### Form **990**

#### Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Governance

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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. Open to Public Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information. 2017, and ending For the 2017 calendar year, or tax year beginning D Employer identification number Check if applicable: X Address change World's Children 20-5276353 PO Box 2345 Name change Sisters, OR 97759 Initial return (541) 904-0789 Final return/terminated **G** Gross receipts \$ 736,325. Amended return Application pending F Name and address of principal officer: Patrick Spiger H(a) Is this a group return for subordinates Yes **H(b)** Are all subordinates included? If 'No,' attach a list. (see instructions) Yes Same As C Above Tax-exempt status X 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527 Website: ► www.worldschildren.org **H(c)** Group exemption number ▶ X Corporation Trust L Year of formation: 2007 Form of organization: M State of legal domicile: OR Summary Part I Briefly describe the organization's mission or most significant activities: To provide humanitarian aid and assistance to people and communities living in poverty around the world, and especially to those living in the most underdeveloped areas of the poorest third world countries. Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a)..... 3 Number of independent voting members of the governing body (Part VI, line 1b). Total number of individuals employed in calendar year 2017 (Part V, line 2a)...... 5 Total number of volunteers (estimate if necessary)..... 6 7a Total unrelated business revenue from Part VIII, column (C), line 12... 7a **b** Net unrelated business taxable income from Form 990-T. line 34..... **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 718,119. 686,394. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)...... 18,206. 20,081 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 706,475 736,325. Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... 479,276 520,010. Benefits paid to or for members (Part IX, column (A), line 4)..... Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . 150,999 173,202 **16a** Professional fundraising fees (Part IX, column (A), line 11e)..... b Total fundraising expenses (Part IX, column (D), line 25) ▶ Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 63,199 79,475. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)...... 693,474. 772,687. Revenue less expenses. Subtract line 18 from line 12..... 13,001. -36.362.End of Year **Beginning of Current Year** 20 Total assets (Part X, line 16)..... 761,495 728,060

#### Signature Block

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

Sign	Signature of	of officer		[	Date					
Here		Purviance		Executive Dir.						
	Type or prin	nt name and title								
	Print/Type prep	arer's name	Preparer's signature	Date	Check if	PTIN				
Paid	Richard	Winkel	Richard Winkel		self-employed	P00846914				
Preparer	Firm's name  Richard Winkel, CPA, INC.									
Use Only	Firm's address	► PO Box 91637		Firm's EIN ► 412248554						
		Portland, OR	97291		Phone no. 503	-332-6750				
May the IRS	May the IRS discuss this return with the preparer shown above? (see instructions)									

Total liabilities (Part X. line 26).....

Net assets or fund balances. Subtract line 21 from line 20.....

6,523

754,972

13,986.

714,074.

Page 2

Par	CIII	Statement of Program Service Accomplishments	v
	Duite	Check if Schedule O contains a response or note to any line in this Part III.	X
1		ifly describe the organization's mission:	
		provide humanitarian aid and assistance to people and communities living	
		verty around the world, and especially to those living in the most underc	<u>leveloped                                    </u>
	<u>ar</u> e	eas of the poorest third world countries.	
	D: 1.1		
2		the organization undertake any significant program services during the year which were not listed on the prior	
		m 990 or 990-EZ?	Yes X No
		'es,' describe these new services on Schedule O.	🗖
3		the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
_		es,' describe these changes on Schedule O.	
4	Desc	cribe the organization's program service accomplishments for each of its three largest program services, as measure tion 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	d by expenses.
	and	revenue, if any, for each program service reported.	otal expenses,
4 a	(Coc	de: ) (Expenses \$ 710,665. including grants of \$ 520,010.) (Revenue \$	)
		e Schedule O	
	<u>500</u>		
/ h	(Coc	de: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
70	(000		
1.0	(Coc	de: ) (Expenses \$ including grants of \$ ) (Revenue \$	)
40	(000	The lates of the l	
اہ 1/	Otha	er program services (Describe in Schedule O.)	
4 a		er program services (Describe in Schedule O.) penses \$ including grants of \$ ) (Revenue \$	`
1.			
4€	ı Uld	al program service expenses > 710,665.	

## Form 990 (2017) World's Children Part IV Checklist of Required Schedules

		Yes	No
Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part l</i>	3		Х
<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		Х
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
Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I.	6		Х
Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7		Х
Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		X
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? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V.</i>	10	Х	
If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or $X$ as applicable.			
Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	Х	
Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII.	11 b	Х	
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.	11 c		Х
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.	11 d		Х
Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
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)? <i>If 'Yes,' complete Schedule D, Part X.</i>	11 f		Х
Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
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	
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15	Х	
Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
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 (see instructions).	17		X
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
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
	Schedule A  Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?.  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If Yes, complete Schedule C, Part II.  Section 501(24) organizations, Did the organization engage in lobbying activities, or have a section 501(4) election in effect during the tax year? If Yes, 'complete Schedule C, Part II.  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.  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 C, Part III.  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.  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If Yes, 'complete Schedule D, Part II.  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 counselling, debt management, credit repair, or debt negotiation services? If Yes, 'complete Schedule D, Part V.  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If Yes, 'complete Schedule D, Part V.  Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If Yes, 'complete Schedule D, Part VI.  Did the organization report an amount for other assets in Part X, line 15 t	Schedule A  In the organization required to complete Schedule B, Schedule of Contributors (see instructions)?  2  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If Yes, complete Schedule C, Part I.  3  Section 501(CA) organizations, but the organization engage in lobbying activities, or have a section 501(f) election in effect during the lax year? If Yes, complete Schedule C, Part II.  4  Is the organization as section 501(c)(4), 501(c)(6), or 501(	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If Yes, complete Schedule B, Schedule of Contributors (see instructions)?  2

## Form 990 (2017) World's Children 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		Χ
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Χ
ŀ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and 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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	3, 11, 11, 11, 11, 11, 11, 11, 11, 11, 1	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
ŀ	o 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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O.	38	Х	

# Form 990 (2017) World's Children Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V....

Check if Schedule C Contains a response of finite to any line in this fact v			لللن
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.   1 a			
<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Χ	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		Х
<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i>	3 b		
<b>4 a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
<b>b</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).			
<b>5 a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
•			
<b>6 a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
<b>b</b> If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a 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?	7 a		X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		<u> </u>
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year	70		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the 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?	9 a		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12			
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities <b>10 b</b>			
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders			
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<b>b</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.			
a 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>b</b> Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand			
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b		
BAA TEEA0105L 08/08/17	Form	1 <b>990</b> (	(2017)

Jean Purviance PO Box 2345

Form 990 (2017) World's Children 20-5276353 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. . . . . 8 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? See Schedule 0 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... Χ 15a 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed OR FL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records:

(541)

904-0789

Sisters OR 97759

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

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

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

- 1 a 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 related organization compensated any current officer, director, or trustee.

		(C)								
(A) Name and Title	(B) Average hours per	is	both dire	an o	officer /trust	eck moss pers and a ee)		(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Bruce Moore	2									
Treasurer	0	Χ		Χ				0.	0.	0.
(2) Roslyn Moore	2									
Director	0	Χ						0.	0.	0.
(3) Jean Purviance	30_									
Secretary	0	Χ		Χ				23,833.	0.	0.
(4) Patrick Spiger	3									
President	0	Χ		Χ				0.	0.	0.
(5) Elizabeth Oettinger	1									
Director	0	Χ						0.	0.	0.
(6) Sri Devi Talluri	1									
Director	0	Χ						0.	0.	0.
_(7) Meghan Fitzgerald	1									
Director	0	Χ						0.	0.	0.
_(8) Marie Long	1									
Director	0	Χ						0.	0.	0.
(9) Patrick Davenport	1	ļ								
Director	0	Χ						0.	0.	0.
(10) David Purviance	_ 40 _							<b>54</b> 000		
Executive Dir.	0			Χ				51,833.	0.	0.
<u>(11)</u>										
(12)										
(13)										
(14)										

Form 990 (2017) World's Children 20-5276353 Page <b>8</b>											
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
<b>(A)</b> Name and title	Average hours per week (list any list a			(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E)  Reportable compensation from related organizations	Est amour comp	(F) imated nt of other pensation				
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	orga and	om the nization related nizations
(15)											
(16)											
(17)											
(18)											
(19)											
(20)											
(21)											
(22)											
(23)											
(24)											
(25)											
1 b Sub-total.							<b>&gt;</b>	75,666.	0.		0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							<b>-</b>	75,666.	0.		0.
2 Total number of individuals (including but not limited from the organization ► 0							ved			pensation	
Did the organization list any former officer, direct	tor or tru	otoo	lvov		anla	100	or b	oighast sampanas	tod omploves		Yes No
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ıal								. 3	Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	er than \$1	50,00	00'?	If '	es,	' com	iple	te Schedule J for		. 4	Х
5 Did any person listed on line 1a receive or accrude for services rendered to the organization? <i>If 'Yes</i>	e comper s,' comple	satio te So	on fr chec	om dule	any <i>J fo</i>	unre r suc	late ch p	ed organization or erson	individual	. 5	Х
1 Complete this table for your five highest compensation from the organization. Report compen	sated indes	epen the c	den alen	t coi	ntra year	ctors endii	tha	it received more to with or within the or	nan \$100,000 of ganization's tax yea	r.	
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y  (A)  Name and business address  Description of services							of services	(C Comper	) nsation		
Total number of independent contractors (including by	out not lim	ited to	o the	ose I	listed	d abo	ve)	who received more	than		
\$100,000 of compensation from the organization	▶ 0										

## Form 990 (2017) World's Children Part VIII Statement of Revenue

	Check if Schedule O contains a response or note to an	y line in this Part V	III		
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns 1 a   b Membership dues 1 b   c Fundraising events 1 c   d Related organizations 1 d   e Government grants (contributions) 1 e   f All other contributions, gifts, grants, and similar amounts not included above 1 f   g Noncash contributions included in lines 1a-1f: \$				
a S	h Total. Add lines 1a-1f	718,119.			
	Business Code				
Program Service Revenue	2 a b c d e f All other program service revenue g Total. Add lines 2a-2f				
ш.					
	<ul> <li>Investment income (including dividends, interest and other similar amounts).</li> <li>Income from investment of tax-exempt bond proceeds.</li> <li>Royalties.</li> </ul>	10/200.			18,206.
	(i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
Other Revenue	8 a Gross income from fundraising events (not including. \$ of contributions reported on line 1c).  See Part IV, line 18				
듄	c Net income or (loss) from fundraising events ▶				
_	9 a Gross income from gaming activities. See Part IV, line 19 a				
	<b>b</b> Less: direct expenses <b>b</b>				
	c Net income or (loss) from gaming activities▶				
	10a Gross sales of inventory, less returns and allowancesa b Less: cost of goods soldb c Net income or (loss) from sales of inventory▶				
	Miscellaneous Revenue Business Code				
	11a Misc income  b  c				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	736.325	0	0.	18.206.

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do i	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3	·
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	520,010.	520,010.		
4	Benefits paid to or for members	320,010.	320,010.		
5	Compensation of current officers, directors, trustees, and key employees	75,666.	55,276.	12,461.	7,929.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7		80,624.	58,899.	13,276.	8,449.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	00,021.	30,033.	13/2/0.	0,113.
9	Other employee benefits	3,257.	2,380.	536.	341.
10	Payroll taxes	13,655.	9,975.	2,249.	1,431.
11	Fees for services (non-employees):				
ā	a Management				
ŀ	<b>)</b> Legal	362.	264.	60.	38.
	Accounting	6,222.	4,545.	1,025.	652.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	7,403.	5,943.	892.	568.
13	Office expenses	3,576.	2,612.	589.	375.
14	Information technology	373731			0.00
15	Royalties.				
16	Occupancy	13,111.	9,578.	2,159.	1,374.
17	Travel	2,163.	1,580.	356.	227.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	897.	655.	148.	94.
	Insurance	2,679.	1,957.	441.	281.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	Program expenses	20,535.	20,535.		
	Bank fees	8,242.	6,021.	1,357.	864.
	Printing and Publications	5,962.	4,355.	982.	625.
	Postage and Shipping	5,483.	4,005.	903.	575.
	All other expenses	2,840.	2,075.	467.	298.
25	<b>Total functional expenses.</b> Add lines 1 through 24e	772,687.	710,665.	37,901.	24,121.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

		Check if Schedule O contains a response or note to	any lin	e in this Part X					
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year		
	1	Cash – non-interest-bearing			424,752.	1	242,840.		
	2	Savings and temporary cash investments			122,828.	2	285,748.		
	3	Pledges and grants receivable, net			•	3	•		
	4	Accounts receivable, net				4			
	5	Loans and other receivables from current and former of trustees, key employees, and highest compensated en	officers, nployee	directors, s. Complete					
		Part II of Schedule L			5				
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958(c)(3 employers and sponsoring organizations of section 501(c)( beneficiary organizations (see instructions). Complete	rsons (a )(B), an (9) volun Part II	as defined under d contributing tary employees' of Schedule L		6			
ts	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			
As	9	Prepaid expenses and deferred charges			12,294.	9	3,284.		
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10 a	9,993.	,		,		
	b	Less: accumulated depreciation		8,361.	2,529.	10 c	1,632.		
	11	Investments – publicly traded securities		- /	2,023.	11	1,002.		
	12	Investments – other securities. See Part IV, line 11			199,092.	12	194,556.		
	13	Investments – program-related. See Part IV, line 11	133,032.	13	131,000.				
	14		gible assets						
	15	Other assets. See Part IV, line 11		15					
	16	Total assets. Add lines 1 through 15 (must equal line 3			761,495.	16	728,060.		
	17	Accounts payable and accrued expenses		6,523.	17	13,986.			
	18	Grants payable			0,0201	18	20/3001		
	19	Deferred revenue		19					
	20	Tax-exempt bond liabilities				20			
S	21	Escrow or custodial account liability. Complete Part IV	of Sch	nedule D		21			
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	disqual	ified persons.		22			
Ĭ	22	•		<b> -</b>		23			
	23 24	Secured mortgages and notes payable to unrelated this Unsecured notes and loans payable to unrelated third		<b> -</b>		24			
		·	•			24			
	25 26	Other liabilities (including federal income tax, payables and other liabilities not included on lines 17-24). Comp <b>Total liabilities.</b> Add lines 17 through 25			C F22	25 26	12.006		
	20				6,523.	20	13,986.		
ces		Organizations that follow SFAS 117 (ASC 958), check her lines 27 through 29, and lines 33 and 34.	•	_					
<u>a</u>	27	Unrestricted net assets		<b> -</b>	251,758.	27	159,524.		
Ba	28	Temporarily restricted net assets	<u> </u>	267,539.	28	323,911.			
þ	29	Permanently restricted net assets			235,675.	29	230,639.		
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), che and complete lines 30 through 34.	;▶ ∐						
9	30	Capital stock or trust principal, or current funds			30				
8	31	Paid-in or capital surplus, or land, building, or equipme	ent fund	1		31			
As	32	Retained earnings, endowment, accumulated income,	or othe	r funds		32			
et	33	Total net assets or fund balances			754,972.	33	714,074.		
_	34	Total liabilities and net assets/fund balances			761,495.	34	728,060.		

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Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.				. 🔲		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7:	36,3	325.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	72,6	587.		
3	Revenue less expenses. Subtract line 2 from line 1	3			362.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			972.		
5	Net unrealized gains (losses) on investments	5			536.		
6	Donated services and use of facilities	6		•			
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7:	14,0	)74.		
Pa	rt XII Financial Statements and Reporting	•					
	Check if Schedule O contains a response or note to any line in this Part XII				. $\square$		
-				Yes	_—		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	Χ			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis	d on a					
ı	Were the organization's financial statements audited by an independent accountant?		2 b		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te					
	Separate basis Consolidated basis Both consolidated and separate basis						
(	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c		Х		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
3	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?						
	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b				
BAA			Form	990	(2017)		

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**2017** 

Open to Public Inspection

Name of the organization Employer identification number World's Children 20-5276353 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	Section A. Public Support								
begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	551,577.	735,589.	768,457.	686,394.	718,119.	3,460,136.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
	<b>Total.</b> Add lines 1 through 3 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)	551,577.	735,589.	768,457.	686,394.	718,119.	3,460,136.		
6	Public support. Subtract line 5 from line 4						3,153,942.		
Sec	tion B. Total Support						0/100/3121		
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total		
7	Amounts from line 4	551,577.	735,589.	768,457.	686,394.	718,119.	3,460,136.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	13,838.	13,993.	15,333.	20,081.	17,391.	80,636.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	20,000	=3,3333	=2,2323	20,0020	2.,,0020	0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.			333.			333.		
	Total support. Add lines 7 through 10						3,541,105.		
12	Gross receipts from related activ	ities, etc. (see ins	tructions)			12	0.		
13	<b>First five years.</b> If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶ □		
Sec	tion C. Computation of Pul Public support percentage for 20	blic Support P	ercentage			1 1			
	Public support percentage for 20 Public support percentage from 2						89.07 % 91.40 %		
	33-1/3% support test—2017. If the and stop here. The organization	he organization di	d not check the bo	ox on line 13. and	d line 14 is 33-1/3	wor more, check	this box		
b	33-1/3% support test—2016. If the and stop here. The organization	e organization did	not check a box	on line 13 or 16a	, and line 15 is 33	3-1/3% or more, c	check this box		
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this	box and stop her	e. Explain in Part	VI how		
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and Private foundation. If the organization	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	' test, check this tion qualifies as a	box and <b>stop her</b> a publicly support	<b>e.</b> Explain in Part ed organization.	VI how the▶		

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.)

Sec	tion A. Public Support		product compress :	<u>,</u>			
	lar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	(a) 2010	(5) 2514	(0) 2010	(a) 2310	(6) 2017	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support				T	T	
	dar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and						
Sec	tion C. Computation of Pul	blic Support F	Percentage				
15	Public support percentage for 20	17 (line 8, colum	n (f) divided by lin	e 13, column (f)	)	15	%
	Public support percentage from 2				<u></u>	16	%
Sec	tion D. Computation of Inv						
17		•	• • •	-			90
18	Investment income percentage f	rom <b>2016</b> Schedu	ıle A, Part III, line	17		18	%
19a	<b>33-1/3% support tests—2017.</b> If t is not more than 33-1/3%, check	the organization of this box and <b>sto</b>	did not check the b <b>p here.</b> The organ	ox on line 14, ar ization qualifies	nd line 15 is more as a publicly supp	than 33-1/3%, and orted organization	I line 17
	<b>33-1/3% support tests—2016.</b> If the line 18 is not more than 33-1/3% <b>Private foundation.</b> If the organization of the support tests—2016.	, check this box	and <b>stop here.</b> The	e organization qu	ualifies as a public	ly supported organ	ization ►

#### 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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	За		
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 <b>Part VI</b> when and how the organization made the determination.	3b		
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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
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? <i>If 'Yes,' provide detail in Part VI.</i>	6		
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? <i>If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7		
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).	8		
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 <b>Part VI</b> .	9a		
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 <b>Part VI</b> .	9b		
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 <b>Part VI</b> .	9с		
l0a	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.	10a		
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.)	10b		

Pa	art iv Supporting Organizations (Continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
	<b>a</b> 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		
	<b>b</b> A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in <b>Part VI</b> .	11c		
Se	ction 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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Se	ction 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 year (see instructions).			
	a  The organization satisfied the Activities Test. <i>Complete line 2 below.</i>			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	ıstruc	tions).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a 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 <b>Part VI identify those supported</b> 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	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. <i>Answer (a) and (b) below.</i>			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	За		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i>	3b		

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anizat		.70555 Tage
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization	ist on No	ov. 20, 1970 (explain in	n Part VI). <b>See</b> through E.
Sec	tion 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		
Sec	tion 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 shor tax year or assets held for part of year):	t		
a	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
(	Fair market value of other non-exempt-use assets	1c		
(	d Total (add lines 1a, 1b, and 1c)	1d		
•	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		
Sec	tion 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Schedule A (Form 990 or 990-EZ) 2017

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

10 Line 8 amount divided by line 9 amount

	, , , , , , , , , , , , , , , , , , , ,	
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion 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	<b>Total annual distributions.</b> Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	

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			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2017			
a			
<b>b</b> From 2013			
<b>c</b> From 2014			
<b>d</b> From 2015			
<b>e</b> From 2016			
f Total of lines 3a through e			
<b>g</b> 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>b</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.			
<b>6</b> 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>b</b> Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			
PAA		Schodulo A (Fo	rm 990 or 990 EZ) 2017

BAA

Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### Part II, Line 10 - Other Income

Nature and Source	<u> </u>	2017	2016		2015	2014	2013	
Other income				\$	333.			
	Total 🕏	0.	\$ 0	. \$	333.	\$ 0.	\$	0.

### SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

	World's Children			20-5276353	
Par	է   Organizations Maintaining Dono	r Advised Funds or Othe	er Similar Funds	s or Accounts.	
	Complete if the organization answ	vered 'Yes' on Form 990,	Part IV, line 6.		
		(a) Donor advised f	unds	(b) Funds and other acco	ounts
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 don are the organization's property, subject to the	or advisors in writing that the organization's exclusive legal	assets held in dono control?	or advised funds	No
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	of the donor or donor advisor,	or for any other pu	rpose conferring	□No
Par					
ı aı	Complete if the organization answ	wered 'Yes' on Form 990	Part IV. line 7.		
1	Purpose(s) of conservation easements held by				
	Preservation of land for public use (e.g., re	• • • • •	_ ''''	historically important land ar	ea
	Protection of natural habitat	, l	Preservation of a	certified historic structure	
	Preservation of open space	L			
2	Complete lines 2a through 2d if the organization h last day of the tax year.	eld a qualified conservation cont	ribution in the form o	of a conservation easement on the	he
				Held at the End of the	ie Tax Year
-	a Total number of conservation easements			_ = *:	
	<b>b</b> Total acreage restricted by conservation easer				
•	c Number of conservation easements on a certif	ied historic structure included	in (a)	2 c	
(	d Number of conservation easements included in structure listed in the National Register			2 d	
3	Number of conservation easements modified, tran tax year ►	sferred, released, extinguished, of	or terminated by the	organization during the	
4	Number of states where property subject to conse	rvation easement is located >			
5	Does the organization have a written policy re- and enforcement of the conservation easemer				□No
6	Staff and volunteer hours devoted to monitoring, i				
Ū	►	hispooting, harraning or violations,	and emorening conse	sivation easements daring the y	oui
7	Amount of expenses incurred in monitoring, inspe ▶\$	cting, handling of violations, and	enforcing conservati	on easements during the year	
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the red	quirements of section	on 170(h)(4)(B)(i) <b>Yes</b>	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote t conservation easements.	conservation easements in its reo the organization's financial s	evenue and expense tatements that des	statement, and balance sheet, a cribes the organization's acco	and ounting for
Par	Organizations Maintaining Collectory Complete if the organization answers	ctions of Art, Historical 7 wered 'Yes' on Form 990	<b>Freasures, or O</b> , Part IV, line 8.	ther Similar Assets.	
1 8	a If the organization elected, as permitted under art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its finan	ld for public exhibition, education	i, or research in furth	e statement and balance shee erance of public service, provid	et works of e,
ı	b If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items:	SFAS 116 (ASC 958), to repo or public exhibition, education, or	rt in its revenue sta research in furtherar	atement and balance sheet wonce of public service, provide the	orks of art, e
	(i) Revenue included on Form 990, Part VIII,				
	(ii) Assets included in Form 990, Part X				
	amounts required to be reported under SFAS	116 (ASC 958) relating to these	e items:		
	a Revenue included on Form 990, Part VIII, line				
	<b>b</b> Assets included in Form 990, Part X	<u></u>		▶\$	

Part III   Organizations Maintai	ining Colle	ctions of	Art, Histori	icai i rea	sures, or O	ther Similar Ass	ets (co	ntinu	ea)
3 Using the organization's acquisition, items (check all that apply):	, accession, ar	nd other reco	rds, check any	of the follo	owing that are a	significant use of its	collectior	1	
<b>a</b> Public exhibition		(	<b>d</b> Loan or	exchange	programs				
<b>b</b> Scholarly research		•	Other						
c Preservation for future generation									
4 Provide a description of the organize Part XIII.	ation's collection	ons and expl	ain how they fo	urther the c	rganization's ex	kempt purpose in			
5 During the year, did the organization to be sold to raise funds rather the	nan to be maii	ntained as p	art of the org	anization's	s collection?		Yes		No
Part IV Escrow and Custodial line 9, or reported an a	amount on	Form 990	, Part X, lii	e organiz ne 21.	zation answ	ered Yes on Fo	rm 990	, Par	[ IV,
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodia	n or other in	termediary fo	r contribut	ions or other a	assets not included	Yes		No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII a	nd complete	the following	g table:					<u> </u>
							Amount		
<b>c</b> Beginning balance						1 c			
<b>d</b> Additions during the year						1 d			
e Distributions during the year						1 e			
<b>f</b> Ending balance						1 f			
2a Did the organization include an a						-	Yes	L	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII. (	Check here i	f the explana	tion has be	een provided c	on Part XIII		· · · · L	
			1.	1.15.4		000 5 1 1 / 1:	1.0		
Part V   Endowment Funds. C									
1 - Paginning of year belongs	(a) Current		(b) Prior year		wo years back	(d) Three years back	_	our years	
<b>1 a</b> Beginning of year balance <b>b</b> Contributions	235,	675.	232,83		235,439.	226,103		<u>ZZ3,</u>	775.
<b>b</b> Contributions			80	0.	2,000.		+		
c Net investment earnings, gains,	Ω	355.	2,04	<b>Λ</b>	-4,608.	9,336		2	328.
and losses	-13,		2,04	4.	4,000.	9,330	•		320.
e Other expenditures for facilities	-13,	391.							
and programs						0.			
f Administrative expenses									
<b>g</b> End of year balance	230,	639.	235,67	5.	232,831.	235,439	,	226,	103.
2 Provide the estimated percentage	e of the currer	nt year end l	balance (line	1g, colum	n (a)) held as:				
a Board designated or quasi-endowme	ent ►		_%						
<b>b</b> Permanent endowment ►	100.00 %								
c Temporarily restricted endowmen		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
The percentages on lines 2a, 2b, ar	nd 2c should ed	qual 100%.							
3a Are there endowment funds not in the	he possession	of the organi	zation that are	held and a	administered for	r the	_		
organization by:								Yes	No
(i) unrelated organizations							3a(i)		X
(ii) related organizations							3a(ii)		X
<b>b</b> If 'Yes' on line 3a(ii), are the rela	•		•		R?		. 3b		
4 Describe in Part XIII the intended			's endowmen	t tunas.					
Part VI Land, Buildings, and I Complete if the organi.			s' on Form	990, Pa	rt IV, line 1	1a. See Form 99	0, Part	X, lir	ne 10.
Description of property		(a) Cost or o	other basis ment)	(b) Cost (basis (	or other other)	(c) Accumulated depreciation	(d) E	Book va	lue
<b>1 a</b> Land		,		`	·				
<b>b</b> Buildings									
c Leasehold improvements									
<b>d</b> Equipment					9,993.	8,361.		1.	,632.
<b>e</b> Other					,	-,			
Total. Add lines 1a through 1e. (Colum	ın (d) must eq	ual Form 99	00, Part X, co	lumn (B),	line 10c.)			1,	,632.
BAA							ule <b>D</b> (Fo		

Part VII	Investments – Other Securities.	l'Voc' on Form 99(	Deart IV line 11h See Form 990 Part V line 13
(a) Des	complete if the organization answered cription of security or category (including name of security)	(b) Book value	D, Part IV, line 11b. See Form 990, Part X, line 12  (c) Method of valuation: Cost or end-of-year market value
	cial derivatives	(B) Book value	(c) motified of variations, cost of one of your market variation
` '	ly-held equity interests.		
	PFII Investment	194 556	End of Year Market Value
(A)		194,330.	and of feat market value
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(l)			
	ımn (b) must equal Form 990, Part X, column (B) line 12.) •	194,556.	
	I Investments – Program Related.		N/A
			), 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)			
(10)	umn (b) must equal Form 990, Part X, column (B) line 13.) 🕨		
Part IX	Other Assets.	N/A	
I dit ix	Complete if the organization answered	l 'Yes' on Form 990	), Part IV, line 11d. See Form 990, Part X, line 15
	<b>(a)</b> De	scription	(b) Book value
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	olumn (b) must equal Form 990, Part X, column (l	B) line 15.)	▶
Part X	Other Liabilities.		444.0 5 000 5 1741: 05
	Complete if the organization answered 'Yes' on F		Te or 11f. See Form 990, Part X, line 25
(1) Fod	(a) Description of liability eral income taxes	(b) Book value	
(1) Fed (2)	erai income taxes		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
	ımn (b) must equal Form 990, Part X, column (B) line 25.).		
Z. I jability f	for uncertain tax positions. In Part XIII, provide the text of the fo	otnote to the organization's fi	nancial statements that reports the organization's liability for uncertain

Part XI Reconciliation of Revenue per Audited Financial Statement	s With Revenue per Re	turn. N/A
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2 a	
<b>b</b> Donated services and use of facilities	2 b	
c Recoveries of prior year grants	2 c	
d Other (Describe in Part XIII.)	2 d	
e Add lines 2a through 2d.		2 e
3 Subtract line 2e from line 1.		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	
<b>b</b> Other (Describe in Part XIII.)	4 b	
c Add lines 4a and 4b.		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		5
David VII		
Part XII Reconciliation of Expenses per Audited Financial Statemer		Return. N/A
Complete if the organization answered 'Yes' on Form 990, P.		Return. N/A
	art IV, line 12a.	Return. N/A
Complete if the organization answered 'Yes' on Form 990, P	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	art IV, line 12a.	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities	2a 2b	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments	2a 2b 2c	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.	2a 2b 2c 2d	
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)	2a 2b 2c 2d	1
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	1 2 e
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities  b Prior year adjustments  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.	2a	1 2 e
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)	2a	1
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)  c Add lines 4a and 4b.	2a	1 2e 3
Complete if the organization answered 'Yes' on Form 990, P  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)	2a	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 XI, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule **D** (Form 990) 2017

#### **SCHEDULE F** (Form 990)

Department of the Treasury Internal Revenue Service

#### Statement of Activities Outside the United States

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

General Information on Activities Outside the United States. Complete if the organization answered 'Yes'

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

World's Children

on Form 990, Part IV, line 14b.

Employer identification number

20-5276353

1	For grantmakers. Does the the grantees' eligibility for	e organization mai the grants or assi	ntain records to s stance, and the s	substantiate the amount of its election criteria used to award	grants and other assista the grants or assistance	nce, e?XYes No				
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Part $V$									
3	Activities per Region. (The	following Part I, I	ine 3 table can be	e duplicated if additional space	e is needed.)					
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region				
					Sponsorship and					
(1)	South Asia		1	Grants to recipients	spec proj	498,190.				
					Sponsorship and					
(2)	Central America			Grants to recipients	spec proj	4,326.				
					Sponsorship and					
(3)	Sub-Saharan Africa			Grants to recipients	spec proj	17,494.				
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
3 a	Sub-total		1			520,010.				
ŀ	Total from continuation sheets to Part I									
•	Totals (add lines 3a and 3b)	0	1			520,010.				

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)
				Child					
(1)			Africa	sponsor	17,494.	Wire xfer			
400				Child					
(2)			South Asia	sponsor	11,503.	Wire xfer			
(2)				Child					
(3)			South Asia	sponsor	14,255.	Wire xfer			
(4)				Child					
(4)			South Asia	sponsor	15,493.	Wire xfer			
<b>(E)</b>				Child	10 454				
(5)			South Asia	sponsor	18,454.	Wire xfer			
(6)			C	Child	10 107	T.1			
(0)			South Asia	sponsor Child	19,107.	Wire xfer			
(7)			South Asia	sponsor	10 /00	Wire xfer			
(7)			South Asia	Child	15,455.	wile yier			
(8)			South Asia	sponsor	207 786	Wire xfer			
(-)			Boath Hola	Child	201,100.	WIIC XICI			_
(9)			South Asia	sponsor	28.556.	Wire xfer			
			Doddin Hold	Child	20,000.				
(10)			South Asia	sponsor	58,499.	Wire xfer			
				Child	•				
(11)			South Asia	sponsor	6,532.	Wire xfer			
				Child					
(12)			South Asia	sponsor	75,218.	Wire xfer			
				Child					
(13)			South Asia	sponsor	8,400.	Wire xfer			
				Child					
(14)			South Asia	sponsor	8,758.	Wire xfer			
(15)									
(16)									

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which		
	the grantee or counsel has provided a section 501(c)(3) equivalency letter	<b>&gt;</b>	14
3	Enter total number of other organizations or entities	<b>—</b>	

BAA Schedule F (Form 990) 2017

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>(b)</b> Region	(c) Number of recipients	<b>(d)</b> 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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
BAA	1	1		l	1	Schedule F	(Form 990) 2017

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

 BAA
 TEEA3505L
 08/10/17
 Schedule F (Form 990) 2017

#### Part V Supplemental Information

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

#### Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

For all project partners we require the following:

- A yearly audit by a chartered accountant
- Periodic reports and photos
- Forms such as case histories, child left home report, progress report and applications for college scholarships.

We have regular monthly contact by phone, email and post. The home or its parent organization must have government sanctioned charitable status and be allowed to receive funds, such as FCRA status in India.

Beginning in 2010 World's Children contracted the services of a nonprofit in India called the Spandana Society to help us monitor, evaluate and communicate more effectively with the orphanages and hostels we support in India.

Scholarships: The 33 orphanages assisted by World's Children help us publicize the availability of scholarships. Another significant contributor to the scholarship process is a nursing school, the ETCM Hospital School of Nursing in Kolar, India. World's Children also supports the Sacred Heart College of Nursing in Dindigul, India.

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#### SCHEDULE L (Form 990 or 990-EZ)

(9) (10)

#### Transactions With Interested Persons

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► 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

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization World's Children 20-5276353 **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (c) Description of transaction 1 (a) Name of disqualified person person and organization Yes No (1) (2)(3)(4) (5) (6) Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. ▶\$ Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (d) Loan to or from the organization? (h) Approved by board or committee? (b) Relationship with organization (c) Purpose of loan (e) Original principal amount (i) Written agreement? (a) Name of interested person (f) Balance due (g) In default? Τo From Yes No Yes No Yes No (1) (2)(3) (4) (5) (6)(7)(8) (9) (10)**▶**\$ Total **Grants or Assistance Benefiting Interested Persons.** Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. **(b)** Relationship between interested person and the organization (a) Name of interested person (c) Amount of assistance (d) Type of assistance (e) Purpose of assistance (1) (2) (3) (4) (5) (6) (7)(8)

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

Schedule L (Form 990 or 990-EZ) 2017

#### Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	nship between energy and the nization (c) Amount of transaction (d) Description of transaction		(e) Sharing organization revenues	
				Yes	No
(1) David Purviance	Exec Dir	2,595.	Home office expenses		X
(2) Jean Purviance	Secretary	2,595.	Home office expenses		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

#### **Supplemental Information**

The World's Children headquarters was in the home of David and Jean Purviance until July 2017 when an office was leased for the headquarters. World's Children paid a 40% portion of the home office rent and utilities directly to the companies involved (Elite Prop, Pacific Power, NW Natural, Comcast and Allied Waste). The Purviances personally paid 60% of rent and utilities. As of July 2017 World's Children leased an outside office and is no longer paying a portion of these home expenses.

#### **SCHEDULE 0** (Form 990 or 990-EZ)

#### 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.

2017

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

OMB No. 1545-0047

20-5276353

Employer identification number

World's Children

#### Form 990, Part III, Line 4a - Program Service Accomplishments

Child Sponsorship: Through the child sponsorship program, World's Children sent monetary aid for \$263,530 for the care of approximately 946 children in 33 orphanages in India, Ethiopia, and Guatemala. This support ensures that children living in the orphanages we support receive nutritious food, clean & warm clothes, medical care, a good education, and a safe and loving environment.

Healthy Child Fund: In 2017, World's Children supported a Healthy Girl Initiative at Balavikasita Orphanage in India that was funded by The Rosie Center in the amount of \$1859 to help girls through puberty. The girls received education and support, supplies, added nutrition, and doctor visits. This successful pilot project began in the fall of 2016. World's Children also funded a successful eye operation for \$3550 to keep a formerly sponsored young man from losing his eyesight and his job. Now he can support his whole family again.

Scholarships: World's Children aims for successful outcomes through our scholarship program for disadvantaged young men and women. In 2017, World's Children provided scholarships for 303 students for a total of \$148, 285. This includes children who come up through our sponsorship program and other needy students at two nursing colleges where we support the most vulnerable students. In 2017, 62 students graduated with degrees in Nursing, Hotel Management,

Bachelor of Arts, Bachelor of Science, Math, Engineering, Law, Civil Engineering, Pharmacy, Microbiology, Computer Technology, Chemistry, Physics, Business, Agriculture, vocational training and post-graduate degrees.

TEEA4901L 08/09/17

Schedule **O** (Form 990 or 990-EZ) (2017)

Name of the organization

World's Children

20-5276353

#### Form 990, Part III, Line 4a - Program Service Accomplishments

infrastructure at the orphanages we support. These projects positively affected the 946 sponsored children and 2600 unsponsored children living at these orphanages. These projects include: construction of one new kitchen and two kitchen renovations, 3 toilet facilities, roof construction, two bore wells, three computers with printers and one computer lab, two water tank repairs, two generators, four washing machines, floor replacement at one orphanage, tables and benches, sustainable kitchen stoves, solar street lights, a refrigerator, two water purifiers, mosquito nets for two orphanages, school bags, a camera, a TV, and steel security doors.

Prevention of Child Trafficking Project is a new three-year project started in April 2017. This project will provide 30,000 people in villages in India with the knowledge about how traffickers dupe women or simply snatch unwatched girls. The goal is to stop child trafficking in this targeted area, which has a total population of about 151,000 people. A group of Catholic nuns is facilitating this project. We have worked with them for several decades and we currently support five orphanages that they operate.

#### Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

David Purviance, Executive Director, and Jean Purviance, Secretary are related as spouses. Also Bruce Moore, Treasurer, and Roslyn Moore, Director are related as spouses.

#### Form 990, Part VI, Line 11b - Form 990 Review Process

The 990 is provided to all board members for their review prior to filing.

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Potential conflicts of interest must be disclosed. Once a disclosure is made, the interested person leaves the discussion while the determination of a conflict of interest is discussed and voted on by the remaining board members. The chairperson

Name of the organization

World's Children

20-5276353

#### Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction. If no alternatives are found to be possible, the governing body shall determine by a majority vote of disinterested directors whether the arrangement involving the conflict of interest is in the best interests of the organization. If the governing body determines a member has failed to disclose a conflict of interest the offender is given the opportunity to explain. The governing body has the authority to take appropriate disciplinary action if the member has indeed failed to disclose a conflict of interest. All such proceedings are recorded.

#### Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Bylaws call for an annual review to determine, among other things, whether compensation arrangements and benefits are reasonable, based on competent survey information and the result of arm's length bargaining. In addition, comparability data is reviewed when determining compensation.

#### Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

The Bylaws call for an annual review to determine, among other things, whether compensation arrangements and benefits are reasonable, based on competent survey information and the result of arm's length bargaining. In addition, comparability data is reviewed when determining compensation.

#### Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents and financial information is available online. Additional information is available upon request.