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EXTENDED TO NOVEMBER 16, 2020

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning and ending 1912

Go to www.irs.gov/Form990T for instructions and the latest information

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

Form 990-T header section containing organization name (FAMILY AND CHILDREN'S ASSOCIATION, INC.), address (100 EAST OLD COUNTRY ROAD, MINEOLA, NY 11501), and identification numbers.

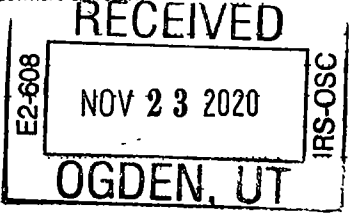
Section H: Enter the number of the organization's unrelated trades or businesses. 1 LESSOR OF COMMERCIAL BUILDING.

Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No.

Section J: The books are in care of MARY ANN VASSALLO. Telephone number 516-746-0350.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, and Total. Total Income: 98,248; Total Expenses: 296,354; Total Net: -198,106.

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, Salaries and wages, Repairs and maintenance, and Total deductions. Total Deductions: 1,250. Unrelated business taxable income: -199,356.



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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32 through 39.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40 through 45.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46a through 56.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 57, 58, and 59.

Sign Here section containing a signature, date, and title (CHIEF FINANCIAL OFFICER).

Paid Preparer Use Only section containing preparer name (ELLEN M. LABITA), firm name (BAKER TILLY US, LLP), and other details.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

| | | | | | | | | | |
|----|---|----|--|---|--|--|--|-----|----|
| 1 | Inventory at beginning of year | 1 | | 6 | Inventory at end of year | 6 | | | |
| 2 | Purchases | 2 | | 7 | Cost of goods sold Subtract line 6 from line 5. Enter here and in Part I, line 2 | 7 | | | |
| 3 | Cost of labor | 3 | | | | | | | |
| 4a | Additional section 263A costs (attach schedule) | 4a | | | | | | Yes | No |
| b | Other costs (attach schedule) | 4b | | | | | | | |
| 5 | Total. Add lines 1 through 4b | 5 | | | 8 | Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | | | |

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1) _____

(2) _____

(3) _____

(4) _____

| 2 Rent received or accrued | | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
|---|---|---|
| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | 0. | Total 0. |

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.**

(b) Total deductions. Enter here and on page 1 Part I, line 6, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

| 1 Description of debt-financed property | 2 Gross income from or allocable to debt-financed property | 3 Deductions directly connected with or allocable to debt-financed property | |
|---|---|---|--|
| | | (a) Straight line depreciation (attach schedule) STATEMENT 6 | (b) Other deductions (attach schedule) STATEMENT 7 |
| (1) 100 EAST OLD COUNTRY ROAD, | | | |
| (2) MINEOLA, NY | 98,248. | 12,597. | 283,757. |
| (3) | | | |
| (4) | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) |
| (1) | | % | |
| (2) 583,038. | 362,367. | 100.00 % | 98,248. |
| (3) | | % | |
| (4) | | % | |
| STATEMENT 4 | | STATEMENT 5 | |
| Totals | | Enter here and on page 1, Part I, line 7 column (A) | |
| Total dividends-received deductions included in column 8 | | Enter here and on page 1 Part I, line 7 column (B) | |
| | | 98,248. | |
| | | 296,354. | |
| | | 0. | |

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| | | Exempt Controlled Organizations | | | |
|------------------------------------|---|---|--|---|--|
| 1. Name of controlled organization | 2. Employer identification number | 3. Not unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross income | 6. Deductions directly connected with income in column 5 |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| Nonexempt Controlled Organizations | | | | | |
| 7. Taxable income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 | |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| | | | Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A) | Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B) | |
| Totals | | | 0. | 0. | |

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col. 3 plus col. 4) |
|--------------------------|---------------------|--|---------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| | | Enter here and on page 1, Part I, line 9, column (A) | | Enter here and on page 1, Part I, line 9, column (B) |
| Totals | | 0. | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Not income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7 | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4) |
|--------------------------------------|---|---|---|---|--------------------------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| | | Enter here and on page 1, Part I, line 10, col (A) | Enter here and on page 1, Part I, line 10, col (B) | | | Enter here and on page 1, Part II, line 25 |
| Totals | | 0. | 0. | | | 0. |

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols 5 through 7 | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5 but not more than column 4) |
|--|-----------------------------|-----------------------------|---|-----------------------|---------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | | 0. | 0. | | | 0. |

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

| 1 Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 | 5 Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4) |
|------------------------------------|--|--|---|----------------------|---------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 0. | 0. | | | | 0. |
| Totals, Part II (lines 1-5) | 0. <small>Enter here and on page 1, Part I, line 11, col (A)</small> | 0. <small>Enter here and on page 1, Part I, line 11, col (B)</small> | | | | 0. <small>Enter here and on page 1, Part II, line 26</small> |

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

| 1. Name | 2. Title | 3 Percent of time devoted to business | 4 Compensation attributable to unrelated business |
|---|----------|---------------------------------------|---|
| (1) | | % | |
| (2) | | % | |
| (3) | | % | |
| (4) | | % | |
| Total Enter here and on page 1, Part II, line 14 | | | 0. |

| FORM 990-T | OTHER DEDUCTIONS | STATEMENT 1 |
|--------------------------------------|------------------|-------------|
| DESCRIPTION | | AMOUNT |
| TAX PREP FEES | | 1,000. |
| TOTAL TO FORM 990-T, PAGE 1, LINE 27 | | 1,000. |

| FORM 990-T | NET OPERATING LOSS DEDUCTION | | | STATEMENT 2 |
|-----------------------------------|------------------------------|-------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 12/31/18 | 162,825. | 0. | 162,825. | 162,825. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 162,825. | 162,825. |

| FORM 990-T | NET OPERATING LOSS DEDUCTION | | | STATEMENT 3 |
|-----------------------------------|------------------------------|-------------------------|----------------|---------------------|
| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
| 12/31/03 | 128,723. | 0. | 128,723. | 128,723. |
| 12/31/04 | 160,599. | 0. | 160,599. | 160,599. |
| 12/31/05 | 161,740. | 0. | 161,740. | 161,740. |
| 12/31/06 | 124,448. | 0. | 124,448. | 124,448. |
| 12/31/07 | 152,264. | 0. | 152,264. | 152,264. |
| 12/31/08 | 230,106. | 0. | 230,106. | 230,106. |
| 12/31/09 | 284,565. | 0. | 284,565. | 284,565. |
| 12/31/10 | 188,206. | 0. | 188,206. | 188,206. |
| 12/31/11 | 251,267. | 0. | 251,267. | 251,267. |
| 12/31/12 | 215,475. | 0. | 215,475. | 215,475. |
| 12/31/13 | 194,811. | 0. | 194,811. | 194,811. |
| 12/31/14 | 74,772. | 0. | 74,772. | 74,772. |
| 12/31/15 | 88,934. | 0. | 88,934. | 88,934. |
| 12/31/16 | 119,671. | 0. | 119,671. | 119,671. |
| 12/31/17 | 111,879. | 0. | 111,879. | 111,879. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 2,487,460. | 2,487,460. |

 FORM 990-T SCHEDULE E - DEPRECIATION DEDUCTION STATEMENT 6

| DESCRIPTION | ACTIVITY NUMBER | AMOUNT | TOTAL |
|--|--------------------|---------|---------|
| DEPRECIATION EXPENSE | | 12,597. | |
| - SUBTOTAL - | 1 | | 12,597. |
| TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A) | | | 12,597. |

 FORM 990-T SCHEDULE E - OTHER DEDUCTIONS STATEMENT 7

| DESCRIPTION | ACTIVITY NUMBER | AMOUNT | TOTAL |
|--|--------------------|---------|----------|
| PAYROLL TAXES & BENEFITS | | 18,194. | |
| MAINTENANCE SALARIES | | 68,270. | |
| REPAIRS AND MAINTENANCE | | 31,628. | |
| OFFICE EXPENSES | | 33,386. | |
| INTEREST EXPENSE | | 30,423. | |
| OCCUPANCY, INSURANCE, AND UTILITIES | | 66,277. | |
| CONTRACTED SERVICES | | 35,438. | |
| BAD DEBT | | 141. | |
| - SUBTOTAL - | 1 | | 283,757. |
| TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B) | | | 283,757. |