► See separate instructions.

1 ls	suer's name	Issuer			2 Issuer's employer identification number (EIN)				
INVESCO V.I. BALANCED RISK ALLOCATION FUND					26-3697524				
3 N	lame of contact for ac	dditional information	4 Telephor	e No. of contact	5 Email address of contact				
	STOR SERVICE			1-800-959-4246	WWW.INVESCO.COM				
6 Number and street (or P.O. box if mail is not delivered to street address) of contact					7 City, town, or post office, state, and ZIP code of contact				
11 GREENWAY PLAZA, SUITE 1000 8 Date of action			O Class	sification and description	HOUSTON, TX 77046-1113				
			9 Class	sincation and description					
	Attachment			tion in excess of current ar	nd accumulated E&P				
10 C	USIP number	11 Serial number(s)	12 Ticker symbol	13 Account number(s)				
	See Attachment			See Attachment					
Par	t II Organizat	ional Action Attac	ch additiona	statements if needed. S	ee back of form for additional questions.				
14	Describe the organiz	ational action and, if a	pplicable, the	e date of the action or the da	ate against which shareholders' ownership is measured for				
	the action ► The Fu	und paid an annual d	istribution to	shareholders on Septemb	per 20, 2018. The distribution				
const	titutes a non-taxable								
00110									
15					rity in the hands of a U.S. taxpayer as an adjustment per taxable return of capital will decrease				
a U.S				non-taxable return of capi	·				
16		0			lation, such as the market values of securities and the				
	valuation dates ► Th	e Fund's current and	accumulate	ed earnings were compared	d to distribution paid on September 20, 2018.				
The r					the taxable period ended December 31, 2018 in				
exces	ss of the Fund's curr	rent and accumulated	d earnings a	nd profits under IRC Section	on 316.				

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Part		Drganizational Action (continued)						1 490 -
		applicable Internal Revenue Code section(s nue Code Sections 301, 316, 852.	s) and subsection(s) upon w	hich the tax tr	eatment	is based 🖡	·	
18 C	an anv	resulting loss be recognized? ► No						
		<u></u>						
		any other information necessary to implem		the reportable	e tax ye	ar ▶		
This or	ganiza	tional action is reportable with respect t	o calendar year 2018.					
	1							
Sign	Under belief,	r penalties of perjury, I declare that I have exami it is true, correct, and complete. Declaration of p	ned this return, including accor preparer (other than officer) is ba	mpanying sched ased on all inforr	lules and nation of	statements which prepa	, and to the bes arer has any kno	st of my knowledge and owledge.
Here	Signa	ignature ►/s/ Sheri Morris						
	Print	/our name► Sheri Morris			Title ►	Presiden	& Treasurer	
Paid Prepa			Preparer's signature		Date		Check if if self-employed	PTIN
Use Only		Firm's address ►					Firm's EIN ► Phone no.	

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

ATTACHMENT

Invesco V.I. Balanced Risk Allocation Fund EIN: 26-3697524

	CUSIP	Payable <u>Date</u>	Distribution Per Share	<u>Dividends</u>	ROC
Invesco V.I. Balanced Risk Allocation Fund Series I Total	008892143	09/20/18	1.16090000 1.16090000	1.13160000 1.13160000	0.02930000 0.02930000
Invesco V.I. Balanced Risk Allocation Fund Series II Total	008892135	09/20/18	1.13130000 1.13130000	1.10210000 1.10210000	0.02920000 0.02920000