Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

B Cross PACCM INC.	A	For th	e 2018 calendar year, or tax year beginning and	ending						
PALCH TACK	В	Check if applicab	C Name of organization		D Employer identifi	ication number				
Dong business as 15 - 0.079 688 13 - 254 - 3369 10 - 10 10 10 10 10 10 10		Addre	FACCM, INC.							
Rom/outs E Telephone number 610 S. BOULEVARD City or town, state or province, country, and ZIP or foreign postal code SATAPPA, FL 33606 SATAPPA, FL 33600		Name			65-0	079688				
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TABLE FL SS00 Power		termii			G Gross receipts \$	831,912.				
Tarkewernet status 901(c)(3) X 501(c) 6 4 (meet no.) 4947(e)(1) or. 127		return	TAMPA, FL 33606		H(a) Is this a group r	eturn				
Tax-exempt status		תסוז 📖	F Name and address of principal officer ROI REISIER		for subordinates	s? Yes X No				
J. Webster: ► WIWW. FACCM. ORG	_	Pend	908 S. ANDREWS AVENUE, FORT LAUDERDALE			ncluded? Yes No				
Reference of organization: Note Corporation Trust Association Other Lyear of formation: 1988 M State of legal domicile: FL	1	Tax-ex	empt status \bigcirc 501(c)(3) \bigcirc 501(c)(6) \triangleleft (insert no) \bigcirc 4947(a)(1) (or [1] \$	If "No," attach a	list (see instructions)				
Breity describe the organization's mission or most significant activities TO PROMOTE HIGH STANDARDS OF EARLY CHILD CARE AND EDUCATION THROUGH ADVOCACY, PROFESSIONAL Check this box				1 m						
EARLY CHILD CARE AND EDUCATION THROUGH ADVOCACY, PROFESSIONAL Check this box				L Yea	r of formation: 1988 r	M State of legal domicile: FL				
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Solution		4	Number of independent voting members of the governing body (Part VI, line 1b)		4					
Solution	es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)		5					
Solution	ivit	6	Total number of volunteers (estimate if necessary)		6					
B	Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12							
S	_	<u>b</u>	Net unrelated business taxable income from Form 990-T, line 38		7b	0.				
9 Program service revenue (Part VIII, line 2g) 800, 615. 766, 921.				<u> </u>						
1 Other revenue (Part VIII, column (A), lines 5, 6d, 86°,96°,105°, and 12) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 864, 962. 831, 912. 13 Grants and similar amounts paid (Part IX, column (A), line 4) 25,000. 2,500. 2,500. 0. 0. 0. 0. 0. 0. 0.	ë	8		<u> </u>						
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12 Total revenue add lines 8 through 11 (must equal Part VIII, column (A), line 12) 864, 962. 831, 912. 13 Grants and similar amounts paid (Part IX, column (A), line 3) \$17,019 25,000. 2,500. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 4) 0. 0. 16 Porfessional fundraising fees (Part IX, column (A), line 4) 0. 0. 17 Other expenses (Part IX, column (A), line 25) 0. 0. 18 Total expenses (Part IX, column (A), line 25) 0. 0. 19 Revenue less expenses Subtract line 18 from line 12 0. 0. 19 Revenue less expenses Subtract line 18 from line 12 0. 0. 20 Total assets (Part X, line 26) 0. 0. 21 Total liabilities (Part X, line 26) 0. 0. 22 Not assets or fund balances Subtract line 21 from line 20 0. 0. 23 Part II Signature Block 0. 0. 24 Total liabilities (Part X, line 26) 0. 0. 0. 25 Part II Signature Block 0. 0. 0. 25 Part II Signature Block 0. 0. 0. 26 Print/Type preparer's name 0. 0. 0. 27 Print/Type preparer's name 0. 0. 0. 0. 28 Print/Type preparer's name 0. 0. 0. 0. 0. 29 Print/Type preparer's name 0. 0. 0. 0. 0. 0. 0. 0	Re									
13 Grants and similar amounts paid (Part IX, Column (A), Lines 1 (A), Lines 1 (A), Lines 3 (A), Line 4 (A), Lines 5 (A), Line 4 (A), Line 5 (A), Line	_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e	<u> </u>						
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17 Other expenses (Part IX, Column (A), lines 11a-11d, 11f-124e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 23 Net assets or fund balances Subtract line 21 from line 20 24 Part II Signature Block Under penalties of Part II pave examined this return, including accompanying schedules and statements, and to the best of my knowledge and boliof, it is true, correct, and complete technique to be parer (other than officer) is based on all information of which preparer has any knowledge Sign Here Print/Type preparer's name Preparer Paid ROBERT I. WATKINS, CPA Preparer Firm's name ROBERT WATKINS & COMPANY, P.A. Firm's elim Signature of the preparer shown above? (see instructions) Expenses (Part X, line 16) 819, 239. 844, 209. 8491, 168. 819, 239. 844, 209. 8491, 168. 819, 239. 844, 209. 8491, 168. 819, 239. 844, 209. 8491, 168. 819, 239. 814, 209. 8491, 168. 819, 239. 814, 209. 849, 159. 549, 180. 93, 291. 12, 318. 949, 159. 536, 862. Part II Signature Part Value (Intervity) and the part of th	ses	15	[()(m)) m \(\lambda \)							
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19 Revenue less expenses Subtract line 18 from line 12 45,723. <12,297.	_	17		-						
Beginning of Current Year End of Year				-						
Under penalties of per jury, interest, and to the best of my knowledge and boliof, it is true, correct, and complete. Jectal attory preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here LEE CROUCH, APPLE CHAIR Type or print name and title Print/Type preparer's name Paid ROBERT I. WATKINS, CPA Preparer Fign's name ROBERT WATKINS & COMPANY, P.A. Fign's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No	<u>_ 8</u>	19	Revenue less expenses. Subtract line 18 from line 12							
Under penalties of per jury, interest, and to the best of my knowledge and boliof, it is true, correct, and complete. Jectal attory preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Here LEE CROUCH, APPLE CHAIR Type or print name and title Print/Type preparer's name Paid ROBERT I. WATKINS, CPA Preparer Fign's name ROBERT WATKINS & COMPANY, P.A. Fign's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No	ance	00	Tabel access (D. 1.V. Lee 40)	<u> </u>						
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Sign Here LEE CROUCH, APPLE CHAIR Type or print name and title Print/Type preparer's name Paid ROBERT I. WATKINS, CPA Preparer Figm's name ROBERT WATKINS & COMPANY, P.A. Firm's EIN Fir	_			o and ctata	ments, and to the best of m	v knowledge and belief it is				
Sign Here LEE CROUCH, APPLE CHAIR Type or print name and title Print/Type preparer's name Preparer ROBERT I. WATKINS, CPA Preparer Fign's name ROBERT WATKINS & COMPANY, P.A. Firm's EIN 59-2645714 Use Only Firm's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No						y intowiougo and condi, it is				
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Here LEE CROUCH, APPLE CHAIR	Sia	_	Signatute of officer		Date	 				
Type or print name and title Print/Type preparer's name Paid ROBERT I. WATKINS, CPA Preparer Figm's name ROBERT WATKINS & COMPANY, P.A. Firm's EIN 59-2645714 Use Only Firm's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) Type or print name and title Print/Type preparer's name Preparer's signature Poid Firm's EIN 59-2645714 Phone no. 813-254-3369			' <u>'</u>		' (
Paid ROBERT I. WATKINS, CPA Preparer Firm's name ROBERT WATKINS & COMPANY, P.A. Firm's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions)	1101	C								
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Preparer Figm's name ROBERT WATKINS & COMPANY, P.A. Use Only Firm's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) Tampa, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions)	Paid	j			100/19 If self-employ	 -'				
Use Only Firm's address 610 S. BOULEVARD TAMPA, FL 33606 May the IRS discuss this return with the preparer shown above? (see instructions) TYPE No					-/ / / / 					
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May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No		,			Phone no 81	3-254-3369				
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832001 12-31-18 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2018)				ons.		Form 990 (2018)				

	1990(2018) FACCM, INC. 65-00/9688 Page 2
<u>ra</u>	rt'III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	TO PROMOTE HIGH STANDARDS OF EARLY CHILD CARE AND EDUCATION THROUGH
	ADVOCACY, PROFESSIONAL DEVELOPMENT, AND ACCREDITATION ENSURING THE
	CONTINUED SUCCESS OF THE PRIVATE CHILD CARE INDUSTRY
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	(Code) (Expenses \$
	SUPPORTING EARLY EDUCATION DEVELOPS SUCCESS (SEEDS) IS THE LEADING PROFESSIONAL ORGANIZATION FOR EARLY LEARNING EDUCATORS IN PRIVATE
	PRESCHOOLS. SEEDS GIVES TEACHERS IN SCHOOLS THE OPPORTUNITY TO
	PARTICIPATE IN AN ORGANIZATION DESIGNED TO MEET THEIR NEEDS AND PROVIDE THEM WITH INFORMATION AND OPPORTUNITIES TO INCREASE THEIR SKILL AND
	EFFECTIVENESS IN THE CLASSROOM.
	EFFECTIVENESS IN THE CHASSROOM.
	ACCREDITED PROFESSIONAL PRESCHOOL LEARNING ENVIRONMENT (APPLE) IS A
	NATIONAL EARLY LEARNING PROGRAM ACCREDITATION. WITH OVER 800
	ACCREDITED PROGRAMS AND MANY MORE ENGAGED IN THE PROCESS, APPLE IS
	ACCEPTED INTO THE GOLD SEAL OF QUALITY PROGRAM.
	ACCELTED INTO THE GOLD BEAU OF QUALITY TROCKER.
	(Code) (Expenses \$
	(Code
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4	Total program conuce expenses

Form **990** (2018)

Form	990	(201)	8)
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Forn	1990 (2018) FACCM, INC. 65-00	<u> 79688</u>	P	age 🤇
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_1_	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection in	ect		ļ
	during the tax year? If "Yes," complete Schedule C, Part II	4	<u></u>	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		_	
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			l
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Par	t/ <u>6</u>	ļ	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		ļ	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	 -	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			۱
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		ļ	
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			٠,,
	If "Yes," complete Schedule D, Part IV	9_	<u> </u>	X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanel			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	 -	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X		}	
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		- T	
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	446		Х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	 	Λ
C	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	110		X
ч	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	i	Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	-110		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		
	Schedule D. Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	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? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18_		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
04	Did the organization report more than \$5,000 of grants or other acceptance to any democracy organization or	1		

domestic government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II

Form 990 (2018)

65-0079688 Form 990 (2018) FACCM Page 4 Part IV | Checklist of Required Schedules (continued) Yes No 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 X 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a 24a Х 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a 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 b 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 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," X complete Schedule L. Part II 26 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 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) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? X If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Х 34 Part V. line 1 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b 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? 36 If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 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 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 5 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 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?

		-	Yes	ΪÑο
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			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	_2b	Х	↓
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	_3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	_3b_		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a		_ <u>5a</u>		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		3.7
	any contributions that were not tax deductible as charitable contributions?	_6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	_6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	_7b		├
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 .		
		7c	-	
	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	_ 7е		
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	-/- 7g		
9 h	If the organization received a contribution of qualified intellectual property, and the organization file a Form 1098-C?	7h	_	
8	Sponsoring organizations maintaining donor advised funds. 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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations, Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			ł
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	_	_ :	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		l	l
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O]
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	İ		
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N		ſ	:
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	_16		X
_	If "Yes," complete Form 4720, Schedule O			L

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	"No" r	espon	se			
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions						
	Check if Schedule O contains a response or note to any line in this Part VI			X			
Sec	tion A. Governing Body and Management		·	,			
	1 1		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15	ļ	1				
	If there are material differences in voting rights among members of the governing body, or if the governing	1					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 15						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other						
	officer, director, trustee, or key employee?	2		X_			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision						
	of officers, directors, or trustees, or key employees to a management company or other person?	3_		<u>X</u>			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5_		X			
6	Did the organization have members or stockholders?	6		X			
7a	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?	7a		X			
b	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or						
_	persons other than the governing body?	7b		X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		v				
	The governing body?	8a	X				
9	Each committee with authority to act on behalf of the governing body?	8b					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		X			
	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?							
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	_X_				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe						
	ın Schedule O how this was done	12c	X				
13	Did the organization have a written whistleblower policy?	13_	X				
14	Did the organization have a written document retention and destruction policy?	14		<u> X</u>			
15	Did the process for determining compensation of the following persons include a review and approval by independent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v				
	The organization's CEO, Executive Director, or top management official	15a	X	X			
D	Other officers or key employees of the organization	15b					
162	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a						
104	taxable entity during the year?	16a		Х			
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100					
-	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's						
	exempt status with respect to such arrangements?	16b					
ec'	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ► NONE						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	s only)	availa	ble			
	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)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial				
	statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's books and records						
	ROBERT I. WATKINS - 813-254-3369 610 S BOULEVARD TAMPA FL 33606						
	DID & BUILDINABUL TANDA MI. SSBUD						

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Form 990 (2018)	Form	990	(2018)	
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FACCM. INC.

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

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

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee of director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) HOWARD ROSS DIRECTOR	5.00	X						0.	0.	0.	
(2) DANIEL OSBORNE LEGISLATIVE CHAIR	5.00	x						0.	0.	0.	
(3) DOUGLAS MILLARD SECRETARY	5.00	x		х				0.	0.	0.	
(4) ARLENE MILLER DIRECTOR	5.00	x						0.	0.	0.	
(5) TRIPP CROUCH APPLE CHAIR	5.00	x						0.	0.	0.	
(6) RICARDO CAMPO TREASURER	5.00	х		X				0.	0.	0.	
(7) TERRIE ELLIS VP/SARGEANT AT ARMS	5.00	x		х				0.	0.	0.	
(8) JULIA MUSELLA MEMBERSHIP CHAIR	5,00	x						0.	0.	0.	
(9) MARVIN LEVIN DIRECTOR	5.00	х						_0.	0.	0.	
(10) MELISSA A WHITE DIRECTOR	5,00	x						0.	0.	0.	
(11) BARBARA WEINSTEIN DIRECTOR	5,00	х				_		0.	0.	0.	
(12) JENNIFER SHIELDS DIRECTOR	5,00	х						0.	0.	0.	
(13) SARAH BRAISTED DIRECTOR	5.00	X_						0.	0.	0.	
(14) HOWARD ROSS DIRECTOR	5.00	х						0.	0.	0.	
(15) ROY KEISTER PRESIDENT	5,00	х		х				0.	0.	0.	

	990 (2018) FACCM, I	NC.							··	65-0	<u>079</u>	<u>688</u>	F	age 8
Part	VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	box	, unle	Pos check ess pe	more erson	than is bot	h an	from	(E) Reportable compensation from related		oth		of
		(list any hours for related organizations below line)								compensation from the organization and related organizations				
			ļ											
			-											
														-
									·					
						-								
1b	Sub-total		L	<u> </u>					0.		0.			0.
	Total from continuation sheets to Part Vi Total (add lines 1b and 1c)	I, Section A						▶	0.		0.	_		0.
	Total number of individuals (including but ricompensation from the organization	ot limited to th	nose	liste	ed al	bove	e) wl	no r	eceived more than \$100	,000 of reportab	le			C
3	Did the organization list any former officer,	director, or tru	uste	e. ke	ev er	nplo	vee	. or	highest compensated e	mplovee on		ſ	Yes	No
	line 1a? If "Yes," complete Schedule J for s	uch individual										3	,	Х
	For any individual listed on line 1a, is the si and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete S	Sche	edule	e J f	for such individual			4_		X
	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elat	ted organization or indiv	dual for services		5	-	X
	ion B. Independent Contractors					- :				2100.000 (
	Complete this table for your five highest co the organization. Report compensation for										npens	ation	irom	
	(A) Name and business	address	NO	ONI	Ξ				(B) Description of s	ervices	C)) ompe	C) Insatic	n
	-	-												
		-												
				-	_									
														
	· · · · · · · · · · · · · · · · · · ·							1	<u> </u>					
	Total number of independent contractors (i		ot lu	mite	d to		_	sted	d above) who received m	nore than				
	\$100,000 of compensation from the organi	zation 📂					<u> </u>							

Form 990 (2018) FACCM, INC.
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
				,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
\$ \$	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b		1b					
ا ق ت	c	·	1c					
	d	D-1-41	1d	,				
Ç,≝	u 0	Government grants (contribut						
Sig.	f	All other contributions, gifts, gran	. —					
돌칠	•	similar amounts not included abo	-					
真り	~							
S E	g h	Total. Add lines 1a-1f						
<u> </u>		Total. Add miles fa /i		Business Code				
	2 a	APPLE ACCREDITA	TION	611710	280,826.	280,826.		
Ş .	b	TROOM REPUBLIE		611710	235,460.	235,460.		
Se	c	VERIFICATION		611710_	224,175.	224,175.		
E Š	d	CDDDC AMBILLA ME	MBERSHT	611710	26,460.	26,460.		
Program Service Revenue	e			0				
Pr	f	All other program service reve	nue					
	q			•	766,921.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		>	901.			901.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
	5	Royalties		•				
:			(ı) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
l	С	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)						
e l	8 a	Gross income from fundraising	g events (not					
		including \$	of					
Other Reven		contributions reported on line	1c) See					
r l		Part IV, line 18	а					
돌 l	b	Less direct expenses	b					
~		Net income or (loss) from fund	-	_ _				<u> </u>
	9 a	Gross income from gaming ac	tivities See					
i		Part IV, line 19	а					
l		Less direct expenses	b	L				
		Net income or (loss) from gam	=	<u> </u>				
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
		Less cost of goods sold	b	L				
}	С	Net income or (loss) from sale		<u> </u>				
ŀ		Miscellaneous Revenu	e	Business Code			-	40,836.
	11 a			611710	40,836.			10 000
	b			611710	18,898.	·		18,898.
	С	CORPORATE SPONS	OK	611710	4,002.			4,002.
	d	All other revenue		611710	354. 64,090.			334.
	е	Total. Add lines 11a-11d			831,912.	766,921.	0	64,991.
1	12	Total revenue See instructions			00117144	100,7410		<u> </u>

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) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (B) Program service (C) (A) Total expenses Do not include amounts reported on lines 6b, Management and 7b. 8b. 9b. and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 1 2,500 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 312,794. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 13,507. Other employee benefits 9 24,240. 10 Payroll taxes Fees for services (non-employees) 11 a Management 21,144. **b** Legal 5,589. c Accounting 79,080. d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 85,000. column (A) amount, list line 11g expenses on Sch O.) 280. 12 Advertising and promotion 2,840. Office expenses 13 6,367. Information technology 14 Royalties 15 16 Occupancy 42,958 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19,602. Conferences, conventions, and meetings 19 Interest 20 Payments to affiliates 21 703 22 Depreciation, depletion, and amortization 6,356. 23 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) a APPLE ACCREDITATION EXP 94,284. 41,528 **b** EXECUTIVE RECRUITER 24,789 c DUES & SUBSCRIPTIONS 9,681 d TELEPHONE 50,967. e All other expenses 844,209. Total functional expenses Add lines 1 through 24e 25 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)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 147,713 141,089. Cash - non-interest-bearing Savings and temporary cash investments 401,504. 402,405. 2 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L. 6 7 Notes and loans receivable, net Inventories for sale or use 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 6,347. 10a 10b 1,201 1,993. 5,146. b Less accumulated depreciation 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV. line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 540. Other assets See Part IV, line 11 1,240. 15 15 552,450. 16 549,180 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 3,291 12,318. Schedule D 25 12,318. 3,291. Total liabilities. Add lines 17 through 25 26 complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 536,862. 549,159. Unrestricted net assets 27 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 549,159. 536,862. 33 Total net assets or fund balances 552,450 549,180. Total liabilities and net assets/fund balances

	n 990 (2018) FACCM, INC.	<u>65-007</u>	9688	Pag	<u>e 12</u>
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		<u>.,9:</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>, 2</u> (
3	Revenue less expenses Subtract line 2 from line 1	3			<u>97.</u> >
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	549	1!	<u>59.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	<u>536</u>	, 86	<u>52.</u>
<u>Pa</u>	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			İ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		ſ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u> _
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		ł	
	separate basis, consolidated basis, or both		1 1	1	
	Separate basis Consolidated basis Both consolidated and separate basis		,		
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			1
	consolidated basis, or both		1 1	- 1	
	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 th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O	1 1		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Audit			
	Act and OMB Circular A-133?		3a		<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit	1		
	or audits, explain why in Schedule O'and describe any steps taken to undergo such audits	<u> </u>	3b_		
			Form 9	990 (2	2018)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	() (see separate instructions), then Section 501(c)(4), (5), or (6) organiza				
	me of organization	tions Complete Fart III		Em	ployer identification number
	FACCM,	INC.			65-0079688
Pa	art I-A Complete if the or	ganization is exempt und	ler section 501(c)	or is a section 527	
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	tures	cal campaign activities		\$
Pá	art I-B Complete if the or	ganization is exempt und	ler section 501(c)	(3)	
	Enter the amount of any excise tax				\$
	Enter the amount of any excise tax	• •		5	\$
	If the organization incurred a section	, ,			Yes No
	a Was a correction made?		·		Yes No
t	b If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	ler section 501(c)	, except section 50°	1(c)(3).
2 3 4	Enter the amount directly expende Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and el made payments For each organization file rotations received that were propolitical action committee (PAC). If	nization's funds contributed to ot s Add lines 1 and 2 Enter here a in 1120-POL for this year? imployer identification number (El ation listed, enter the amount pair comptly and directly delivered to	ther organizations for s and on Form 1120-POL IN) of all section 527 po d from the filing organi a separate political org	ection 527 -, political organizations to whe zation's funds Also enter janization, such as a sepa	\$YesNo inch the filing organization the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter 0	contributions received and
				-	
					

Sshedule C (Form 990 or 990-EZ) 2018	FACCM	, INC.			65-1	0079688 Page 2
Part II-A Complete if the org	janizatio	on is exe	mpt under sectio	n 501(c)(3) and file	ed Form 5768 (e	election under
section 501(h)).						
				n Part IV each affiliated	group member's nar	me, address, EIN,
expenses, and sha			•			
B Check 🕨 🔛 if the filing organiza	tion check	ed box A ar	nd "limited control" pro	ovisions apply		T
		bying Expe	nditures ints paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
			·			
1a Total lobbying expenditures to influ		-		}-		
b Total lobbying expenditures to influ		•	ay (airect lobbying)	-		
c Total lobbying expenditures (add I		d 1b)		ļ		· · · · · · · · · · · · · · · · · · ·
d Other exempt purpose expenditure			15	ŀ		
e Total exempt purpose expenditure	-			.h .a.k		
f Lobbying nontaxable amount Enti-						
If the amount on line 1e, column (a) o	r (D) IS:		bying nontaxable am			'
Not over \$500,000	0.000		the amount on line 1e			
Over \$500,000 but not over \$1,00			00 plus 15% of the exc		•	
Over \$1,000,000 but not over \$1,5			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17	,000,000	-	00 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000		\$1,000,				•
0		£1 10				
g Grassroots nontaxable amount (er		-		-	·	
h Subtract line 1g from line 1a If zer	-			-		
i Subtract line 1f from line 1c If zero	-		to and a deal the annual and			<u> </u>
j If there is an amount other than ze	_	er line 1n or	line 11, did the organiz	ation file Form 4/20		Yes No
reporting section 4911 tax for this	year ⁷			0		resNo
(Some organizations t		a section 5	eraging Period Under 01(h) election do not ate instructions for li	have to complete all o	of the five columns	below.
	Lobi	oying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
2a Lobbying nontaxable amount	,					
b Lobbying ceiling amount		-			<u></u>	
(150% of line 2a, column(e))		_				
c Total lobbying expenditures				-	<u> </u>	-
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
, , , , , , , , , , , , , , , , , , , ,	-		-			
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

Schedule C (Form 990 or 990-EZ) 2018 FACCM, INC. 65-0079688 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description)	(b)	
of the lobbying activity	,	res	No	Amo	ount
1 During the year, did the filing organization attempt to influence foreign, national, state	e, or		· · ·	1	
local legislation, including any attempt to influence public opinion on a legislative mat	tter	'			*
or referendum, through the use of	-				•
a Volunteers?	<u></u>				
b Paid staff or management (include compensation in expenses reported on lines 1c th	rough 1i)?				·
c Media advertisements?	<u></u>				
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?	<u> </u>				
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar me	eans?				
Other activities?	<u> </u>				
j Total Add lines 1c through 1i	\				
2a Did the activities in line 1 cause the organization to be not described in section 501(c	:)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912	1010				
c If "Yes," enter the amount of any tax incurred by organization managers under section					
a If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year Part III-A Complete if the organization is exempt under section 501	(c)(4) continu	01/0)/	5\ or co	ction	
501(c)(6).	(C)(4), Section C	,	oj, di se	Cuon	
301(0)(0).				Yes	No
			1		X
1 Word substantially all (00% or more) dues received pendeductible by members?					
1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less?			2		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity experience Part III-B Complete if the organization is exempt under section 501	l(c)(4), section 5	i01(c)(5), or se		X X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity experience Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes."	l(c)(4), section 5	i01(c)(? з 5), or se Я (b) Раг	t III-A, lin	X ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members 	(c)(4), section 5 e answered "No	i01(c)(🤈 з 5), or se	t III-A, lin	X ne 3, is
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include and political expenditures).	(c)(4), section 5 e answered "No	i01(c)(? з 5), or se Я (b) Раг	t III-A, lin	X ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). 	(c)(4), section 5 e answered "No	i01(c)(9 3 5), or se 8 (b) Par	235	X ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). Current year 	(c)(4), section 5 e answered "No	i01(c)(2 3 5), or se 8 (b) Part	235	X ne 3, is
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year 	(c)(4), section 5 e answered "No	i01(c)(2 3 5), or se 8 (b) Par 1 2a 2b	235 81	X ne 3, is 5, 460.
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 	(c)(4), section 5 e answered "No	i01(c)(2 3 5), or se 3 (b) Par 1 2a 2b 2c	235 81 81	X ne 3, is 5, 460.
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 	(c)(4), section 5 e answered "No nounts of political	i01(c)(2 3 5), or se 8 (b) Par 1 2a 2b	235 81 81	X ne 3, is 5, 460.
 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section If notices were sent and the amount on line 2c exceeds the amount on line 3, what present and the amount on line 2c exceeds the amount on line 3, what present and the amount on line 2c exceeds the amount on line 3, what present and the amount on line 2c exceeds the amount on line 3. 	1(c)(4), section 5 te answered "No nounts of political 162(e) dues ortion of the excess	601(c)(o," OF	2 3 5), or se 3 (b) Par 1 2a 2b 2c 3	235 81 81	X ne 3, is 5, 460.
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section If notices were sent and the amount on line 2c exceeds the amount on line 3, what prodoes the organization agree to carryover to the reasonable estimate of nondeductible	1(c)(4), section 5 te answered "No nounts of political 162(e) dues ortion of the excess	601(c)(o," OF	2 3 5), or se 8 (b) Part 1 2a 2b 2c 3	235 81 81	X
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section if notices were sent and the amount on line 2c exceeds the amount on line 3, what prodoes the organization agree to carryover to the reasonable estimate of nondeductible expenditure next year?	1(c)(4), section 5 te answered "No nounts of political 162(e) dues ortion of the excess	601(c)(o," OF	2 3 5), or se 8 (b) Part 1 2a 2b 2c 3	81 81 235	X ne 3, is 5,460.
Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity experience if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section if notices were sent and the amount on line 2c exceeds the amount on line 3, what per does the organization agree to carryover to the reasonable estimate of nondeductible expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	1(c)(4), section 5 te answered "No nounts of political 162(e) dues ortion of the excess	601(c)(o," OF	2 3 5), or se 8 (b) Part 1 2a 2b 2c 3	81 81 235	X ne 3, is 5, 460.
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity experience. Part III-B Complete if the organization is exempt under section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include an expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section lif notices were sent and the amount on line 2c exceeds the amount on line 3, what prodoes the organization agree to carryover to the reasonable estimate of nondeductible expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information	(c)(4), section 5 e answered "No nounts of political 162(e) dues ortion of the excess e lobbying and politic	601(c)(o," OF	2 3 5), or se 8 (b) Part 1 2a 2b 2c 3	81 81 235 81 235	X ne 3, is 5,460.
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public

Inspection

Name of the organization FACCM, INC.

Employer identification number 65-0079688

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	_	
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a his	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ►		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	servation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	\$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIII, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
Do	conservation easements rt III Organizations Maintaining Collections o	f Art Historical Transuman or C	Other Cimilar Agests
Га	Complete if the organization answered "Yes" on Form		other Similar Assets.
			mont and balance shoot works of art
та	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri		
D	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	bolic service, provide the following amounts
	relating to these items		. •
	(i) Revenue included on Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre		ar gain, provide
_	the following amounts required to be reported under SFAS 1	to (MOC 300) relating to triese items.	k \$
a	Revenue included on Form 990, Part VIII, line 1		\$
D	Assets included in Form 990, Part X		\$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets(continued)		dule D (Form 990) 2018 FACCM,								<u> 19688</u>		<u>ge 2</u>
Circleck all that apply a	Pa	rt III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures,	or Oth	<u>er Sir</u>	nilar Asse	ts(contin	ued)	
a Public exhibition d Loan or exchange programs b Scholarly research e Other College Association for future generations e Other College Association for future generations e of College Association of the organization sociation of Association of the Organization of College Association of College Ass	3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items										
b Scholarly research e		(check all that apply)										
c Preservation for future generations 4 Provide a description of the organization collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to pase funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21 b if "Yes," explain the arrangement in Part XIII and complete the following table. C Beginning balance d Additions during the year 1 part V Embours and the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII The Part XIII Check here if the explanation has been provided on Part XIII The years back (e) Four years back (e)	а	Public exhibition	4	d \square	Loan or exc	hange progr	ams					
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5. During the year, did the organization solicit or receive donations of art, historical reassures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XX. line 21 1b is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XX. line 21, for escrow or custodial account liability? 1c Beginning balance 2 Beginning balance 2 Bothetionous during the year 1 Ending balance 2 Bothetionous during the year 1 Ending balance 2 Bothetionous during the year 2 Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part XIII to the part XIII. Check here if the explanation has been provided on Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10 2 Beginning of year balance 2 Not investment earnings, gains, and losses of Grant or Scholarships 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as 2 Board designated or quasiendowment	b	Scholarly research	•	е 🔲	Other		·					
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Secrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 10 Yes No If "Yes," explain the arrangement in Part XIII and complete the following table. Complete the following table It It It It It It It I	5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	er sımıla	ır asset	s			
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19 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Pa			lete if the	e organizatio	n answered	"Yes" or	n Form	990, Part IV,	line 9, or		
No		reported an amount on Form 990, Pa	rt X, line 21									
b If "Yes," explain the arrangement in Part XIII and complete the following table. Amount	1a	Is the organization an agent, trustee, custod	ıan or other ınterme	diary for	contribution	ns or other as	ssets not	t includ	ed	_		
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c Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2 Dot the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability.	b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table.			_				
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Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10 Cap	2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or co	ustodial acco	ount liabi	ility?	<u></u>	Yes	\perp	No
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e Other expenditures for facilities and programs Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment \(\)	С	Net investment earnings, gains, and losses										
and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment	d	· .		_						 		
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % 1 The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by. (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations 5 If "Yes" on line 3a(ii), are the related organization is listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value basis (investment) 5 Buildings c Leasehold improvements d Equipment e Other	е	Other expenditures for facilities		ĺ						ľ		
g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶% Permanent endowment ▶% The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by. (i) urrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations 4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a See Form 990, Part X, line 10 Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment c Leasehold improvements d Equipment e Other Other		· -	· · · · · · · · · · · · · · · · · · ·					_				
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a Board designated or quasi-endowment ▶	9	•				L				<u> </u>		
b Permanent endowment \			rent year end balan	ce (line 1	g, column (a	a)) held as						
Temporarily restricted endowment ►		-		%								
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c Leasehold improvements d Equipment e Other 6,347. 1,201. 5,146.					<u> </u>							
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e Other 6,347. 1,201. 5,146.		_			-			-	-+			
		· ·	-			6.347		1	201	5	1 4	6 -
			gual Form 990. Part	X. colur			·	<u> </u>				

1.	(a) Description of liability	(b) Book value	_	1	•	
(1)	Federal income taxes					
(2)	HEALTH INSURANCE PAYABLE	672.				
(3)	MEMBER POLITICAL CONTRIBUTIONS	350.				
(4)	PAYPAL & CREDIT CARD	11,296.			٠	
(5)					2*1	
(6)						
(7)			-		,	
(8)					-	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

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	edule D (Form 990) 2018 FACCM, INC.		65-0079688 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial State	ments With Revenue p	er Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		1 1
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Pa	t XII Reconciliation of Expenses per Audited Financial State	ements With Expenses	per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	<u>_</u> _
С	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1	1 1
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
С	Add lines 4a and 4b		4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5
	t XIII Supplemental Information.		
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, F		line 4, Part X, line 2, Part XI,
ines	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	additional information	
			
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832054 10-29-18

Schedule D (Form 990) 2018

SCHEDULE O

Internal Revenue Service

832211 10-10-18

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

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

Open to Public

Inspection

Name of the organization

FACCM, INC.

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

Employer identification number 65-0079688

Schedule O (Form 990 or 990-EZ) (2018)

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEVELOPMENT, AND ACCREDITATION ENSURING THE CONTINUED SUCCESS OF THE
PRIVATE CHILD CARE INDUSTRY.
FORM 990, PART VI, SECTION B, LINE 11B:
NO REVIEW WAS OR WILL BE CONDUCTED
FORM 990, PART VI, SECTION B, LINE 12C:
BOARD MEMBERS SHALL DISCLOSE ANY BUSINESS RELATIONSHIP WITH OTHER BOARD
MEMBERS AND/OR STAFF, AND SHALL DISCLOSE ANY POTENTIAL OR ACTUAL CONFLICTS
OF INTEREST. THE AUTHORITY TO DETERMINE CONFLICT OF INTEREST SHALL REST
WITH THE BOARD. GENERALLY, NO BOARD MEMBER MAY FINANCIALLY GAIN AS A
RESULT OF ANY ACTIVITY OF THE BOARD OR BE ASSOCIATED WITH ANY COMPANY OR
ORGANIZATION CONTRACTING OR DOING BUSINESS OR POTENTIALLY IN CONFLICT WITH
THE ORGANIZATION IN ANY FORM UNLESS THE BOARD MEMBER HAS PROVIDED FULL
DISCLOSURE AND RECEIVED EXEMPTION BY A 2/3 VOTE OF THE BOARD PRIOR TO THE
TRANSACTION.
FORM 990, PART VI, SECTION B, LINE 15A:
EXECUTIVE COMMITTEE REVIEWS EXECUTIVE DIRECTOR'S SALARY ANNUALLY AND
COMPLETES A BOARD OF DIRECTOR ANALYSIS, DOCUMENTED WITH WRITTEN EMPLOYMENT
AGREEMENT.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION DOES NOT MAKE THESE DOCUMENTS AVAILABLE TO THE PUBLIC.
THE ORGANIZATION'S BYLAWS ARE AVAILABLE ON THEIR WEBSITE.

<u>S</u> chedule O (Form 990 or 990·EZ) (2018)	Page 2
Name of the organization	Employer identification number
FACCM, INC.	65-0079688
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING	33,000.
EXECUTIVE DIRECTOR	52,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	85,000.
	
 	
	