	-6,640.	32	237,737.
	33	Total net assets or fund balances			7,433.	33	874,113.
	34	Total liabilities and net assets/fund balances			1,400.	34	Form 990 (2017)

Form **990** (2017)

Form	990 (2017) CHILDREN IN CONFLICT, INC.	81-428	2343	Pag	ge 12			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI				X			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			$\frac{13}{46}$			
2								
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	-	6,6	40.			
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		6,6	10.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				~ -			
_	column (B))	10	23	7,7	37.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
				Yes	No			
1	Accounting method used to prepare the Form 990: X Cash Cash Corual Conter							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Х				
	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:							
	X Separate basis 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			37				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch							
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-						
	Act and OMB Circular A-133?		. 3a		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				1			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b					
			Form	990	(2017)			

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form	990	or	990-EZ)
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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
2017
Open to Public Inspection

Name of the	organization
-------------	--------------

Employer	identification	number
Q	1-12823	13

				NFLICT, INC.					1-4282343		
Pa	rt I	Reason for Public	Charity Status	All organizations must c	omplete th	is part.) Se	ee instruction	S.			
The	organ	ization is not a private found									
1		A church, convention of ch									
2		A school described in sect	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Forr	n 990 or 9	90-EZ).)					
3		A hospital or a cooperative	e hospital service org	anization described in s	ection 170)(b)(1)(A)(i	ii).				
4		A medical research organiz	zation operated in co	onjunction with a hospita	l described	d in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,		
		city, and state:									
5		An organization operated for	or the benefit of a co	ollege or university owne	d or opera	ted by a g	overnmental u	unit describ	bed in		
		section 170(b)(1)(A)(iv). (Complete Part II.)									
6		A federal, state, or local go	overnment or govern	mental unit described in	section 17	70(b)(1)(A)	(v).				
7	Х	An organization that norma	ally receives a subst	antial part of its support	from a gov	ernmental	l unit or from t	he general	public described in		
		section 170(b)(1)(A)(vi). (C	Complete Part II.)								
8		A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)						
9		An agricultural research org	ganization described	d in section 170(b)(1)(A)	(ix) operate	ed in conju	unction with a	land-grant	college		
		or university or a non-land-g	grant college of agri	culture (see instructions)	. Enter the	name, city	y, and state o	f the colleg	e or		
		university:									
10		An organization that norma	ally receives: (1) mor	e than 33 1/3% of its su	oport from	contributi	ons, members	ship fees, a	and gross receipts from		
		activities related to its exen	mpt functions - subje	ect to certain exceptions	, and (2) no	o more tha	n 33 1/3% of	its suppor	t from gross investment		
		income and unrelated busin	iness taxable income	e (less section 511 tax) fr	om busine	esses acqu	uired by the or	ganization	after June 30, 1975.		
		See section 509(a)(2). (Cor	omplete Part III.)								
11		An organization organized a	and operated exclus	sively to test for public sa	afety. See	section 50	09(a)(4).				
12		An organization organized a	and operated exclusion	sively for the benefit of, t	o perform	the function	ons of, or to ca	arry out the	e purposes of one or		
		more publicly supported or	rganizations describ	ed in section 509(a)(1) o	or section	509(a)(2).	See section !	5 09(a)(3). (Check the box in		
		lines 12a through 12d that	describes the type	of supporting organization	on and com	nplete line	s 12e, 12f, an	d 12g.			
а		Type I. A supporting orga	anization operated,	supervised, or controlled	by its sup	ported or	ganization(s), [.]	typically by	<i>y</i> giving		
		the supported organization	ion(s) the power to re	egularly appoint or elect	a majority	of the dire	ctors or truste	es of the s	supporting		
		organization. You must o	-								
b		Type II. A supporting org	-				-		-		
		control or management o			same perso	ons that co	ontrol or mana	age the sup	ported		
		organization(s). You mus	-								
С		☐ Type III functionally interest						lly integrate	ed with,		
		its supported organizatio		<i>,</i> .			-				
d		☐ Type III non-functionally						°,			
		that is not functionally int	• •		-		-	d an attent	iveness		
		requirement (see instruct	,	•							
е		☐ Check this box if the orga					а Туре I, Туре	II, Type III			
	F ooto	functionally integrated, or		onally integrated suppor	ing organi	zation.					
		er the number of supported of supported of the following information	0	ad averagination (a)							
<u> </u>		vide the following information i) Name of supported	(ii) EIN	(iiii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetarv	(vi) Amount of other		
	``	organization	(,	(described on lines 1-10	in your governi Yes	ng document? No	support (see ir		support (see instructions)		
				above (see instructions))							
					1						
Tota	ıl										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 732021 10-06-17 Schedule A (Form 990 or 990-EZ) 2017

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2017.04030 CHILDREN IN CONFLICT, INC.

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Schedule A (Form 990 or 990-EZ) 2017 CHILDREN IN CONFLICT, INC. 81-42823 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

81-4282343 Page 2

(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.)

See	ction A. Public Support						
Cale	ndar 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	l					
	include any "unusual grants.")				6,779.	904,263.	911,042.
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	ſ					
	the organization without charge						
4	Total. Add lines 1 through 3				6,779.	904,263.	911,042.
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)						859,379.
6	Public support. Subtract line 5 from line 4.						51,663.
See	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4				6,779.	904,263.	911,042.
8	Gross income from interest,						
	dividends, payments received on	ſ					
	securities loans, rents, royalties,	ſ					
	and income from similar sources \dots					50.	50.
9	Net income from unrelated business						
	activities, whether or not the	ſ					
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						911,092.
12	Gross receipts from related activities	, etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stop	o here					X
See	ction C. Computation of Publ	ic Support Pe	rcentage				
	Public support percentage for 2017 (•	()/		14	%
	Public support percentage from 2016					15	%
16 a	33 1/3% support test - 2017. If the o	organization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2016. If the o						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes	t - 2017. If the org	anization did not	check a box on lin	e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac	sts-and-circumstan	ices" test, check t	this box and stop I	here. Explain in Pa	rt VI how the orgar	ization
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	t - 2016. If the org	anization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the	he "facts-and-circu	imstances" test, c	check this box and	l stop here. Explair	n in Part VI how the	
	organization meets the "facts-and-cire	cumstances" test.	The organization	qualifies as a publ	licly supported orga	anization	▶∐
18	Private foundation. If the organization	on did not check a	box on line 13, 16	6a, 16b, 17a, or 17	b, check this box a	and see instruction	s ►
					Sche	dule A (Form 990	or 990-E7) 2017

Schedule A (Form 990 or 990-EZ) 2017

732022 10-06-17

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Schedule A (Form 990 or 990 EZ) 2017 CHILDREN IN CONFLICT, INC.

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.)

	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	(4) 2010		(0) 2010	(4) 2010	(0)	2017	() / 014	
•	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								
Ŭ	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								
	·								
E	The value of services or facilities								
5	furnished by a governmental unit to								
	the organization without charge								
~									
	Total. Add lines 1 through 5								
78	Amounts included on lines 1, 2, and								
	3 received from disqualified persons								
D	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								
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e)	2017	(f) Total	
	Amounts from line 6	(4) 2010	(0) 2011	(0) 2010	(u) 2010	(0)		(1) 10101	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources								
b	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
c	Add lines 10a and 10b								
11	Net income from unrelated business activities not included in line 10b, whether or not the business is required 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	the organization'	I s first second thi	rd fourth or fifth t	I ax vear as a sectio	1 = 501(c)	(3) organiz	ation	
••	check this box and stop here	•			•	• • •	., .	· .	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage						
	Public support percentage for 2017 (I			column (f))		15			%
16	Public support percentage from 2016					16			<u>%</u>
	ction D. Computation of Invest								70
	•					47			0/
	Investment income percentage for 20					17			%
	1 5						and l' t	7 10 11 - 1	%
198	33 1/3% support tests - 2017. If the	-							
b	more than 33 1/3%, check this box a 33 1/3% support tests - 2016. If the	organization did r	not check a box o	n line 14 or line 19	a, and line 16 is mo	ore than	33 1/3%, a	and	
	line 18 is not more than 33 1/3%, che								
20	Private foundation. If the organization	n did not check a	box on line 14, 19	9a, or 19b, check t					
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			10 04000	15		~			
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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes No

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.)

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			V	N
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person 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		
	A family member of a person described in (a) above?	11b		
	A 35% 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	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	_		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
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Schedule A (Form 990 or 990 EZ) 2017 CHILDREN IN CONFLICT, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y integrate	d Type III supportina ord	ganization (see

instructions).

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Section D - Distributions Current Year 1 Amounts paid to supported organizations to accomplish exempt purposes 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 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 (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 (i) (ii) (iii) (i) (ii) (iii) Distributions Distributable	Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations. 4 Amounts paid to accompish exempt purposes of supported organizations 4 Amounts paid to accompish exempt purposes of supported organizations 5 Qualified est-aside amounts (prior IRS aproval required) 6 Other distributions (describe in Part VI). See instructions. 7 Total annual distributions. Add lines 1 through 6. 8 Distributions to attentive supported organization to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributible amount for 2017 from Section C, line 6 10 Line 8 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 (arry or years prior to 2017 (reason- able cause required explain in Part VI). See instructions. 4 From 2013 Ercess distributions of prior years 6 From 2013 Ercess of all prior prior prior prior prior years 1 Carryover from 2012 not applied (see instructions) Ercess prior 2017 not section D, line 7: 1 Carryover from 2012 not applied (see instructions) Ercess prior 2017 3 Applied to underdistrib	Sect				Current Year
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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 (provide details in Part VI). See instructions. 9 Distributions to attentive supported organization to which the organization is responsive (provide details in Part VI). See instructions. 9 Distributable amount for 2017 from Section C, line 6 10 Line 8 amount of 2017 from Section C, line 6 2 Underdistributions; if any, for years prior to 2017 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2017 a Excess distributions carryover, if any, to 2017 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2017 a Excess distributions of prior years b From 2013 c From 2014 d From 2015 d Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see instructions) j Remainder, Subtract lines 30, 3h, and 31 from 34. 4 Distributable a	4	Amounts paid to acquire exempt-use assets			
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(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 (i) (ii) (iii) Section E - Distribution Allocations (see instructions) Excess Distributions (iii) Distributable amount for 2017 from Section C, line 6 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 a b From 2013 c From 2016 <th>7</th> <th>Total annual distributions. Add lines 1 through 6.</th> <th></th> <th></th> <th></th>	7	Total annual distributions. Add lines 1 through 6.			
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10 Line 8 amount divided by line 9 amount (i) (ii) Underdistributions Section E - Distribution Allocations (see instructions) Excess Distributions (iii) Distributions 1 Distributable amount for 2017 from Section C, line 6 Image: Comparison of the		(provide details in Part VI). See instructions.			
Section 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	9	Distributable amount for 2017 from Section C, line 6			
Section E - Distribution Allocations (see instructions) Excess Distributions Underdistributions Pre-2017 Distributable Amount for 2017 1 Distributable amount for 2017 from Section C, line 6 Image: Construction of the construct	10	Line 8 amount divided by line 9 amount			
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 a	Sect	on E - Distribution Allocations (see instructions)		Underdistributions	
able cause required- explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2017 a	1	Distributable amount for 2017 from Section C, line 6			
3 Excess distributions carryover, if any, to 2017 a	2	Underdistributions, if any, for years prior to 2017 (reason-			
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b From 2013 c From 2014 d From 2015 e From 2016 f Total of lines 3 a 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: \$ a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. c Remaining underdistributions for years prior to 2017, if a Applied to 2017 distributable amount c Remaining underdistributions for years prior to 2017, if and v. Se 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: a Excess from 2013	3	Excess distributions carryover, if any, to 2017			
c From 2014 d From 2015 e 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: \$ ine 7: \$ a Applied to underdistributions of prior years b Applied to 2017 distributable amount c Remainder. Subtract lines 4a and 4b from 4. c Remainder. Subtract lines 4a and 4b from 4. c 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: a Excess from 2013	a				
d From 2015 image: straight of the straight of t	b	From 2013			
e 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: s a a Applied to underdistributions of prior years b Applied to 2017 distributable amount c 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: a Excess from 2013	c	From 2014			
f Total of lines 3a through e	d	From 2015			
g Applied to underdistributions of prior years	e	From 2016			
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: s s a Applied to underdistributions of prior years b Applied to 2017 distributable amount c 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: a Excess from 2013	f	Total of lines 3a through e			
i Carryover from 2012 not applied (see instructions) image: subtract lines 3g, 3h, and 3i from 3f. j Remainder. Subtract lines 3g, 3h, and 3i from 3f. image: subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2017 from Section D, line 7: \$ a Applied to underdistributions of prior years image: subtract lines 4a and 4b from 4. b Applied to 2017 distributable amount image: subtract lines 4a and 4b from 4. c Remainder. Subtract lines 4a and 4b from 4. image: 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: a Excess from 2013	g	Applied to underdistributions of prior years			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2017 from Section D, line 7: a Applied to underdistributions of prior years b Applied to 2017 distributable amount c 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: a Excess from 2013	h	Applied to 2017 distributable amount			
4 Distributions for 2017 from Section D, line 7: \$ a Applied to underdistributions of prior years b Applied to 2017 distributable amount c 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: a Excess from 2013	i	Carryover from 2012 not applied (see instructions)			
line 7:\$a Applied to underdistributions of prior yearsb Applied to 2017 distributable amountc 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: a Excess from 2013	j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
a Applied to underdistributions of prior years a b Applied to 2017 distributable amount a c Remainder. Subtract lines 4a and 4b from 4. a 5 Remaining underdistributions for years prior to 2017, if a 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 a 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 a and 4c. a 8 Breakdown of line 7: a a Excess from 2013 a	4	Distributions for 2017 from Section D,			
b Applied to 2017 distributable amount		line 7: \$			
c 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: a Excess from 2013	a	Applied to underdistributions of prior years			
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: a Excess from 2013	b	Applied to 2017 distributable amount			
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: a Excess from 2013	C				
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6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. Part VI. See instructions. 8 Breakdown of line 7: Part VI. a Excess from 2013 Part VI.					
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: a Excess from 2013		· •			
Part VI. See instructions. Part VI. See instructions. 7 Excess distributions carryover to 2018. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2013	6	-			
7 Excess distributions carryover to 2018. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2013		-			
and 4c. and 4c. 8 Breakdown of line 7: a Excess from 2013					
a Excess from 2013	7				
	8	Breakdown of line 7:			
b Excess from 2014	а	Excess from 2013			
	b	Excess from 2014			
c Excess from 2015	с	Excess from 2015			
d Excess from 2016	d	Excess from 2016			
e Excess from 2017	e	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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Part VI	Supplementel	Z) 2017 CHILDE				IL line 10: D	vall liva a 417 -	81-42823	
	Part IV, Section A, line 1; Part IV, Sec	l Information. Pr , lines 1, 2, 3b, 3c, 4t ction D, lines 2 and 3	o, 4c, 5a, 6 Part IV, Se	, 9a, 9b, 9c, 1 [.] ection E, lines	1a, 11b, and 1 ⁻ 1c, 2a, 2b, 3a,	1c; Part IV, Se and 3b; Part	ection B, lines 1 V, line 1; Part V	and 2; Part IV, S , Section B, line	ection C.
	Section D, lines 5, (See instructions.)	6, and 8; and Part V	, Section E	, lines 2, 5, an	d 6. Also comp	plete this part	for any additior	al information.	
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VU28 10-06-1	/								

SCHEDULE D

Department of the Treasury

(Form	990)
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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.



CIC___1

Employer identification number

81-4282343

Internal Revenue Service Name of the organization

CHILDREN IN CONFLICT, INC.

Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		Other Similar Fund	ds or A	ccou	nts.Complete if the	
	organization answered "Yes" on Form 990, Part IV, in		nor advised funds	(b) Fun	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		assets held in donor adv	ised fun	ds		
	are the organization's property, subject to the organization's	-				Yes] No
6	Did the organization inform all grantees, donors, and donor a						
•	for charitable purposes and not for the benefit of the donor of				•		
	impermissible private benefit?				-	Yes] No
Par							
1	Purpose(s) of conservation easements held by the organizati	ion (check all tł	nat apply).				
	Preservation of land for public use (e.g., recreation or e	-	Preservation of a his	storically	impor	tant land area	
	Protection of natural habitat	,	Preservation of a ce				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation	on contribution in the for	n of a co	nserva	ation easement on the la	ist
_	day of the tax year.			ii oi u oc		Held at the End of the Tax	
а	Total number of conservation easements				2a		
	Total acreage restricted by conservation easements				2b		
	Number of conservation easements on a certified historic str				2c		
	Number of conservation easements included in (c) acquired a				20		
u	listed in the National Register				2d		
3	Number of conservation easements modified, transferred, rel					during the tax	
3		leaseu, extiligu	instred, or terminated by t	ne orgai	IIZation	i duning the tax	
	year		had N				
4	Number of states where property subject to conservation eas			-			
5	Does the organization have a written policy regarding the per						٦
	violations, and enforcement of the conservation easements in						_ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of vic	plations, and enforcing co	nservati	on eas	ements during the year	
_							
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violation	ns, and enforcing conser	vation ea	semer	its during the year	
	►\$						
8	Does each conservation easement reported on line 2(d) above	-	-				-
	and section 170(h)(4)(B)(ii)?					Yes	_ No
9	In Part XIII, describe how the organization reports conservati	ion easements	in its revenue and expension	se stater	nent, a	nd balance sheet, and	
	include, if applicable, the text of the footnote to the organizat	tion's financial	statements that describe	s the or	ganizat	ion's accounting for	
	conservation easements.						
Par	t III Organizations Maintaining Collections o	f Art, Histo	rical Treasures, or	Other	Simila	ar Assets.	
	Complete if the organization answered "Yes" on Form	1 990, Part IV, li	ine 8.				
1a	If the organization elected, as permitted under SFAS 116 (AS	3C 958), not to	report in its revenue stat	ement a	nd bala	ince sheet works of art,	
	historical treasures, or other similar assets held for public exh	hibition, educat	tion, or research in furthe	rance of	public	service, provide, in Part	: XIII,
	the text of the footnote to its financial statements that descri	ibes these item	IS.				
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	ort in its revenue stateme	nt and b	alance	sheet works of art, histo	orica
	treasures, or other similar assets held for public exhibition, ea	ducation, or res	search in furtherance of p	oublic se	rvice, p	provide the following amo	ount
	relating to these items:						
	(i) Revenue included on Form 990, Part VIII, line 1					\$	
						\$	
2	If the organization received or held works of art, historical tre						
-	the following amounts required to be reported under SFAS 1						
а	Revenue included on Form 990, Part VIII, line 1		-			6	
	Assets included in Form 990, Part X						
	For Paperwork Reduction Act Notice, see the Instructions					ہ Schedule D (Form 990)	201
		5 101 1 0111 350	~				, 2011
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2017.04030 CHILDREN IN CONFLICT, INC.

-		N IN CONFL						31-42			.ge 2
Pa	t III Organizations Maintaining C										
3	Using the organization's acquisition, accessi (check all that apply):	on, and other record			Ū.		nificant u	ise of its	collectio	n items	3
а	Public exhibition	d			ange progra						
b	Scholarly research	e	e 🛄 Ot	her							
с	Preservation for future generations										
4	Provide a description of the organization's co							se in Par	t XIII.		
5	During the year, did the organization solicit o								-		1
	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran		ete if the o	rganization	answered '	"Yes" on I	orm 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod								٦.,		
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing tak	ole:			г—				
									Amount		
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	Ending balance								-		
	Did the organization include an amount on F						y?	L	Yes		No
	If "Yes," explain the arrangement in Part XIII.										1
Pa	t V Endowment Funds. Complete i								_		
		(a) Current year	(b) Pric	or year	(c) Two year	rs back (d) Three ye	ears back	(e) ⊦our	years l	Jack
	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1g,	column (a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
с	Temporarily restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.									
3a	Are there endowment funds not in the posse	ession of the organization	ation that a	are held an	d administe	ered for the	e organiza	ation			
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Sch	nedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pa	t VI Land, Buildings, and Equipm	nent.									
	Complete if the organization answere	d "Yes" on Form 990	D, Part IV, I	line 11a. Se	e Form 990), Part X, I	ine 10.				
	Description of property	(a) Cost or o basis (investr		(b) Cost o basis (o			cumulated reciation	d	(d) Bool	< value	;
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment			5	5,372.		89	95.		4,41	77.
	Other										
	. Add lines 1a through 1e. (Column (d) must e		X, column	(B), line 10)c.)					4,43	77.

Schedule D (Form 990) 2017

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	IN CONFLICT, IN	1C. 8	31-4282343 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Ye			
(a) Description of security or category (including name of securit	y) (b) Book value	(c) Method of valuation: Cost or	end-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.	I		
Complete if the organization answered "Ye	s" on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-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 "Ye		e 11d. See Form 990, Part X, line 15.	
	(a) 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.			
Complete if the organization answered "Ye	s" on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line	25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	
2 1	ability for uncortain tax positions. In Part XIII, provide the text of the feat	oto to the organization's

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the 2. organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2017

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Sche	dule D (Form 990) 2017 CHILDREN IN CONFLICT,	INC.		81-4	282343	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Sta	atements With				
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	916,	588.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b	5,665.			
с	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)		6,610.			
е	Add lines 2a through 2d			2e	12,	275.
3	Subtract line 2e from line 1			3	904,	313.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			5		313.
Pa	rt XII Reconciliation of Expenses per Audited Financial S	tatements With	Expenses per	Retur	n.	
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.				
1	Total expenses and losses per audited financial statements			1	672,	211.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	5,665.			
b	Prior year adjustments	2b				
с	Other losses	2c				
d	Other (Describe in Part XIII.)	2d			_	
е	Add lines 2a through 2d			2e		665.
3	Subtract line 2e from line 1			3	666,	546.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8.)		5	666,	546.
Pa	rt XIII Supplemental Information.					
Prov	de the descriptions required for Part II lines 3.5 and 9. Part III lines 1a and	4. Part IV lines 1h a	nd 2h. Part V line 4	I. Part X	line 2. Part	(1

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

FOREIGN CURRENCY EXCHANGE GAIN

6,610.

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Schedule D (Form 990) 2017

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SCHEDULE F	Stateme	nt of Act	ivities Outside the Un	ited Sta	ates	OMB No. 1545-0047
(Form 990)				2017		
		J	Attach to Form 990.	,,-	.,	Open to Public
Department of the Treasury Internal Revenue Service	Go to	www.irs.gov/Fo	orm990 for instructions and the latest	information.		Inspection
Name of the organization					Employer id	entification number
CHILDREN IN CON	IFLICT, I	NC.			81-4282	2343
		Activities Ou	tside the United States. Comple	te if the orgar	ization answer	ed "Yes" on
Form 990, Part I						
			ds to substantiate the amount of its gra the selection criteria used to award the			X Yes No
2 For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and o	ther assistance	e outside the
	he following Par	t I. line 3 table c	an be duplicated if additional space is r	eeded.)		
(a) Region	(b) Number of		(d) Activities conducted in the region		vity listed in (d)	(f) Total
(-) 3	offices	employees,	(by type) (such as, fundraising, pro-		gram service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to	describe	e specific type	for and investments
		contractors	recipients located in the region)	of service	(s) in the regior	n in the region
		in the region				
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	0	GRANTS TO RECIPIENTS			374,815.
						,
2 2 Subtatal	0	0				374,815.
3 a Sub-total						574,015.
b Total from continuation	0	0				0.
sheets to Part I c Totals (add lines 3a						0.
and 3b)	0	0				374,815.
anu 301						5, 1, 015.

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

Schedule F (Form 990) 2017

OMB No. 1545-0047

732071 10-06-17

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Part II 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)	(c) Region	(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)
			TO SUPPORT THE WORK					
		EUROPE (INCLUDING	OF WARCHILD UK IN WAR					
		ICELAND &	AFFECTED COUNTRIES					
		GREENLAND)	AROUND THE WORLD	374,815.	WIRE	٥.		
2 Enter total number of	recipient organizatio	l	l recognized as charities by the	foreign country	rocognized as tax a	l		<u> </u>
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter							

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2017

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)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? <i>If</i> "Yes," <i>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)</i>	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? <i>If</i> "Yes," <i>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)</i>	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

732074 10-06-17

Schedule F	1	/ = = • •		IN	CONFLICT,	INC.
Part V	Supple	mental	Information			

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 REQUIRES ANY FOREIGN GRANTEE TO PROVIDE A RANGE OF

PROPOSALS ACROSS A VARIETY OF AREAS OF THEIR WORK. ALL SUCCESSFUL

GRANTEES WILL PROVIDE REGULAR REPORTS ON THE PROGRESS OF THEIR FUNDING IN

LINE WITH THE ORGANIZATIONS EXPECTATIONS. THE BOARD MAINTAINS FULL

DISCRETION AND CONTROL OVER FUNDS RAISED AND GRANTS DISTRIBUTED.

732075 10-06-17

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	drais	ing or Gaming	Activ	vities	OMB No. 1545-0047
(Form 990 or 990-EZ)	Complete if the	e organization answered "Yes" on	Form	990, I	Part IV, line 17, 18, c			2017
Department of the Treasury Internal Revenue Service	C	rganization entered more than \$1 ► Attach to Form 990 ► Go to www.irs.gov/Form990	or Fo	rm 99	0-EZ.			Open to Public Inspection
Name of the organization		N IN CONFLICT, INC					Employer id 81-4282	entification number 2343
		Complete if the organization answe		'es" o	n Form 990, Part IV,	line 1	7. Form 990-E	Z filers are not
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	ions email solicitations tations licitations on have a written c ed in Form 990, P highest paid indiv	f ☐ Solicitat g ☐ Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	ion of ion of fundra (inclue rofess	non-g gover aising ding o ional 1	overnment grants nment grants events fficers, directors, trus fundraising services?	stees,	Ye	
(i) Name and addres or entity (fund		(ii) Activity	(iii) fundr have ci or con contribu	ustody trol of	(iv) Gross receipts from activity	tò (o f	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No				
3 List all states in whi or licensing.	ch the organizatio	on is registered or licensed to solicit o	contrib	oution	s or has been notified	d it is	exempt from	registration
LHA For Paperwork Re	eduction Act Not	ice, see the Instructions for Form	990 or	990-	EZ. S	Sched	lule G (Form	990 or 990-EZ) 2017

732081 09-13-17

Schedule G (Form 990 or 990-EZ) 2017 CHILDREN IN CONFLICT, INC.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

			(a) Event #1 BENEFIT EVENT	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	– col. (c))
	1	Gross receipts	439,094.			439,094
	2	Less: Contributions	13,973.			13,973
	3	Gross income (line 1 minus line 2)	425,121.			425,121
	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages	130,536.			130,536
	8	Entertainment	150,924.			150,924
	9	Other direct expenses	140 001			143,661
ŀ	10	Direct expense summary. Add lines 4 throu			>	425,121
	11	Net income summary. Subtract line 10 from	n line 3, column (d)		>	0
ar	rt I	• • • • • • • • • • • • • • • •	n answered "Yes" on Form	ו 990, Part IV, line 19, or ו	reported more than	
_		\$15,000 on Form 990-EZ, line 6a.		a Dull to be fine to at		
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (d
-	1	Gross revenue				
	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses			· · · · · · · · · · · · · · · · · · ·	
	6	Volunteer labor	Yes %	└── Yes % └── No	└── Yes % └── No	,
	v					
		Direct expense summary. Add lines 2 throu	ıgh 5 in column (d)		►	
	7					
	7	Direct expense summary. Add lines 2 throu Net gaming income summary. Subtract line				
,	7 8 Ent	Net gaming income summary. Subtract line	e 7 from line 1, column (d) ducts gaming activities:		►	
) a	7 8 Ent	Net gaming income summary. Subtract line ter the state(s) in which the organization con he organization licensed to conduct gaming	e 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	►	Yes N
a	7 8 Ent	Net gaming income summary. Subtract line	e 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	►	
a	7 8 Ent	Net gaming income summary. Subtract line ter the state(s) in which the organization con he organization licensed to conduct gaming	e 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	►	
) a b	7 Ent Is t If "I	Net gaming income summary. Subtract line ter the state(s) in which the organization con he organization licensed to conduct gaming	e 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	Þ	
a b	7 Ent Is t If "I	Net gaming income summary. Subtract line ter the state(s) in which the organization con he organization licensed to conduct gaming No," explain:	e 7 from line 1, column (d) ducts gaming activities: activities in each of these	states?	Þ	

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<u>S</u> ch	edule G (Form 990 or 990-EZ) 2017 CHILDREN IN CONFLICT, INC.	<u>31-4</u> 2	<u>28</u> 2	<u>3</u> 43	Page 3
	Does the organization conduct gaming activities with nonmembers?			Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		_		
	to administer charitable gaming?			Yes	🗌 No
13	Indicate the percentage of gaming activity conducted in:				
a	The organization's facility		13a		%
b	An outside facility	[13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and record	s:			
	Name				
	Address				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?			Yes	🗌 No
b	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount	nt			
	of gaming revenue retained by the third party ▶\$				
c	If "Yes," enter name and address of the third party:				
	Name				
	Address				
16	Gaming manager information:				
	Name				
	Gaming manager compensation 🕨 \$				
	Description of services provided 🕨				
	Director/officer Employee Independent contractor				
	Director/officer Employee Independent contractor				
17	Mandatory distributions:				
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to				
	retain the state gaming license?			Yes	No No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			
_	organization's own exempt activities during the tax year 🕨 \$				
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	urt III, lin	es 9,	9b, 10	0b, 1 5b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				
7320	83 09-13-17 Schedule G	i (Form	990 c	or 990	-EZ) 2017
-	38 1112 750420 GTG 2017 04020 GUTLDDEN IN CONFLICT	TNO		~ 7 7	1

11291112 759420 CIC

2017.04030 CHILDREN IN CONFLICT, INC. CIC____1

Schedule G (Form 990 or 990-EZ)	CHILDREN	IN	CONFLICT,	INC.
Part IV	Supplemental Info	rmation (continue	ed)		

732084 04-01-17	39 2017.04030 CHILDREN IN CONFLICT, INC. CIC1
	Schedule G (Form 990 or 990-EZ

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

ZU

Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Open To Public Inspection

Name of the	e organization
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► Go to www.irs.gov/Form990 for the latest information.

Nam	e of the organization				E	mployer identif	ficatio	n nur	nber
	CHILDREN IN	CONFLI	CT, INC.			81-42	2823	843	
Pa	t I Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	no	(d) Method of det ncash contribut		•	s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution - Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other \blacktriangleright (GIFT BAG ITEM)	X	8	126,637.	FMV				
26	Other • ()								
27	Other ()								
28	Other 🕨 ()								
29	Number of Forms 8283 received by the organization completed Form 828								
30-2	During the year, did the organization receive by	v contributic	n any property ro	norted in Part I lines 1 throu	ah 28 +	hat it		Yes	No
504	must hold for at least three years from the date								
	exempt purposes for the entire holding period?						30a		х
h	If "Yes," describe the arrangement in Part II.	•					000		
31	Does the organization have a gift acceptance	oolicy that r	equires the review	of any nonstandard contribu	utions?		31		х
	Does the organization hire or use third parties					F	<u></u>		
02U			•				32a		X
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,				
	describe in Part II.								
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule M	(Form	990)	2017

732141 09-07-17

11291112 759420 CIC

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Part II

732142 09-07-17			Schedule M (Form 990) 2017
		41	
291112 759420 CIC	2017.04030	CHILDREN IN CONF	LICT. INC. CIC 1

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1

SCHEDULE O

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

Internal Revenue Service Name of the organization 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.

EZ 2017 Open to Public Inspection Employer identification number

81-4282343

OMB No 1545-0047

CHILDREN IN CONFLICT, INC.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CHILDREN IN CONFLICT WAS ESTABLISHED AS A PARTNER OF WAR CHILD UK.

CHILDREN IN CONFLICT SHARES WAR CHILD UK'S MISSION AND EXISTS IN

PARTNERSHIP TO BROADEN THE GLOBAL IMPRINT BY BUILDING NEW ALIGNMENTS

AND INCREASING AWARENESS IN THE US.

OUR MISSION: WE PROTECT, EDUCATE, AND PROVIDE HOPE FOR CHILDREN CAUGHT

UP IN CONFLICT.

OUR VISION: A WORLD WHERE NO CHILD'S LIFE IS TORN APART BY WAR.

CHILDREN IN CONFLICT STRIVES TO RAISE AWARENESS AND FUNDS FOR THE

CRITICAL HUMANITARIAN ASSISTANCE WARCHILD UK PROVIDES TO CHILDREN IN

CONFLICT ZONES. WAR CHILD UK'S PROGRAMS AND GEOGRAPHIC FOCUS HAVE

EVOLVED THROUGHOUT ITS HISTORY TO MEET THE MOST PRESSING NEEDS OF THE

GLOBAL COMMUNITY.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

52% GIRLS AND WOMEN. 8,819 OF THESE BENEFICIARIES WERE SUPPORTED

THROUGH RECREATIONAL ACTIVITIES, PSYCHOSOCIAL SUPPORT, TEMPORARY

LEARNING SPACES, FAMILY TRACING, AND REUNIFICATION.

IRAQ - 46,761 BENEFICIARIES WERE REACHED, INCLUDING 50% GIRLS AND

WOMEN. THOUSANDS OF DISPLACED CHILDREN RECEIVED SUPPORT RECEIVING

ACCESS TO CHILD-FRIENDLY SPACES WHERE CHILDREN CAN PLAY SAFELY, ACCESS

LIFE SKILLS, AND PSYCHOSOCIAL SUPPORT.

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

INFORMATION TO PERPARE FORM 990 IS PROVIDED BY MANAGEMENT AND THE FINANCIAL

 CONSULTANT. THE EXECUTIVE DIRECTOR, CHAIR OF THE BOARD, AND TREASURER OF

 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
 732211

42 2 CHT

Schedule O (Form 990 or 990-EZ) (2017) Page 2										
Name of the organization CHILDREN IN CONFLICT, INC. Employer identification number 81-4282343										
THE BOARD REVIEW THE FORM 990 AND ADVISE IF ANY CH	ANGES NEED TO BE MADE									
BEFORE FILING, THE 990 IS EMAILED TO ALL BOARD MEMB	ERS BEFORE FILING.									

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

THE GOVERNANCE COMMITTEE OF THE BOARD IS RESPONSIBLE FOR MONITORING CONFLICTS OF INTEREST. AN ANNUAL CONFLICT OF INTEREST DISCLOSURE FORM IS REQUIRED TO BE FILLED OUT EACH YEAR BY BOARD MEMBERS, OFFICERS AND KEY

EMPLOYEES.

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

THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS REVIEWED EVERY YEAR BY THE BOARD. A REVIEW OF RECENT COMPARATIVE INFORMATION, INCLUDING VARIOUS COMPENSATION SURVEYS OF SIMILAR SIZED NONPROFIT ORGANIZATIONS IN THE NY METROPOLITAN AREA, IS PERFORMED BEFORE DETERMINING AND APPROVING A REASONABLE AND COMPETITIVE COMPENSATION LEVEL FOR THE EXECUTIVE DIRECTOR.

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

AVAILABLE UPON REQUEST

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

FOREIGN CURRENCY EXCHANGE GAIN

6,610.

732212 09-07-17

2017.04030 CHILDREN IN CONFLICT, INC. CIC___1

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2017 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10

990

FORM 9	RM 990 PAGE IU					-	990								
Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	MACHINERY & EQUIPMENT														
1	COMPUTER EQUIPMENT	11/27/17	SL	3.00		16	5,372.				5,372.			895.	895.
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT						5,372.				5,372.	٥.		895.	895.
	* GRAND TOTAL 990 PAGE 10 DEPR						5,372.				5,372.	0.		895.	895.

728111 04-01-17

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

(Rev. January 2017)

Department of the Treasury

Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Entor filor's identifying number

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/efile*, click on Charities & Non-Profits, and click on *e-file* for *Charities and Non-Profits*.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

					er situentinyn	ig number		
Type or	Name of exempt organization or other filer, see instru	Employe	mployer identification number (EIN) o					
print								
File by the	CHILDREN IN CONFLICT, INC.	81-4282343						
due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, s 379 WEST BROADWAY, NO. 511	Social se	ocial security number (SSN)					
instructions	City, town or post office, state, and ZIP code. For a to NEW YORK, NY 10012							
Enter the	Return Code for the return that this application is for (fi	ile a separa	ate application for each return)			01		
Application Return Application					Return			
ls For		Code	Is For	Code				
Form 990) or Form 990-EZ	01	Form 990-T (corporation)	07				
Form 990)-BL	02	Form 1041-A	08				
Form 472	20 (individual)	03	Form 4720 (other than individual)	09				
Form 990)-PF	04	Form 5227			10		
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069		11			
Form 990)-T (trust other than above)	06	Form 8870			12		
 If this box 1 I reform 	organization does not have an office or place of busines is for a Group Return, enter the organization's four digit . If it is for part of the group, check this box ▶ quest an automatic 6-month extension of time until the organization named above. The extension is for the X calendar year 2017 or	Group Exe and atta	emption Number (GEN) Ich a list with the names and EINs o MBER 15, 2018 , to file	f this is fo f all memb	r the whole g ers the exten	sion is for.		
•	tax year beginning	, an	d ending					
2 If t	he tax year entered in line 1 is for less than 12 months, Change in accounting period	check reas	on: Initial return	Final retur	'n			
3a lft	nis application is for Forms 990-BL, 990-PF, 990-T, 4720), or 6069,	enter the tentative tax, less any					
no	nrefundable credits. See instructions.			3a	\$	0.		
b lft	nis application is for Forms 990-PF, 990-T, 4720, or 606	9, enter an	y refundable credits and					
est	imated tax payments made. Include any prior year over	payment a	llowed as a credit.	3b	\$	0.		
c Ba	lance due. Subtract line 3b from line 3a. Include your p	ayment wit	h this form, if required,					
by	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.		
Caution: instructio	If you are going to make an electronic funds withdrawa ns.	Il (direct de	bit) with this Form 8868, see Form 8	3453-EO a	nd Form 8879	-EO for payment		
LHA F	or Privacy Act and Paperwork Reduction Act Notice	, see instr	uctions.		Form 8	368 (Rev. 1-2017)		