

Our Vision Statement

Children and Families in our community will have access to quality early learning programs that nurture their learning potential and prepare them for their educational success.

Board AGENDA

April 23, 2020 - 8:30 a.m.

8:30 a.m. Call to Order R. Colen
8:31 a.m. Roll Call B. Montalvo
8:33 a.m. Chair Report – 2018 – 2019 Audit
8:37 a.m. Consent Agenda Section 1

RATIFICATION ITEM

Administration

8:41 a.m. Sliding Fee Schedule Section 2 – R. Fricks / L. Sims
8:45 a.m. Provider Incentives Section 3 – R. Fricks

ACTION ITEM

Administration

8:49 a.m. 990 Report for 2018 – 2019 Handout – R. Fricks / L. Walker
8:53 a.m. Board of Directors Membership Section 4 – R. Fricks
8:57 a.m. 2019 – 2020 Budget Revision 4-B Section 5 – R. Fricks / D. Johnson

DISCUSSION ITEMS

9:01 a.m. COVID-19 Update R. Fricks
9:05 a.m. EFS MOD Status R. Fricks / M. Easter

INFORMATION ITEMS

- Community Partner Updates Included in the packet
- See attached

CHIEF EXECUTIVE OFFICER'S REPORT

Public Comment

Adjournment

MEETING SCHEDULE for FY 2019 – 2020

Success By 6 (SB6) Leadership Council 9:00 AM, Friday	Executive Committee 8:30 AM, Thursday	Board of Directors 8:30 AM, Thursday	Finance Committee 8:30 AM, Thursday	Help Me Grow Council 11:00 AM, Thursday
	4-09-20	4-23-20		4-26-20
5-15-20	5-14-20		5-28-20	5-21-20
	6-11-20	6-25-20		

- Effective April 1, 2020 All Committees / Board meetings will be held at ELCMC 2300 SW 17th Road, Ocala, FL 34471 or via Tele-Conference

2019 – 2020 Board Members

Robert Colen	Karen Vega	Benda Ford	Kathy Robbins	Richard Forrester
Mark Lander	Kathleen Woodring	Tara Huls	Kelly Scott	Commissioner M. Stone
Doug Day	Thomas LoBianco	Ryan Lilly	Lisa Seiffer	Cara Meeks
Judy Johnson	Jeanne Henningsen	Earlene Carte	Gwen Wilson	Paola Lopez
Todd Panzer				

To participate
in this meeting
via conference
call, dial-in
number is
(888) 585-9008
& conference
code is
629694729#

Section

1

Consent Agenda

- Full Board Meeting Minutes from February 27, 2020
- Financials through February 2020
- Current Events through March 2020

**Early Learning Coalition of Marion County:
Full Board Meeting Minutes**

Date/Time: February 27, 2020 at 8:30 AM

Location: Early Learning Coalition of Marion County

Members Present: Robert Colen; Brenda Ford; Paola Lopez; Earlene Carte; Gwen Wilson; Karen Vega; Kathy Robbins; Jeanne Henningsen; Dr. Tara Huls; Doug Day; Judy Johnson; Kelly Scott; Lisa Seiffer; Todd Panzer; Mark Lander; Ryan Lilly

Via Conference: Kathleen Woodring

Members Absent: Commissioner Michelle Stone; Richard Forrester; Cara Meeks; Thomas LoBianco

Guest: Dr. Gerry Combs; Nina Stanley, Barnes & Noble

Staff Present: Roseann Fricks, Chief Executive Officer; DeAnna Johnson, Chief Finance Officer; LaTrisha Sims, Chief Operations Officer; Beatriz Montalvo, Administrative Services / HR Director; Marcey Easter, Business Information Director; Lillian Engesser, Accountant; Cody Hosford, Community Relations Coordinator; JoLynn Rathel, SB6 Support Specialist; Susan Dewey, Programs Assistant; Michaela Powell, CSC: Eligibility; Destiny Newbern, Administrative Assistant

Agenda Item	Summary/Discussion	Action
Call to Order	Board meeting called to order. Beatriz Montalvo called roll. A quorum was present.	Robert Colen called the meeting to order at 8:30 AM
Chair Report	Robert recognized Dr. Gerry Combs, "Mr. C", for his continuous donation of books and contributions for PAT class participants, and contributions towards the Fall in Love with Reading event and Read Aloud 15 partners. Nina Stanley was acknowledged for their support and partnership through Barnes & Noble for their efforts on behalf of literacy for our youth.	
Consideration of the Consent Agenda	The October 24, 2019 minutes, Financials through December 2019, and the Current Events through January 2020 were included in the consent agenda for Board approval.	ACTION: Judy Johnson moved to accept the Consent Agenda as presented. Doug Day seconded. The motion carried unanimously.
ELCMC Organizational Chart	Roseann asked to ratify the revised ELCMC Organizational Chart as approved by the Executive Committee effective December 1, 2019, as detailed on the Ratification Sheet.	RATIFICATION: Judy Johnson moved to ratify, and Jeanne Henningsen seconded. The motion carried unanimously.
Electrical Repairs	Roseann asked to ratify the purchase of electrical repair services from HT Electric as approved by the Executive Committee on March 12, 2020 for immediate implementation, as detailed on the Ratification Sheet.	RATIFICATION: Karen Vega moved to ratify, and Ryan Lilly seconded. The motion carried unanimously.
2019-2020 Budget Revision 3-B	DeAnna asked to approve the 2019-2020 proposed line item Budget Revision (3B). The revisions in the budget are to reallocate line items based upon the factors listed and detailed on the Action Sheet.	ACTION: Jeanne Henningsen moved to approve, and Todd Panzer seconded. The motion carried unanimously.
EFS MOD Status	Roseann reported that EFS MOD is still encountering performance challenges. We continue to have conversations with the Office of Early Learning. We have been manually counting attendance for reconciliation and auditing purposes.	DISCUSSION
Marion County Health Department Update	Mark Lander provided the following highlights: <ul style="list-style-type: none"> Marion County has not had any new cases of Hepatitis A in the last eight weeks. 	DISCUSSION – Roundtable

Agenda Item	Summary/Discussion	Action
	<ul style="list-style-type: none"> There are lots of rumors on developing cases for coronavirus and none have been confirmed. Please refer all questions to the Marion County Health Department. 	
Marion County Public Schools Update	Tara Huls invited all to attend the Superintendent's Literacy Festival on Saturday, February 29 th from 9 AM to 1 PM at the Citizen Circle in Downtown.	DISCUSSION – Roundtable
Jeanne Henningsen Worldwide	Jeanne announced the following highlights: <ul style="list-style-type: none"> <u>iGen</u> Book by Jean M. Twenge is a must read!!! The 4th Annual Ignite Premier luncheon will be held on Thursday, March 12th from 11:30 AM to 1:00 PM at the Ewers/Klein Center. All event proceeds will benefit The Kimberly's Center for Child Protection. 	DISCUSSION – Roundtable
Outreach autism Services Network	Karen Vega invited all to attend the 7 th Annual Autism Superhero Fun Walk on Saturday, March 28 th at Sholom Park. A flyer was distributed for informational purposes.	DISCUSSION – Roundtable
Ocala CEP	Ryan Lilly shared the following highlights: <ul style="list-style-type: none"> Dollar Tree is coming to the Marion Oaks area at the Florida Crossroads Commerce Park. It will be a 1.7 million square foot distribution center to employ 700 at full build-out. An equine medical technology company is locating to Ocala from Chicago. New programs this year in West Ocala, Marion Oaks, and Silver Springs Shores for entrepreneur/small business education. Thank you to Commissioner Stone for all the support!	DISCUSSION – Roundtable
Episcopal Children's Services	Kelly Scott announced that the Wild Reading Safari had been rescheduled for October 3 rd . More details to come.	DISCUSSION – Roundtable
Ocala Family Medical Center	Todd invited all to attend their annual fundraiser Gala on April 21 st at Church of the Springs from 7 PM to 9 PM. Proceeds will allow for pregnancy services, ultrasounds, bible studies, adoption referrals, pregnancy test, prenatal vitamins, among other things. Seating by invitation - Contact (352) 629-2811 for table sponsor.	DISCUSSION – Roundtable
College of Central Florida	Kathy Robbins discussed the following highlights: <ul style="list-style-type: none"> A group of BA students and faculty attended the Ron Clark Academy in Atlanta and it was amazing! The Early Childhood Conference on March 28, 2020. Hope to see you all there! 	DISCUSSION – Roundtable
Chief Executive Officer Update	Roseann provided the following highlights: <ul style="list-style-type: none"> The three new staff were introduced to the Board: <ul style="list-style-type: none"> Michaela Powell, CSC: Eligibility Lillian Engesser, Accountant Tiffany Thrasher, CSC: Professional Development There are currently 410 children on the waitlist. On Saturday, we sent out 157 notices for 97 families. The SB6 Leadership Council will be changing their meeting schedule for fiscal year 2020 – 2021 to quarterly. Sally Kelly has expressed interest in joining the Council. House Bill 1013 continues to be a hot topic, more to come. Our Diaper Drive will begin in March through the partnership with Publix Supermarkets. All are invited to attend the New Kitchen Dedication at Shores Assembly of God at 10:30 AM. On April 26th. RSVP by April 17th. 	

Agenda Item	Summary/Discussion	Action
	<ul style="list-style-type: none"> On March 19th Florida Credit Union will host the CEP Business Afterhours event to benefit the Early Learning Coalition. We will be collecting diapers, and all are encouraged to attend. We applied for a grant with Buckle Up Florida for \$225,000 for car seats. 	
Information Items	<p>The following information items were included in the packet for informational and planning purposes:</p> <ul style="list-style-type: none"> Parent Comments for October, November, December 2019 and January 2020 Outreach Events Calendar <p>The following information items were available upon request:</p> <ul style="list-style-type: none"> Ocala Star Banner Article – Local Bottom 300 schools improving, iReady data shows Florida Dept of Education Press Release – 2019 NAEP Results Point to the Urgency to Be Bold and Raise Expectations Florida Dept of Education MEMORANDUM – Preschool Development Birth to Five – Renewal Grant 	INFORMATION
Public Comment	None	
Adjournment	Robert Colen adjourned the meeting.	The meeting adjourned at 9:25 AM

Reported by: Beatriz Montalvo, Administrative Services / HR Director

Approved by: _____

Signature

Date

NOTE – For additional information on any of the above items, please contact Chief Executive Officer, Roseann Fricks at rfricks@elc-marion.org.



Fiscal Year Ending June 30, 2020

Line #	Budget Line Item Account Name	Coalition Programs		Year to Date Analysis				Variance Analysis Notes	Agency Plan of Action
		2019-20 Budget	Actual Expenses as of 2/29/20	% of Year	% of Budget	Over/Under	Variance %		
001	SR Direct Child Services	\$ 9,591,532.20	\$ 4,756,129.73	66.67%	49.59%	Under	-17.08%	Waitlist is currently being worked on. Still issues with EFS Mod.	No adjustments at this time.
002	VPK Direct Child Services	\$ 5,471,865.10	\$ 3,635,540.82	66.67%	66.44%	Under	-0.23%		
003	Other Direct Child Services	\$ 479,924.51	\$ 225,147.27	66.67%	46.91%	Under	-19.75%	Still issues with EFS Mod so Coalition will not make any adjustments for slots at this time.	No adjustments at this time.
004	Salaries and Benefits	\$ 1,700,700.27	\$ 1,060,316.25	66.67%	62.35%	Under	-4.32%		
005	Staff Development	\$ 8,810.00	\$ 5,426.06	66.67%	61.59%	Under	-5.08%		
006	Professional Services	\$ 202,980.00	\$ 87,788.28	66.67%	43.25%	Under	-23.42%	Timing of Quality professional development trainings scheduled	No adjustment necessary
007	Occupancy	\$ 59,931.32	\$ 35,577.28	66.67%	59.36%	Under	-7.30%		
008	Postage, Freight, and Delivery	\$ 5,425.00	\$ 3,204.79	66.67%	59.07%	Under	-7.59%		
009	Equipment Leases	\$ 4,358.07	\$ 2,842.41	66.67%	65.22%	Under	-1.44%		
010	Supplies	\$ 22,270.56	\$ 14,464.14	66.67%	64.95%	Under	-1.72%		Due to COVID additional supplies are required so realignment will be completed.
011	Communications	\$ 22,397.84	\$ 8,716.22	66.67%	38.92%	Under	-27.75%	New phone system started in January.	Budget realignment required based upon new invoices from Verizon.
012	Insurance	\$ 26,461.84	\$ 16,740.22	66.67%	63.26%	Under	-3.40%		
013	Tangible Personal Property	\$ 28,341.95	\$ -	66.67%	0.00%	Under	-66.67%	Timing of planned purchasing. Laptops purchased in March to handle COVID stay-at-home guidelines	No adjustment necessary
014	Quality Initiatives	\$ 289,397.00	\$ 78,651.98	66.67%	27.18%	Under	-39.49%	Timing of purchases.	No adjustment necessary
015	OEL Special Projects	\$ 12,125.00	\$ 6,625.00	66.67%	54.64%	Under	-12.03%		
016	Travel	\$ 27,326.69	\$ 12,146.99	66.67%	44.45%	Under	-22.22%	Delay in provider monitorings	Due to COVID travel will be greatly reduced. Budget realignment required.
017	Other Expenses	\$ 78,875.90	\$ 51,534.28	66.67%	65.34%	Under	-1.33%		
018	Other Program Expenses (SB6)	\$ 48,765.24	\$ 36,778.56	66.67%	75.42%	Over	8.75%		
019	Depreciation/PY Adjustment	\$ 46,855.08	\$ 31,236.72	66.67%	66.67%	Under	0.00%		
	TOTAL	\$ 18,128,343.57	\$ 10,068,867.00	66.67%	55.54%	Under	-11.12%		

CURRENT EVENTS
CEO Report 2019 - 2020

	July	August	September	October	November	December	January	February	March	April	May	June	Yr. Total
Customer (Parent/Caregiver) Service													
Inclusion Services	2	2	3	3	5	4	6	0	2				27
Incoming Calls	638												638
Outgoing Calls	611												611
Fraud Reports	0	0	1	0	0	0	0	0	0				1
Quality Initiative Services													
Number of SR Child Care Providers	102	108	108	108	108	108	108	104	104				
Number of VPK Child Care Providers	7	69	69	69	69	69	69	89	89				
Trainings Provided	1	2	1	2	1	2	1	3	2				15
Attendees	34	99	10	51	35	91	13	59	34				426
Community Awareness													
Number of Staff Attended Events	9	9	14	22	20	26	14	12	4				130
Children's Books, Parent Resources, Etc. distributed to the Community (Events/Agencies/Businesses)	2,047	2,846	1,571	8,034	1,252	1,127	1,284	4,966	1,836				24,963
ELCMC Website Statistics													
Number of Visits	5,785	6,495	4,532	4,400	3,400	3,422	5,360	4,131	4,211				41,736
Average Visits Per Day	187	210	151	142	113	110	173	142	139				1,367
Facebook Total Likes - Help Me Grow	2	2	4	8	2	0	1	1	5				25
Facebook Total Likes - ELCMC	4	23	19	24	11	2	6	2	19				110
Parent Education													
Read Aloud Partners	416	416	420	425	428	432	434	438	434				
Bucket of Books	322	335	333	338	343	348	350	374	350				
Pack N Plays distributed	13	14	8	22	15	12	5	8	5				102
Car Seat Fittings Training	0	0	0	0	0	0	0	0	0				0
Parents as Teachers Classes	0	4	10	7	7	5	4	4	8				49
Parents as Teachers Attendees	0	130	302	247	205	88	339	121	153				1,432
Staff Development													
Presentations	2	3	5	1	1	0	4	0	0				16
Trainings Attended	18	14	8	1	6	8	11	10	3				79

Section

2



In partnership with

United Way



Ratification Sheet

FULL BOARD

April 23, 2020

SUBJECT: Approval of the 2020 – 2021 Sliding Fee Schedule

RATIFICATION ITEM

Ratify the Sliding Fee Schedule and modification of parent fees based on the updated Federal Poverty Level Guidelines and guidance received from the Office of Early Learning for fiscal year 2020 – 2021. The request for the increase is due to the Federal Poverty Increase and increase in minimum wage.

BACKGROUND INFORMATION

Annually the Federal Poverty Level Guidelines are reviewed and updated as necessary. Based on any adjustments to the federal poverty level income, the sliding fee schedule is adjusted as appropriate.

For 2018 - 2019 staff recommended leaving the funding calculation the same as prior year for minimal effect on families. At that time 40% of our children enrolled came from families who were at the FPL range. Other options to increase parent fees were reviewed by staff however, the fiscal impact to our families was too significant. This was approved by the Board of Directors on April 26, 2018. The Sliding Fee Schedule was submitted to OEL for review and final approval and received notification on June 29, 2018, that the use of the Option C Fee Schedule was no longer an option. OEL had taken the Option C schedule and overlaid it into the original schedule and instructed the Coalition to use the modified by OEL Sliding Fee Schedule for 2018 – 2019.

For 2019 - 2020 the Coalition management team recommended simplifying the schedule with calculations as detailed on the attached Approved Sliding Fee Schedule. The calculation was based upon 260 days of child care service per year for a family of three (3).

For 2020-2021 the Coalition management team has analyzed the current copayments across the State with the raw data that was provided by OEL and will continue to recommend simplifying the sliding fee schedule based on the 2020 Federal Poverty Guidelines (FPG) and State Median Income (SMI) by using the same funding calculation. The calculation continues to be based upon 260 days of child care service per year for a family of three (3) and will increase by 2% of the current daily fees.

This decision was made to help better prepare families increase their proportional share of their child care cost as they move toward economic self-sufficiency.

The Executive Committee unanimously approved as stated above for immediate implementation on, March 12, 2020.

Supporting Documentation Included:

- 2020-2021 Proposed Sliding Fee Schedule
- 2019-2020 Approved Sliding Fee Schedule

Supporting Documentation Available:

- OEL 2020 Sliding Fee Schedule Memo
- OEL Program Guidance 400.01 Federal Poverty Guidelines

Florida's Office of Early Learning
SLIDING FEE SCHEDULE

DAILY FEE		Annual Gross Income - Number of persons in Family															SIBLING DAILY FEE		
Full-Time	Part-Time	FPL as indicated unless exceeds	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Full-Time	Part-Time
1.25	0.63	85% SMI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.94	0.47
6%		50%FPL	6,380	8,620	10,860	13,100	15,340	17,580	19,820	22,060	24,300	26,540	28,780	31,020	33,260	35,500	37,740		
2.51	1.25	75%FPL	6,381	8,621	10,861	13,101	15,341	17,581	19,821	22,061	24,301	26,541	28,781	31,021	33,261	35,501	37,741	1.88	0.94
			9,570	12,930	16,290	19,650	23,010	26,370	29,730	33,090	36,450	39,810	43,170	46,530	49,890	53,250	56,610		
3.76	1.88		9,571	12,931	16,291	19,651	23,011	26,371	29,731	33,091	36,451	39,811	43,171	46,531	49,891	53,251	56,611	2.82	1.41
			12,759	17,239	21,719	26,199	30,679	35,159	39,639	44,119	48,599	53,079	57,559	62,039	66,519	70,999	75,479		
5.01	2.51	FPL	12,760	17,240	21,720	26,200	30,680	35,160	39,640	44,120	48,600	53,080	57,560	62,040	66,520	71,000	75,480	3.76	1.88
			14,887	20,114	25,341	30,568	35,794	41,021	46,248	51,475	56,702	61,928	67,155	72,382	77,609	82,836	88,063		
5.85	2.92	85% SMI	14,888	20,115	25,342	30,569	35,795	41,022	46,249	51,476	56,703	61,929	67,156	72,383	77,610	82,837	88,064	4.39	2.20
			17,014	22,988	28,961	34,935	40,909	46,882	52,856	58,830	64,803	70,777	76,751	82,724	88,698	94,671	100,645		
6.68	3.34	85% SMI	17,015	22,989	28,962	34,936	40,910	46,883	52,857	58,831	64,804	70,778	76,752	82,725	88,699	94,672	100,646	5.01	2.51
		150%FPL	19,140	25,860	32,580	39,300	46,020	52,740	59,460	66,180	72,900	79,620	86,340	93,060	99,780	106,500	113,220		
8.77	4.39	85% SMI	19,141	25,861	32,581	39,301	46,021	52,741	59,461	66,181	72,901	79,621	86,341	93,061	99,781	106,501	113,221	6.58	3.29
7%			19,884	26,865	33,846	40,827	47,809	54,790	61,771	68,752	75,733	82,715	89,696	96,677	103,658	110,639	117,620		
9.11	4.56	85% SMI	19,885	26,866	33,847	40,828	47,810	54,791	61,772	68,753	75,734	82,716	89,697	96,678	103,659	110,640	117,621	6.83	3.42
			20,628	27,870	35,113	42,355	49,597	56,840	64,082	71,324	78,567	85,809	93,051	100,294	107,536	114,779	122,021		
9.45	4.73		20,629	27,871	35,114	42,356	49,598	56,841	64,083	71,325	78,568	85,810	93,052	100,295	107,537	114,780	122,022	7.09	3.55
			21,372	28,875	36,379	43,882	51,386	58,889	66,393	73,897	81,400	88,904	96,407	103,911	111,414	118,918	126,421		
9.79	4.90	85% SMI	21,373	28,876	36,380	43,883	51,387	58,890	66,394	73,898	81,401	88,905	96,408	103,912	111,415	118,919	126,422	7.35	3.68
			22,116	29,880	37,645	45,410	53,175	60,939	68,704	76,469	84,234	91,998	99,763	107,528	115,292	123,057	130,822		
10.14	5.07		22,117	29,881	37,646	45,411	53,176	60,940	68,705	76,470	84,235	91,999	99,764	107,529	115,293	123,058	130,823	7.60	3.80
			22,860	30,885	38,911	46,937	54,963	62,989	71,015	79,041	87,067	95,093	103,119	111,145	119,171	127,197	135,222		
10.48	5.24	85% SMI	22,861	30,886	38,912	46,938	54,964	62,990	71,016	79,042	87,068	95,094	103,120	111,146	119,172	127,198	135,223	7.86	3.93
		185%FPL	23,606	31,894	40,182	48,470	56,758	65,046	73,334	81,622	89,910	98,198	106,486	114,774	123,062	131,350	139,638		
12.36	6.18		23,607	31,895	40,183	48,471	56,759	65,047	73,335	81,623	89,911	98,199	106,487	114,775	123,063	131,351	139,639	9.27	4.64
8%			24,563	33,187	41,811	50,435	59,059	67,683	76,307	84,931	93,555	102,179	110,803	119,427	128,051	136,675	145,299		
12.87	6.43	85% SMI	24,564	33,188	41,812	50,436	59,060	67,684	76,308	84,932	93,556	102,180	110,804	119,428	128,052	136,676	145,300	9.65	4.83
		200%FPL	25,520	34,480	43,440	52,400	61,360	70,320	79,280	88,240	97,200	106,160	115,120	124,080	133,040	142,000	150,960		
15.04	7.52	85% SMI	25,521	34,481	43,441	52,401	61,361	70,321	79,281	88,241	97,201	106,161	115,121	124,081	133,041	142,001	150,961	11.28	5.64
9%			27,434	37,066	46,698	56,330	65,962	75,594	85,226	94,858	104,490	114,122	123,754	133,386	143,018	152,650	162,282		
16.17	8.08		27,435	37,067	46,699	56,331	65,963	75,595	85,227	94,859	104,491	114,123	123,755	133,387	143,019	152,651	162,283	12.12	6.06
			29,348	39,652	49,956	60,260	70,564	80,868	91,172	101,476	111,780	122,084	132,388	142,692	152,996	163,300	173,604		
17.29	8.85	85% SMI	29,349	39,653	49,957	60,261	70,565	80,869	91,173	101,477	111,781	122,085	132,389	142,693	152,997	163,301	173,605	12.97	6.49
			32,563	42,582	52,602	62,621	72,641	82,660											

Parents receiving hourly care pay up to the part time fee.

Note: 10% Parent Fee was calculated using 260 days.

Refer to 6M-4.400, F.A.C.

Income 85% State Median Income: Upper threshold for eligibility

2020 LIHEAP Poverty Level (FPL) effective January 17, 2020
IM 2019-02 State Median Income Estimates

Please answer the following questions:

(1) If there is a sibling discount what is the percentage? Yes, 25%

(2) If any family pays more than 10% of their gross income for child care, please complete and attach the justification form that explains how the fees will not limit parent access to services. N/A

(3) Describe at what points during the year school age schedules are adjusted. For example, beginning of summer, end of summer, spring break, etc. Vacations, Holidays, and Summers

Florida's Office of Early Learning SLIDING FEE SCHEDULE

DAILY FEE		Annual Gross Income - Number of persons in Family																	SIBLING DAILY FEE	
Full-Time	Part-Time	FPL as indicated unless exceeds	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Full-Time	Part-Time	
1.23	0.62	85% SMI	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.92	0.46	
6%		50%FPL	6,245	8,455	10,665	12,875	15,085	17,295	19,505	21,715	23,925	26,135	28,345	30,555	32,765	34,975	37,185			
2.46	1.23	75%FPL	6,246	8,456	10,666	12,876	15,086	17,296	19,506	21,716	23,926	26,136	28,346	30,556	32,766	34,976	37,186	1.85	0.93	
			9,368	12,683	15,998	19,313	22,628	25,943	29,258	32,573	35,888	39,203	42,518	45,833	49,148	52,463	55,778			
3.69	1.85		9,369	12,684	15,999	19,314	22,629	25,944	29,259	32,574	35,889	39,204	42,519	45,834	49,149	52,464	55,779	2.77	1.39	
			12,489	16,909	21,329	25,749	30,169	34,589	39,009	43,429	47,849	52,269	56,689	61,109	65,529	69,949	74,369			
4.92	2.46	FPL	12,490	16,910	21,330	25,750	30,170	34,590	39,010	43,430	47,850	52,270	56,690	61,110	65,530	69,950	74,370	3.69	1.85	
			14,572	19,729	24,886	30,043	35,199	40,356	45,513	50,670	55,827	60,983	66,140	71,297	76,454	81,611	86,767			
5.74	2.87	85% SMI	14,573	19,730	24,887	30,044	35,200	40,357	45,514	50,671	55,828	60,984	66,141	71,298	76,455	81,612	86,768	4.31	2.16	
			16,654	22,548	28,441	34,335	40,229	46,122	52,016	57,910	63,803	69,697	75,590	81,484	87,378	93,271	99,165			
6.56	3.28	85% SMI	16,655	22,549	28,442	34,336	40,230	46,123	52,017	57,911	63,804	69,698	75,591	81,485	87,379	93,272	99,166	4.92	2.46	
		150%FPL	18,735	25,365	31,995	38,625	45,255	51,885	58,515	65,145	71,775	78,405	85,035	91,665	98,295	104,925	111,555			
8.61	4.31	85% SMI	18,736	25,366	31,996	38,626	45,256	51,886	58,516	65,146	71,776	78,406	85,036	91,666	98,296	104,926	111,556	6.46	3.23	
7%			19,463	26,351	33,239	40,126	47,014	53,902	60,789	67,677	74,565	81,452	88,340	95,228	102,115	109,003	115,891			
8.95	4.47		19,464	26,352	33,240	40,127	47,015	53,903	60,790	67,678	74,566	81,453	88,341	95,229	102,116	109,004	115,892	6.71	3.36	
			20,191	27,337	34,482	41,627	48,773	55,918	63,064	70,209	77,354	84,500	91,645	98,790	105,936	113,081	120,227			
9.28	4.64	85% SMI	20,192	27,338	34,483	41,628	48,774	55,919	63,065	70,210	77,355	84,501	91,646	98,791	105,937	113,082	120,228	6.96	3.48	
			20,920	28,323	35,726	43,129	50,532	57,935	65,338	72,741	80,144	87,547	94,950	102,353	109,756	117,159	124,562			
9.62	4.81		20,921	28,324	35,727	43,130	50,533	57,936	65,339	72,742	80,145	87,548	94,951	102,354	109,757	117,160	124,563	7.21	3.61	
			21,648	29,308	36,969	44,630	52,291	59,951	67,612	75,273	82,934	90,594	98,255	105,916	113,577	121,237	128,898			
9.95	4.98	85% SMI	21,649	29,309	36,970	44,631	52,292	59,952	67,613	75,274	82,935	90,595	98,256	105,917	113,578	121,238	128,899	7.47	3.74	
			22,376	30,294	38,213	46,131	54,050	61,968	69,886	77,805	85,723	93,642	101,560	109,479	117,397	125,315	133,234			
10.29	5.14	185%FPL	22,377	30,295	38,214	46,132	54,051	61,969	69,887	77,806	85,724	93,643	101,561	109,480	117,398	125,316	133,235	7.72	3.86	
			23,107	31,284	39,461	47,638	55,815	63,992	72,169	80,346	88,523	96,700	104,877	113,054	121,231	129,408	137,585			
12.14	6.07	85% SMI	23,108	31,285	39,462	47,639	55,816	63,993	72,170	80,347	88,524	96,701	104,878	113,055	121,232	129,409	137,586	9.11	4.56	
8%			24,043	32,552	41,060	49,569	58,077	66,586	75,094	83,603	92,111	100,620	109,128	117,637	126,145	134,654	143,162			
12.63	6.32	200%FPL	24,044	32,553	41,061	49,570	58,078	66,587	75,095	83,604	92,112	100,621	109,129	117,638	126,146	134,655	143,163	9.48	4.74	
			24,980	33,820	42,660	51,500	60,340	69,180	78,020	86,860	95,700	104,540	113,380	122,220	131,060	139,900	148,740			
14.77	7.38	85% SMI	24,981	33,821	42,661	51,501	60,341	69,181	78,021	86,861	95,701	104,541	113,381	122,221	131,061	139,901	148,741	11.08	5.54	
9%			26,854	36,357	45,860	55,363	64,866	74,369	83,872	93,375	102,878	112,381	121,884	131,387	140,890	150,393	159,896			
15.87	7.94	85% SMI	26,855	36,358	45,861	55,364	64,867	74,370	83,873	93,376	102,879	112,382	121,885	131,388	140,891	150,394	159,897	11.91	5.96	
			28,727	38,893	49,059	59,225	69,391	79,557	89,723	99,889	110,055	120,221	130,387	140,553	150,719	160,885	171,051			
16.98	8.49	85% SMI	28,728	38,894	49,060	59,226	69,392	79,558	89,724	99,890	110,056	120,222	130,388	140,554	150,720	160,886	171,052	12.74	6.37	
			30,982	40,514	50,047	59,580														

Parents receiving hourly care pay up to the part time fee.

Note: 10% Parent Fee was calculated using 260 days.

Refer to 6M-4.400, F.A.C.

Income 85% State Median Income: Upper threshold for eligibility

2019 Poverty Level (FPL) effective January 11, 2019
LIHEAP IM 2018-03 State Median Income Estimates

Please answer the following questions:

(1) If there is a sibling discount what is the percentage? Yes, 25%

(2) If any family pays more than 10% of their gross income for child care, please complete and attach the justification form that explains how the fees will not limit parent access to services. N/A

(3) Describe at what points during the year school age schedules are adjusted. For example, beginning of summer, end of summer, spring break, etc. Beginning and end of Summer only

Section

3



In partnership with

United Way



Ratification Sheet

FULL BOARD

April 23, 2020

SUBJECT: Approval of financial support for childcare providers

RATIFICATION ITEM

Ratify the re-allocation of up to \$100,000 from the ELCMC Quality Budget to allow us to pay Marion County School Readiness providers \$50 a day beginning March 16th for a maximum of five week or until \$100,000 has been utilized for each day the child care provider was opening and operating. This action would allow each school readiness provider to receive a maximum of \$1,250 is the school readiness provider was operating five days a week during the indicated time frame.

BACKGROUND INFORMATION

COVID-19 has created challenging times for our childcare providers, most of which are small businesses in Marion County. Financial burdens are being incurred by these small businesses as parents encounter challenges with working on a regular basis, maybe having their work hours decreased, or even being displaced from their place of employment as businesses close for the safety of the community.

To support the small local businesses of childcare in Marion County, the above action will allow the businesses to meet some of their financial needs during this challenging time.

The Coalition encourages the providers to use the funds in a manner that best needs their needs, including and prioritizing salaries for their staff.

The Coalition requests the Executive Committee approve this action for immediate implementation, to be paid to the providers as follows:

Payment for March 16th – March 31st will be received by the Provider by April 3, 2020

Payment for April 1st – April 17th will be received by the Provider by April 24, 2020.

The Executive and Finance Committee unanimously approved as stated above on March 26, 2020.

Handouts



In partnership with

United Way



Action Sheet

FULL BOARD

April 23, 2020

SUBJECT: 2018-2019 IRS Form 990

PROPOSED ACTION

Approve 2018-2019 IRS Form 990.

BACKGROUND INFORMATION

The draft audited financial statements were received by the Coalition on March 27, 2020, with the completion of the IRS Form 990 still outstanding.

Coalition management reviewed the preliminary report and requested a few corrections and presented the final draft to the Executive and Finance Committees on March 30, 2020. The Committees, acting as the Board, approved the audit report to ensure timely submission of the document for compliance purposes.

The Coalition received the draft 990 report on April 22, 2020. Coalition management has reviewed the document and agrees with the figures contained therein.

Upon final approval the Coalition will receive the final copy, which will then be signed by the Chief Executive Officer prior to submission to the IRS.

Supporting Documentation Included:

- Draft 2018-19 IRS Form 990

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018
Open to Public Inspection**A** For the 2018 calendar year, or tax year beginning **07/01/18**, and ending **06/30/19****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization**EARLY LEARNING COALITION OF MARION COUNTY, INC.**

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

2300 SW 17TH ROAD

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

OCALA**FL 34471****D** Employer identification number**59-3627759****E** Telephone number**352-369-2315****G** Gross receipts \$ **16,296,582****F** Name and address of principal officer:**ROSEANN FRICKS****2300 SW 17TH ROAD****OCALA****FL 34471****H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status:☒

501(c)(3)

☐

501(c) ()

(insert no.)

☐

4947(a)(1) or

☐

527

J Website:**WWW.ELC-MARION.ORG****H(c)** Group exemption number ▶**K** Form of organization:☒

Corporation

☐

Trust

☐

Association

☐

Other ▶

L Year of formation: **1999****M** State of legal domicile: **FL****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE LEADERSHIP AND FOSTER PARTNERSHIPS TO OPTIMIZE A QUALITY EARLY LEARNING ENVIRONMENT FOR OUR CHILDREN THROUGH CHILD CARE, VOLUNTARY PRE-KINDERGARTEN AND PARENT EDUCATION.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	22
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	32
	6 Total number of volunteers (estimate if necessary)	6	23
	Revenue	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a
b Net unrelated business taxable income from Form 990-T, line 38		7b	0
8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)		15,977,913	16,279,066
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		4,590	2,980
Expenses	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	457	2,323
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,599	12,213
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	15,984,559	16,296,582
	14 Benefits paid to or for members (Part IX, column (A), line 4)		30,657
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,413,662	1,455,973
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	14,500,022	14,757,541
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	15,913,684	16,244,171
	19 Revenue less expenses. Subtract line 18 from line 12	70,875	52,411
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	1,563,805	2,576,208
	22 Net assets or fund balances. Subtract line 21 from line 20	1,198,439	2,157,504

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	ROSEANN FRICKS Type or print name and title		CEO		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	MARK A. WHITE, CPA		04/22/20		P00071001
	Firm's name ▶ PURVIS, GRAY & COMPANY, LLP	Firm's EIN ▶ 59-0548468			
	Firm's address ▶ 2347 SE 17TH STREET		Phone no. 352-732-3872		
	Firm's address ▶ OCALA, FL 34471				

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2018)

Part 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 PROVIDE LEADERSHIP AND FOSTER PARTNERSHIPS TO OPTIMIZE A QUALITY
EARLY LEARNING ENVIRONMENT FOR OUR CHILDREN THROUGH CHILD CARE,
VOLUNTARY PRE-KINDERGARTEN AND PARENT EDUCATION.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☒ Yes ☐ No

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 ☒ 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 \$ **10,056,713** including grants of\$) (Revenue \$ **2,980**)
SEE SCHEDULE O

4b (Code:) (Expenses \$ **5,252,807** including grants of\$) (Revenue \$)

**THE VOLUNTARY PREKINDERGARTEN EDUCATION PROGRAM - PREPARES EARLY LEARNERS
FOR SUCCESS IN KINDERGARTEN AND BEYOND. VPK HELPS BUILD A STRONG
FOUNDATION FOR SCHOOL USING EDUCATIONAL MATERIAL CORRESPONDING TO VARIOUS
STAGES IN A CHILD'S DEVELOPMENT. TO BE ELIGIBLE, CHILDREN MUST LIVE IN
FLORIDA AND BE 4 YEARS OLD ON OR BEFORE SEPT. 1 OF THE CURRENT SCHOOL
YEAR. THE EARLY LEARNING COALITION PROVIDES VPK SERVICES TO 2,186 CHILDREN
IN MARION COUNTY.**

4c (Code:) (Expenses \$ **136,783** including grants of\$ **30,657**) (Revenue \$)

**HELP ME GROW (HMG) IS A UNIQUE, COMPREHENSIVE, AND INTEGRATED STATEWIDE
SYSTEM DESIGNED TO ADDRESS THE NEED FOR EARLY IDENTIFICATION OF
DEVELOPMENTAL AND/OR BEHAVIORAL CONCERNS, AND THEN TO LINK CHILDREN AND
THEIR FAMILIES TO COMMUNITY-BASED DEVELOPMENTAL AND BEHAVIORAL SERVICES
AND SUPPORTS.**

4d Other program services (Describe in Schedule O.)(Expenses \$ **360,764** including grants of\$) (Revenue \$)**4e** Total program service expenses **15,807,067**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1 X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 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 effect during the tax year? If "Yes," complete Schedule C, Part II	4	X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete 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 amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X
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	11c	X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a X	
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	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X
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 (see instructions)	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	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21 X	

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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 104	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	32
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit 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).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	X
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X
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.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a 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 excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI ☒

Section A. Governing Body and Management

	1a	22	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		22		
b Enter the number of voting members included in line 1a, above, who are independent	1b	22		
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		X
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 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:				
a The governing body?		8a	X	
b Each committee with authority to act on behalf of the governing body?		8b	X	
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		X

Section 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?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section 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) available for public inspection. Indicate how you made these available. Check all that apply.
☐ Own website ☐ Another's website ☒ 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 financial 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 **►**
ROSEANN FRICKS
2300 SW 17TH ROAD
OCALA

FL 34471 352-369-2315

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERTA BRANT	0.10									
BOARD MEMBER	0.00	X						0	0	0
(2) KATHY ROBBINS	0.58									
BOARD MEMBER	0.00	X						0	0	0
(3) MICHELLE STONE	0.60									
BOARD MEMBER	0.00	X						0	0	0
(4) BRENDA FORD	0.10									
BOARD MEMBER	0.00	X						0	0	0
(5) RICHARD FORRESTER	0.80									
BOARD MEMBER	0.00	X						0	0	0
(6) KATHLEEN WOODRING	0.79									
PAST VICE CHAIR	0.00	X		X				0	0	0
(7) HOLLY GERLACH	0.01									
EXITING BOARD MEMBER	0.00	X						0	0	0
(8) TARA HULS	0.10									
BOARD MEMBER	0.00	X						0	0	0
(9) KELLY ROGERS	0.10									
BOARD MEMBER	0.00	X						0	0	0
(10) DOUG DAY	0.92									
TREASURER	0.00	X		X				0	0	0
(11) ROBERT COLEN	0.93									
CHAIR	0.00	X		X				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) MELISSA HANCOCK	0.01									
BOARD MEMBER	0.00	X						0	0	0
(13) LISA SEIFFER	0.83									
BOARD MEMBER	0.00	X						0	0	0
(14) RYAN LILLY	0.60									
BOARD MEMBER	0.00	X						0	0	0
(15) CARA MEEKS	0.70									
SECRETARY	0.00	X		X				0	0	0
(16) JUDY JOHNSON	0.83									
BOARD MEMBER	0.00	X						0	0	0
(17) EARLENE CARTE	0.60									
BOARD MEMBER	0.00	X						0	0	0
(18) GWEN WILSON	0.80									
BOARD MEMBER	0.00	X						0	0	0
(19) PAOLA LOPEZ	0.64									
VICE CHAIR	0.00	X		X				0	0	0
1b Sub-total										
c Total from continuation sheets to Part VII, Section A								169,234		27,253
d Total (add lines 1b and 1c)								169,234		27,253

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
MARION COUNTY SCHOOL BOARD OCALA FL 34471	512 SE 3RD STREET CHILD CARE SVCS	1,428,256
KIDS ACADEMY INC. OCALA FL 34476	6730 SW 85TH STREET CHILD CARE SVCS	670,417
NEW BEGINNINGS CHILD CARE & LEARNING OCALA FL 34470	2746 NE 14TH ST CHILD CARE SVCS	548,944
FUTURE STARS PRESCHOOL ACADEMY OCALA FL 34470	2746 NE 14TH ST CHILD CARE SVCS	439,371
KINGDOM KIDS 24 HOUR CHILD CARE OCALA FL 34472	9413 SE MARICAMP RD. CHILD CARE SVCS	352,328

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **47**

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) KAREN VEGA	0.67									
BOARD MEMBER	0.00	X						0	0	0
(21) MARK S LANDER	0.10									
BOARD MEMBER	0.00	X						0	0	0
(22) THOMAS LOBIANCO	0.67									
BOARD MEMBER	0.00	X						0	0	0
(23) JEANNE HENNINGSEN	0.60									
BOARD MEMBER	0.00	X						0	0	0
(24) DEANNA JOHNSON	40.00									
CFO	0.00			X				61,050	0	12,941
(25) ROSEANN FRICKS	40.00									
CEO	0.00			X				108,184	0	14,312
1b Sub-total								169,234		27,253
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line 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	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	16,050,724				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	228,342				
	g Noncash contributions included in lines 1a-1f: \$		29,842				
	h Total. Add lines 1a-1f		16,279,066				
	Program Service Revenue	2a PROVIDER TRAINING	Busn. Code 611600	2,980	2,980		
b							
c							
d							
e							
f All other program service revenue							
g Total. Add lines 2a-2f			2,980				
Other Revenue		3 Investment income (including dividends, interest, and other similar amounts)		1,025			1,025
		4 Income from investment of tax-exempt bond proceeds					
	5 Royalties						
	6a Gross rents	(i) Real 9,485					
	b Less: rental exps.						
	c Rental inc. or (loss)	9,485					
	d Net rental income or (loss)		9,485			9,485	
	7a Gross amount from sales of assets other than inventory	(i) Securities 1,298					
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)	1,298					
	d Net gain or (loss)		1,298			1,298	
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11a MISC REVENUE	Busn. Code 900099	2,728			2,728	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		2,728				
	12 Total revenue. See instructions.		16,296,582	2,980	0	14,536	

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

☒**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	30,657	30,657		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	210,721	127,216	83,505	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	983,831	821,281	162,550	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	45,628	37,874	7,754	
9 Other employee benefits	131,856	111,133	20,723	
10 Payroll taxes	83,937	67,412	16,525	
11 Fees for services (non-employees):				
a Management				
b Legal	4,925		4,925	
c Accounting	15,250		15,250	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	353		353	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	14,077,305	14,077,305		
12 Advertising and promotion				
13 Office expenses	44,237	37,882	6,355	
14 Information technology	85,358	74,661	10,697	
15 Royalties				
16 Occupancy	96,743	72,360	24,383	
17 Travel	19,372	14,075	5,297	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	8,817	4,335	4,482	
20 Interest	3,323		3,323	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	47,789		47,789	
23 Insurance	17,830	3,825	14,005	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a QUALITY INITIATIVES	259,773	259,773		
b PARENT EDUCATION	36,736	36,736		
c MISC. EXPENSES	30,898	29,841	1,057	
d DUES AND SUBSCRIPTIONS	7,046	669	6,377	
e All other expenses	1,786	32	1,754	
25 Total functional expenses. Add lines 1 through 24e	16,244,171	15,807,067	437,104	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	61	1	61
	2 Savings and temporary cash investments	464,346	2	471,511
	3 Pledges and grants receivable, net	286,155	3	1,225,444
	4 Accounts receivable, net		4	
	5 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 instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	25,175	9	19,034
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,037,485		
	b Less: accumulated depreciation	10b 231,390	761,169	10c 806,095
	11 Investments—publicly traded securities	26,899	11	54,063
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,563,805	16	2,576,208	
Liabilities	17 Accounts payable and accrued expenses	1,077,573	17	2,102,598
	18 Grants payable		18	
	19 Deferred revenue	1,615	19	7,624
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	119,251	24	47,282
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	1,198,439	26	2,157,504
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	-295,866	27	-279,892
	28 Temporarily restricted net assets	661,232	28	698,596
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	365,366	33	418,704	
34 Total liabilities and net assets/fund balances	1,563,805	34	2,576,208	

Part XI Reconciliation of Net AssetsCheck 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	16,296,582
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,244,171
3	Revenue less expenses. Subtract line 2 from line 1	3	52,411
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	365,366
5	Net unrealized gains (losses) on investments	5	927
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	418,704

Part XII Financial Statements and ReportingCheck 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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

SCHEDULE A
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2018Open to Public
Inspection

Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990 or 990-EZ) 2018

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	15,071,221	13,412,912	14,990,328	15,977,913	16,279,066	75,731,440
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	15,071,221	13,412,912	14,990,328	15,977,913	16,279,066	75,731,440
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						75,731,440

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4	15,071,221	13,412,912	14,990,328	15,977,913	16,279,066	75,731,440
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	522	654	306	503	10,510	12,495
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)		4,289	3,855	1,599	2,728	12,471
11 Total support. Add lines 7 through 10						75,756,406
12 Gross receipts from related activities, etc. (see instructions)					12	11,744
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	99.97%
15 Public support percentage from 2017 Schedule A, Part II, line 14	15	99.98%
16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3	

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete **line 2** below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test. Answer (a) and (b) below.

	Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity		
3	Administrative expenses paid to accomplish exempt purposes of supported organizations		
4	Amounts paid to acquire exempt-use assets		
5	Qualified set-aside amounts (prior IRS approval required)		
6	Other distributions (describe in Part VI). See instructions.		
7	Total annual distributions. Add lines 1 through 6.		
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.		
9	Distributable amount for 2018 from Section C, line 6		
10	Line 8 amount divided by line 9 amount		

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

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

PART II, LINE 10 - OTHER INCOME DETAIL

FUNDRAISING REVENUES \$ 6,280

MISC INCOME \$ 6,191

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2018

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(**3**) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

EARLY LEARNING COALITION OF MARION

Employer identification number

59-3627759**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORIDA'S OFFICE OF EARLY LEARNING 250 MARRIOTT DRIVE TALLAHASSEE FL 32301	\$ 15,699,792	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

**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.

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Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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 advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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 treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did 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 ☐

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
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 ☐ %
c Temporarily restricted 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:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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
1a Land		116,960		116,960
b Buildings		856,518	171,094	685,424
c Leasehold improvements				
d Equipment		64,007	60,296	3,711
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				806,095

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►

2. 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 ☒

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per 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	16,297,509
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	927
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	927
3	Subtract line 2e from line 1	3	16,296,582
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	16,296,582

Part XII Reconciliation of Expenses per Audited Financial Statements 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	16,244,171
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	16,244,171
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	16,244,171

Part XIII Supplemental Information.

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

PART X - FIN 48 FOOTNOTE**INCOME TAXES**

THE COALITION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3)

OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FINANCIAL STATEMENTS

DO NOT REFLECT A PROVISION FOR INCOME TAXES.

IN ACCORDANCE WITH ASC SECTION 740-10, INCOME TAX UNCERTAINTIES, IT

IS THE POLICY OF MANAGEMENT TO EVALUATE ITS TAX POSITIONS ON AN

ONGOING BASIS AND TO DISCLOSE ANY SUCH POSITIONS IT BELIEVES WOULD

HAVE A MATERIAL IMPACT ON THE FINANCIAL STATEMENTS AND RELATED NOTES.

MANAGEMENT ALSO BELIEVES THAT NO SUCH REQUIRED DISCLOSURES CURRENTLY

EXIST.

Part XIII Supplemental Information *(continued)*

THE COALITION IS NO LONGER SUBJECT TO U.S. FEDERAL AND STATE INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2016. THE COALITION WOULD RECOGNIZE INTEREST ACCRUED RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES, IF ANY, IN OPERATING EXPENSES.

**SCHEDULE I
(Form 990)****Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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2018**Open to Public
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Internal Revenue Service

▶ Attach to Form 990.

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

Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)	HEALTHY START OF NORTH CENTRAL 1785 NW 80TH BLVD GAINESVILLE FL 32606	59-3118984	501C3	28,157				HELP ME GROW PROGRAM
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **1**
- 3 Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

SEE SCHEDULE I SUPPLEMENTAL INFORMATION WORKSHEET

SCHEDULE I (Form 990)	Supplemental Information		2018
For calendar year 2018, or tax year beginning 07/01/18 , and ending 06/30/19			Employer identification number 59-3627759
Name of the organization EARLY LEARNING COALITION OF MARION COUNTY, INC.			

PART IV - ADDITIONAL INFORMATION

THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE UNITED STATES ARE: 1) SUBRECIPIENT WILL PARTICIPATE IN A MINIMUM OF ONE (1) ON-SITE OR DESK REVIEW EACH FISCAL YEAR, 2) SUBRECIPIENT WILL PERMIT ACCESS TO ALL FINANCIAL STATEMENTS, INVOICES, AND RECORDS REGARDING HMGF PHYSICIAN OUTREACH ACTIVITIES FOR ANY AND ALL MONITORING AND AUDITING PURPOSES, 3) OBTAINING VERIFICATION THAT SUBRECIPIENT HAS NOT BEEN DEBARRED OR SUSPENDED FROM RECEIVING FEDERAL FUNDS DURING THE TERM OF THE CONTRACT, AND 4) SUBRECIPIENT WILL PERMIT ACCESS TO ALL SIGN IN SHEETS, MARKETING ATTESTATION SHEETS, AND OTHER FORMS OF DOCUMENTATION USED TO PROVE THE EXECUTION AND ATTENDANCE OF PHYSICIAN OUTREACH EVENTS FOR ANY AND ALL AUDITING PURPOSES.

SCHEDULE L
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Transactions With Interested Persons**▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.**▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____**3** Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____**Part II Loans to and/or From Interested Persons.**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						▶ \$ _____						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
				Yes	No
(1) HOLLY GERLACH	EMPLOYEE OF MCS	1,348,548	CHILDCARE SERVICES		X
(2) TARA HULS	EMPLOYEE OF MCS	1,348,548	CHILDCARE SERVICES		X
(3) PAOLA LOPEZ	KINDEROO CHILD	234,575	CHILDCARE SERVICES		X
(4) KATHY ROBBINS	EMPLOYEE OF CCF	92,844	CHILDCARE SERVICES		X
(5) EARLENE CARTE	FIRST ASSEMBLY	237,675	CHILDCARE SERVICES		X
(6) GWEN WILSON	FAMILY CHILDCAR	63,130	CHILDCARE SERVICES		X
(7) KELLY ROGERS	EPISCOPAL CHILD	255,539	CHILDCARE SERVICES		X
(8) MICHELLE STONE	MCBCC	192,023	MATCH DOLLARS/CDBG		X
(9)					
(10)					

Part V Supplemental Information

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

SCHEDULE L, PART V - ADDITIONAL INFORMATION**PART IV, LINES 1 & 2**

TARA HULS AND HOLLY GERLACH ARE EMPLOYEES OF THE MARION COUNTY SCHOOL BOARD, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINE 3

PAOLA LOPEZ IS THE OWNER & OPERATOR OF KINDEROO, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINE 4

KATHY ROBBINS IS AN EMPLOYEE OF COLLEGE OF CENTRAL FLORIDA, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINE 5

EARLENE CARTE IS AN EMPLOYEE OF FIRST ASSEMBLY OF GOD CHURCH, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINE 6

GWEN WILSON IS THE OWNER AND OPERATOR OF A FAMILY CHILDCARE CENTER, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINES 7 & 8

KELLY ROGERS IS AN EMPLOYEE OF EPISCOPAL CHILDREN'S SERVICES, WHICH PROVIDES SERVICES TO THE COALITION.

PART IV, LINE 9

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of org. revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

MICHELLE STONE IS AN EMPLOYEE OF MARION COUNTY BOARD OF COUNTY COMMISSIONERS, WHICH PROVIDE DOLLAR MATCHING TO THE COALITION FOR ITS SCHOOL READINESS PROGRAM AND COMMUNITY DEVELOPMENT BLOCK GRANT(CDBG) FOR FLOORING.

SCHEDULE M
(Form 990)Department of the Treasury
Internal Revenue Service**Noncash Contributions**

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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Name of the organization

**EARLY LEARNING COALITION OF MARION
COUNTY, INC.**

Employer identification number

59-3627759**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ DIAPERS (EACH)	X	96049	29,842	FAIR MARKET VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

31		X
----	--	----------

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a		X
-----	--	----------

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2018

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

SCHEDULE M - SUPPLEMENTAL INFORMATION

AMOUNTS IN PART I COLUMN (B) ARE REPORTED ON A PER ITEM BASIS.

DRAFT

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**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.

OMB No. 1545-0047

2018**Open to Public
Inspection**Name of the organization **EARLY LEARNING COALITION OF MARION
COUNTY, INC.**Employer identification number
59-3627759**FORM 990, PART III, LINE 2**

HELP ME GROW (HMG) IS A UNIQUE, COMPREHENSIVE, AND INTEGRATED STATEWIDE SYSTEM DESIGNED TO ADDRESS THE NEED FOR EARLY IDENTIFICATION OF DEVELOPMENTAL AND/OR BEHAVIORAL CONCERNS, AND THEN TO LINK CHILDREN AND THEIR FAMILIES TO COMMUNITY-BASED DEVELOPMENTAL AND BEHAVIORAL SERVICES AND SUPPORTS. EARLY DETECTION AND INTERVENTION ARE CRITICAL FOR OPTIMAL OUTCOMES FOR CHILDREN, BUT TOO OFTEN CHILDREN MISS THIS OPPORTUNITY.

HELP ME GROW ADDRESSES THIS BY BUILDING COLLABORATION AMONG COMMUNITY PROGRAMS, PROVIDING A CENTRALIZED ACCESS POINT FOR INFORMATION AND REFERRAL, PROMOTING SURVEILLANCE AND SCREENINGS, AS WELL AS EDUCATING AND INFORMING THE COMMUNITY.

HELP ME GROW SUPPORTS FAMILIES, CHILD HEALTH CARE, EARLY CARE AND EDUCATION, AND HUMAN SERVICE PROVIDERS. THE COMMUNITY CAN USE HELP ME GROW TO IDENTIFY EARLY SIGNS OF DEVELOPMENTAL OR BEHAVIORAL CONCERNS AND THE AVAILABLE COMMUNITY RESOURCES TO ADDRESS THEIR NEEDS. WITHOUT HELP ME GROW, THIS SENSITIVE PERIOD OF OPPORTUNITY MAY BE MISSED DUE TO UNTIMELY ASSESSMENTS OR DIFFICULTY IN FINDING AND NAVIGATING APPROPRIATE RESOURCES.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

THE SCHOOL READINESS PROGRAM OFFERS FINANCIAL ASSISTANCE TO LOW-INCOME FAMILIES FOR EARLY CHILD EDUCATION AND CARE SO FAMILIES CAN BECOME FINANCIALLY SELF-SUFFICIENT AND THEIR YOUNG CHILDREN CAN BE SUCCESSFUL IN SCHOOL IN THE FUTURE. SERVING CHILDREN FROM BIRTH THROUGH THE AGE OF 12. SCHOOL READINESS PROGRAMS PROVIDE DEVELOPMENTAL SCREENINGS FOR

Name of the organization

Employer identification number

EARLY LEARNING COALITION OF MARION

59-3627759

CHILDREN AND REFERRALS TO HEALTH AND EDUCATIONAL SPECIALISTS THE PROGRAM TAKES INTO ACCOUNT A CHILD'S PHYSICAL, SOCIAL, EMOTIONAL AND INTELLECTUAL DEVELOPMENT; INVOLVES PARENTS AS THEIR CHILD'S FIRST TEACHER; PREPARES CHILDREN TO BE READY FOR SCHOOL; AND GIVES PARENTS INFORMATION ABOUT CHILD DEVELOPMENT AND OTHER TOPICS OF INTEREST. THE EARLY LEARNING COALITION PROVIDES SERVICES IN THE SCHOOL READINESS PROGRAM TO 2,351 CHILDREN IN MARION COUNTY.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

SUCCESS BY 6 PROGRAM AND OTHER PROGRAMS: SUCCESS BY 6 IS A PARENT EDUCATION INITIATIVE WHICH FOCUSES ON EARLY CHILDHOOD EDUCATION THROUGH PARENT TRAININGS, TECHNICAL ASSISTANCE AND PARENT RESOURCES.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

A DRAFT OF THE COALITION'S ANNUAL FORM 990 INFORMATION RETURN SHALL BE REVIEWED BY THE FINANCE COMMITTEE AND SUBMITTED TO THE EXECUTIVE COMMITTEE FOR APPROVAL. THE BOARD OF DIRECTORS WILL MAKE FINAL APPROVAL PRIOR TO BEING FILED WITH THE INTERNAL REVENUE SERVICE. THIS REVIEW AND APPROVAL SHALL BE DOCUMENTED WITH THE BOARD OF DIRECTOR MEETING MINUTES. THE FORM 990 SHALL BE SIGNED BY THE CEO ONLY AFTER THE APPROVAL OF THE BOARD OF DIRECTORS

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

BOARD MEMBERS AND STAFF ARE REQUIRED TO COMPLETE A QUESTIONNAIRE ON AN ANNUAL BASIS AND DISCLOSE ANY KNOWN POTENTIAL CONFLICTS OF INTEREST. PRIOR TO MANAGEMENT, BOARD, OR COMMITTEE ACTION ON A CONTRACT OR TRANSACTION INVOLVING A CONFLICT OF INTEREST, A STAFF, DIRECTOR, OR COMMITTEE MEMBER

Name of the organization

Employer identification number

EARLY LEARNING COALITION OF MARION**59-3627759**

HAVING A CONFLICT OF INTEREST AND WHO IS IN ATTENDANCE AT THE MEETING SHALL DISCLOSE ALL FACTS MATERIAL TO THE CONFLICT OF INTEREST AND ABSTAIN FROM VOTING. SUCH DISCLOSURE SHALL BE REFLECTED IN THE MINUTES OF THE MEETING.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE COMPENSATION FOR THE CHIEF EXECUTIVE OFFICER IS DETERMINED BY THE BOARD CHAIR UPON COMPLETION OF AN ANNUAL REVIEW.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE COMPENSATION FOR THE CHIEF FINANCIAL OFFICER IS DETERMINED BY THE CHIEF EXECUTIVE OFFICER UPON COMPLETION OF AN ANNUAL REVIEW

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES

DESCRIPTION

TOT/PROG SERVICE

MGT & GENERAL

FUNDRAISING

CONTRACTED CHILDREN SVCS

\$ 14,077,305

\$ 0

\$ 0

NOTICE

The various schedules and worksheets that follow this page are not required by the Internal Revenue Service. These pages are for your information only.

Form 990/990PF	Rent Income and Deduction Worksheet Description ROOM RENTAL TO NFPS	2018
Name EARLY LEARNING COALITION OF MARION		Taxpayer Identification Number 59-3627759

Use this summary worksheet to verify data entered for a specific activity for your rental information

1. Gross rents	1.	9,485
Expenses (see details on worksheets below):		
2. Fees for services	2.	
3. Depreciation Expense	3.	
4. Direct Expense	4.	
5. Total expenses. Add lines 8 through 12	5.	
6. Net Income/Loss. Line 7 minus Line 13	6.	9,485

Expense Details - Fees for Services:

Accounting	
Legal	
Commissions	
Management	
Other Professional Fees	
Total Fees for Services	

Expense Details - Depreciation Expense:

On non-investment property	
On investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Direct Expense:

Interest	
Taxes/licenses	
Occupancy Expenses	
Repairs & Maintenance	
Travel/conferences/meetings	
Printing & Publication	
Advertising	
Insurance	
Utilities	
Supplies	
Other expenses	
Total Direct Expense	

Information is being used for the following Form 990-T schedules:

Schedule C
Schedule E
Schedule F
Schedule G

Expense Allocation to Program Service Accomplishments for 990/990E

First	
Second	
Third	
All other	

Form 990	Two Year Comparison Report	2017 & 2018
For calendar year 2018, or tax year beginning 07/01/18 , ending 06/30/19		

Name EARLY LEARNING COALITION OF MARION COUNTY, INC.	Taxpayer Identification Number 59-3627759
----------------------------------------------------------------	-----------------------------------------------------

		2017	2018	Differences
Revenue	1. Contributions, gifts, grants	254,855	228,342	-26,513
	2. Membership dues and assessments			
	3. Government contributions and grants	15,723,058	16,050,724	327,666
	4. Program service revenue	4,590	2,980	-1,610
	5. Investment income	503	1,025	522
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory	-46	1,298	1,344
	8. Net income or (loss) from fundraising events			
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory			
	11. Other revenue	1,599	12,213	10,614
	12. Total revenue. Add lines 1 through 11	15,984,559	16,296,582	312,023
Expenses	13. Grants and similar amounts paid		30,657	30,657
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	192,995	210,721	17,726
	16. Salaries, other compensation, and employee benefits	1,220,667	1,245,252	24,585
	17. Professional fundraising fees			
	18. Other professional fees	13,758,154	14,097,833	339,679
	19. Occupancy, rent, utilities, and maintenance	73,593	96,743	23,150
	20. Depreciation and Depletion	45,170	47,789	2,619
	21. Other expenses	623,105	515,176	-107,929
	22. Total expenses. Add lines 13 through 21	15,913,684	16,244,171	330,487
	23. Excess or (Deficit). Subtract line 22 from line 12	70,875	52,411	-18,464
Other Information	24. Total exempt revenue	15,984,559	16,296,582	312,023
	25. Total unrelated revenue			
	26. Total excludable revenue	6,646	17,516	10,870
	27. Total assets	1,563,805	2,576,208	1,012,403
	28. Total liabilities	1,198,439	2,157,504	959,065
	29. Retained earnings	365,366	418,704	53,338
	30. Number of voting members of governing body	21	22	
	31. Number of independent voting members of governing body	21	22	
	32. Number of employees	28	32	
	33. Number of volunteers	24	23	

Form 990	Tax Return History	2018
Name EARLY LEARNING COALITION OF MARION COUNTY, INC.		Employer Identification Number 59-3627759

	2014	2015	2016	2017	2018	2019
Contributions, gifts, grants	15,071,221	13,412,912	14,990,328	15,977,913	16,279,066	
Membership dues						
Program service revenue			4,174	4,590	2,980	
Capital gain or loss		1,500		-46	1,298	
Investment income	522	654	306	503	1,025	
Fundraising revenue (income/loss)		1,809	1,991			
Gaming revenue (income/loss)						
Other revenue			1,864	1,599	12,213	
Total revenue	15,071,743	13,416,875	14,998,663	15,984,559	16,296,582	
Grants and similar amounts paid					30,657	
Benefits paid to or for members						
Compensation of officers, etc.	166,593	164,255	183,989	192,995	210,721	
Other compensation	941,247	867,669	1,103,349	1,220,667	1,245,252	
Professional fees	13,397,779	11,790,858	12,701,004	13,758,154	14,097,833	
Occupancy costs	48,950	46,015	50,004	73,593	96,743	
Depreciation and depletion	44,257	47,863	38,444	45,170	47,789	
Other expenses	508,899	537,235	940,373	623,105	515,176	
Total expenses	15,107,725	13,453,895	15,017,163	15,913,684	16,244,171	
Excess or (Deficit)	-35,982	-37,020	-18,500	70,875	52,411	
Total exempt revenue	15,071,743	13,416,875	14,998,663	15,984,559	16,296,582	
Total unrelated revenue						
Total excludable revenue	522	3,963	8,335	6,646	17,516	
Total Assets	1,694,345	2,082,017	2,011,862	1,563,805	2,576,208	
Total Liabilities	1,344,699	1,768,811	1,717,156	1,198,439	2,157,504	
Net Fund Balances	349,646	313,206	294,706	365,366	418,704	

Federal Statements**Taxable Interest on Investments**

<u>Description</u>		<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST ON SAVINGS - UNRELAT		\$ 1,025		14			
TOTAL		<u>\$ 1,025</u>					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRACTED CHILDREN SVCS	\$ 14,077,305	\$ 14,077,305	\$	\$
TOTAL	\$ 14,077,305	\$ 14,077,305	\$ 0	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
OTHER EMPLOYEE EXPENSES	\$ 1,786	\$ 32	\$ 1,754	\$
TOTAL	\$ 1,786	\$ 32	\$ 1,754	\$ 0

Schedule A, Part II, Line 1(e)

Description	Amount
GOVERNMENT GRANTS AND CONTRIBUTIONS	\$ 350,932
OTHER GRANTS AND CONTRIBUTIONS	228,342
FLORIDA'S OFFICE OF EARLY LEARNING CASH CONTRIBUTION	15,699,792
TOTAL	\$ 16,279,066

Schedule A, Part II, Line 12 - Current year

Description	Amount
PROVIDER TRAINING	\$ 2,980
TOTAL	\$ 2,980

Section

4



In partnership with

United Way



Action Sheet

FULL BOARD

April 23, 2020

SUBJECT: Board of Directors Membership

ACTION ITEM

Approve Brenda Ford for a four-term term to the Board of Directors beginning May 1, 2020 through April 30, 2024, as a Private Sector Representative.

Approve Earlene Carte for a four-term term to the Board of Directors beginning July 1, 2020 through June 30, 2024, as the Faith Based Child Care Provider Representative.

BACKGROUND INFORMATION

Brenda Ford was appointed by the Governor for a four-year term ending April 30, 2020. Brenda has submitted her application to the Governor's Appointment Office for consideration of re-appointment to the Coalition Board effective May 1, 2020. According to the Coalition Bylaws, Article III, Section 3.1.

The gubernatorial appointees may remain as private sector business members, subject to Section 3.3, following the expiration of their gubernatorial appointment.

Brenda is interested in remaining on the Board of Directors as a Private Sector Representative for a four-year term, unless she receives appointment by the Governor.

In order to ensure continuity of service, it is appropriate for the Executive Committee to approve this appointment.

Earlene Carte was approved by the Board of Directors in 2016 to serve a four-term term as the Faith Based Child Care Provider Representative. Earlene is interested and eligible to serve another four-year term according to the Florida Statutes and the Coalition Bylaws, beginning on July 1, 2020.

The Executive Committee unanimously approved as stated above on March 12, 2020.

Supporting Documentation Available:

- Board of Directors Nomination Form

Section

5

Action Sheet

FULL BOARD

April 23, 2020

SUBJECT: 2019-2020 ELCMC Proposed Line Item Budget revision – 4B

PROPOSED ACTION

Approve 2019-2020 ELCMC Proposed Line Item Budget revision (4B).

BACKGROUND INFORMATION

Revisions in the budget are to reallocate line items based upon the following factors:

Revenue

- Contracts, Grants, and Other Financial Assistance:
 - Defer revenue to 2020-21 due to COVID-19
 - United Way (SB6) – Reduce by \$12,237.50
 - WellCare – Reduce \$2,554.70

Expenditures

- Prof. Svcs. – Auditing – Increase for additional services required related to School Readiness reconciliation and meetings- \$4,115
- Prof. Svcs. – Bldg Mtnc – Increase for additional building upgrades - \$14,000
- Janitorial Services – Increase for extra deep sanitation of office prior to staff returning to office - \$2,000
- Lawn Service – Reduce and defer tree trimming to next fiscal year – (\$3,300)
- Janitorial Supplies – increase due to COVID-19 related needs - \$750
- Office supplies – Increase to realign with projected need - \$2,500
- Communications – Overall reduction to align to new VOIP and cellular expenditure – (\$5,799)
- Tangible Personal Property – Reclass between line items and reduce equipment - (\$2,500)
- Travel – Reduce overall due to decrease in all travel due to COVID-19 – (\$12,212.90)
- Membership Dues – Reduce to realign with projected annual expenses – (1,305)
- Background & Drug Screening – Increase for new hires to fill open positions - \$300
- Other Program Expenses – Overall increase of \$10,316.77 to account for deferral of activities to 2020-21 fiscal year.
- All other adjustments are based upon current projections

Supporting Documentation Included:

- 2019-2020 ELCMC proposed line item budget revision

**Early Learning Coalition of Marion County, Inc.
2019 - 2020 Approved Budget**

		Revision 3B		Revision 4	
		27-Feb-20		23-Apr-20	
GL Acct.	Revenues				
Contracts, Grants, and Other Financial Assistance		11,301.31	\$ 18,012,140.40	(14,792.20)	\$ 17,997,348.20
4001	FOEL: School Readiness(inc. Program Assessment & PDG Svcs)		11,828,713.00		11,828,713.00
4001	FOEL: Voluntary Pre-kindergarten		5,686,010.00		5,686,010.00
4001	FOEL: Outreach & Awareness		10,570.00		10,570.00
4001	FOEL: Non-Contract Reimbursement (Prof. Dev.)	(1,900.00)	-		-
4001	CF: Help Me Grow		121,906.66		121,906.66
4010	Grant: School Board of Marion County (YPP)		10,000.00		10,000.00
4010	Grant: Marion County (Match)		125,000.00		125,000.00
4010	Grant: Marion County (CDBG-Outreach)		27,896.74		27,896.74
4020	Grant: Uncommitted (Match)		3,000.00		3,000.00
4020	Grant: United Way (Match)		100,000.00		100,000.00
4020	Grant: United Way (Success by 6)		48,950.00	(12,237.50)	36,712.50
4020	Grant: Kiwanis (SB6)	(167.35)	13,945.34		13,945.34
4020	Grant: Early Learning Florida		16,780.00		16,780.00
4020	Grant: WellCare	3,000.00	3,000.00	(2,554.70)	445.30
4020	Grant: Marshall's	2,500.00	2,500.00		2,500.00
4050	Gifts, Donations, and Pledges	7,868.66	13,868.66		13,868.66
Investment Earnings		0.00	\$ 2,056.00	-	\$ 2,056.00
4101	Interest income		1,496.00		1,496.00
4991	Realized Gain on Investments		1,510.00		1,510.00
4992	Unrealized Gain on Investments		(950.00)		(950.00)
Other Miscellaneous Revenue		5,455.00	\$ 89,105.00	-	\$ 89,105.00
4201	Miscellaneous income		250.00		250.00
4210	Revenue: Provider Trainings		7,700.00		7,700.00
4300	Revenue: Special Events		25,000.00		25,000.00
4900	Revenue: Development (Building Fund)		1,000.00		1,000.00
4901	Revenue: Vending (Building Fund)		1,000.00		1,000.00
4905	Revenue: Facility Rental (Building Fund)	5,455.00	14,155.00		14,155.00
4999	In-Kind		40,000.00		40,000.00
Total Revenue		16,756.31	\$ 18,103,301.40	(14,792.20)	\$ 18,088,509.20
Expenditures					
Employer Provided Salaries and Benefits		0.00	\$ 1,700,700.27	(2,654.79)	\$ 1,698,045.48
5000	Salary: Directors (990 reportable)		191,045.17		191,045.17
5001	Salary: Exempt		351,656.29		351,656.29
5002	Salary: Hourly		810,488.59	(2,654.79)	807,833.80
5003	Salary: PLT Accrual		5,000.00		5,000.00
5005	Payroll Tax: Social Security		84,486.78		84,486.78
5006	Payroll Tax: Medicare		19,759.01		19,759.01
5007	Payroll Tax: SUTA		328.49		328.49
5010	Insurance: Health		152,950.00		152,950.00
5011	Insurance: Dental		9,241.60		9,241.60
5020	Retirement: ER Contribution		60,295.50		60,295.50
5030	Insurance: Life		2,960.00		2,960.00
5031	Insurance: Short-term Disability		6,005.00		6,005.00
5032	Insurance: Long-term Disability		6,483.84		6,483.84
Staff Development		0.00	\$ 8,810.00	-	\$ 8,810.00
5100	Staff Development (OEL, Unrestricted)		8,810.00		8,810.00
Professional Services		1,110.00	\$ 202,980.00	18,115.00	\$ 221,095.00
6000	Professional Services: Consultant (CDBG Grant)		13,000.00	-	13,000.00
6002	Professional Services: Auditing		15,975.00	4,115.00	20,090.00
6005	Professional Services: IT Management		45,000.00	-	45,000.00
6010	Professional Services: Legal		5,800.00		5,800.00
6015	Professional Services: Program Agency		30,788.00		30,788.00
6025	Professional Services: Printing Svcs		1,900.00		1,900.00
6030	Professional Services: Bldg Rprs & Mtnc	1,110.00	9,000.00	14,000.00	23,000.00
6035	Professional Services: Other (Quality)		81,517.00		81,517.00
Direct Services - Child Care		0.00	\$ 15,543,321.81	-	\$ 15,543,321.81
6500	Direct Services		15,543,321.81		15,543,321.81
Occupancy		(532.12)	\$ 59,931.32	(1,325.00)	\$ 58,606.32
7000	Facility Rental (offsite events-Trainings)	(532.12)	467.88		467.88
7001	Utilities		25,778.00		25,778.00
7005	Janitorial Services		21,533.44	2,000.00	23,533.44
7007	Lawn Service		6,900.00	(3,300.00)	3,600.00
7008	Security System		4,452.00	15.00	4,467.00
7009	Pest Control		800.00	(40.00)	760.00
Postage, Freight, and Delivery		0.00	\$ 5,425.00	(348.64)	\$ 5,076.36
7050	Postage and Shipping		5,425.00	(348.64)	5,076.36
Equipment Leases		152.02	\$ 4,358.07	-	\$ 4,358.07
7100	Equipment Lease & Mtnc	152.02	4,358.07		4,358.07
Supplies		2,000.00	\$ 22,270.56	3,250.00	\$ 25,520.56
7006	Janitorial Supplies		2,290.56	750.00	3,040.56
7150	Office Supplies & Expense	2,000.00	12,000.00	2,500.00	14,500.00
7151	Copier Printing		7,980.00		7,980.00

**Early Learning Coalition of Marion County, Inc.
2019 - 2020 Approved Budget**

		Revision 3B		Revision 4	
		27-Feb-20		23-Apr-20	
Communications		0.00	\$ 22,397.84	(5,799.00)	\$ 16,598.84
7200	Communication: Land Line		18,629.84	(6,000.00)	12,629.84
7201	Communication: Cellular		2,400.00	252.00	2,652.00
7202	Communication: Internet		1,368.00	(51.00)	1,317.00
Insurance		(436.99)	\$ 26,461.84	-	\$ 26,461.84
7251	Insurance: D&O		8,568.00		8,568.00
7255	Insurance: Automobile (Rental)		1,403.00		1,403.00
7260	Insurance: General Liability		455.00		455.00
7265	Insurance: Workers Compensation		5,435.08		5,435.08
7270	Insurance: Property		7,293.28		7,293.28
7275	Insurance: Other	(436.99)	3,307.48		3,307.48
Tangible Personal Property		0.00	\$ 28,341.95	(2,500.00)	\$ 25,841.95
7301	Equipment: = or > \$1k		-	6,799.96	6,799.96
7302	Equipment: < \$1k		21,941.95	(9,299.96)	12,641.99
7303	Furniture: = or > \$1k		-		-
7304	Furniture: < \$1k		6,400.00		6,400.00
Quality Initiatives		0.00	\$ 289,397.00	-	\$ 289,397.00
7401	Quality and Classroom Material		171,057.00		171,057.00
7405	Training Material		19,440.00		19,440.00
7410	Consumer Education & Outreach Material		76,350.00		76,350.00
7420	Scholarship & Other Education Opportunities		22,050.00		22,050.00
7425	Wage Incentives		500.00		500.00
Other OEL Initiatives		0.00	\$ 12,125.00	-	\$ 12,125.00
7436	Early Learning Florida Project		12,125.00		12,125.00
Travel		0.00	\$ 27,326.69	(12,212.90)	\$ 15,113.79
7501	Travel: In-State		18,157.85	(8,110.00)	10,047.85
7505	Travel: Out of State		-		-
7510	Travel: In Service Area		9,168.84	(4,102.90)	5,065.94
Other Expenses		4,913.84	\$ 78,875.90	(1,000.10)	\$ 77,875.80
7600	Administration Fees (Community Foundation- Building)		575.00		575.00
7601	Bank fees		-		-
7602	Merchant Service Fees (Includes PayPal)		359.20		359.20
7603	Interest expense (HVAC Loan)	(1,597.20)	2,664.96		2,664.96
7605	Software-Licenses-Support	6,511.04	21,811.74		21,811.74
7610	Web services		1,700.00		1,700.00
7615	Other employee related expense	0.00	594.00		594.00
7616	EE Background Screening		560.00	140.00	700.00
7617	EE Drug Screening		160.00	160.00	320.00
7620	Membership Dues		9,006.00	(1,305.50)	7,700.50
7621	Subscriptions and Publications		150.00	5.40	155.40
7625	Taxes, licenses and fees		295.00		295.00
7901	Vending Machine Supplies		1,000.00		1,000.00
9999	In-Kind expenditure		40,000.00		40,000.00
Other Program Expenses		2,080.73	\$ 48,765.24	(10,316.77)	\$ 38,448.47
8500	SB6 Childcare	360.00	3,060.00	(1,380.00)	1,680.00
8510	Infant Safe Sleep	(412.69)	5,500.00		5,500.00
8520	Car Seats		1,000.00	(1,000.00)	-
8530	Special Projects (Born Learning Trail, RIF)	3,113.42	23,085.24	(5,462.82)	17,622.42
8540	Parent Education Training Material	800.05	3,500.05	(4.70)	3,495.35
8550	Food Services (Unallowable for match)	(2,430.05)	6,145.00	(2,019.25)	4,125.75
8551	Parent Incentive (Unallowable for match)	650.00	2,199.95	(450.00)	1,749.95
8559	Bus Passes/Gas Cards (CDBG Grant)		4,275.00		4,275.00
Depreciation		0.00	\$ 46,855.08	-	\$ 46,855.08
9001	Depreciation ¹		46,855.08		46,855.08
Total Expenditures		9,287.48	18,128,343.57	(14,792.20)	18,113,551.37
Total Revenue		16,756.31	18,103,301.40	(14,792.20)	18,088,509.20
Total Expenditures		9,287.48	18,128,343.57	(14,792.20)	18,113,551.37
Net Proceeds		7,468.83	(25,042.17)	-	(25,042.17)

**Early Learning Coalition of Marion County, Inc.
2019 - 2020 Approved Budget**

		Revision 3B		Revision 4	
		27-Feb-20		23-Apr-20	
	NOTES:				
	¹ Building depreciation - \$32,511 - unallowable under Federal funding				
Rev 1	NOA - 7/17/19 - Allocation of SR Match fund in the amount of \$160				
	NOA - 7/1/19 - Allocation of Preschool Development Grant (PDG)				
	Private donor - Restricted donation for RIF (\$5,000)				
	Feed the Need donation - Restricted for Pack-n-Plays (\$1,000)				
Rev 2	NOA - 9/13/19 - Allocation of QPI funds in the amount of \$503,170				
	NOA - 9/30/19 - Allocation of PDG stipends in the amount of \$6,550				
	NOA - 9/30/19 - Allocation of Pgm Assessment funds in the amount of \$12,000				
	ELF - SR974-Y01 increase to \$10,000 plus contract for SR974-Y02 for \$12,000				
	Expenditures:				
	Kiwanis - add'l funding for pack-n-plays. Car seats on hold for time being.				
Rev 3	New grants - CareWell (\$3,000) and Marshall's (\$10,000, rec. \$2,500 now, defer \$7,500 to FY21)				
	Additional gift - L. Werner - RIF				
	New tenant - Marion County Homeless Council (\$800/mth)				
	Expenditures: Correspond with revenue increases and some brought into alignment with actual spending.				
Rev 4	WellCare - Defer unspent funds to 2020-21				
	UWMC (SB6) - Defer unspent funds to 2020-21				
	Expenditures:				
	Audit - increase due to add'l testing and meetings related to 2018-19 reconciliation.				
	Other line items are adjusted due to schedule changes related to COVID-19				

Information Items

Community Partner Updates

CEP - We've been updating information daily at <https://ocalacep.com/covid-19-updates/> In particular, we've hosted many webinars on funding programs and other topics relevant to doing business during Covid-19 under both the "Upcoming Webinars" and "Past Webinars" tabs on this page. We encourage businesses to check-out these past recordings. Relevant to the ELC, we did one co-webinar with MCPS on how parents can both work from home and also educate their children: <https://vimeo.com/405147238>

Our big push on the CARES Act and Paycheck Protection Program has been at www.GetGatherGo.com where we encourage businesses to 1) get informed about the process, 2) gather necessary documentation (which we were pleased to see was fairly streamlined), and 3) go-out to apply at our local banks. Getting the word-out, we continue to have a dozen+ billboards, ads on at least 6 radio stations, print coverage and 43,000 people reached via Facebook posts about PPP. Our recent webinar on the Tax Implications of the CARES Act has had nearly 1,000 views.

We had initially begun a local loan fund for businesses in Marion County, but just as it was launching, CARES/PPP became available with much more favorable loan terms than we could provide. Our local loans were not forgivable and came with a higher interest rate, vs. the PPP with a portion which is forgivable and at only a 1% interest rate. We were also impressed at the speed at which CARES/PPP became available. We have kept the local loan program on-hold, should we need to return to it. In the meantime, we are getting information out about these other programs.

County Commissioner – Our Commission is sensitive to the hardships of how this time is impacting our community. The news of ELC providing for childcare for essential workers for medical workers and first responders was well received. Thank you again, Roseann.

We've done our best to allow for most County services while adhering to the CDC guidelines. The two most impacted areas are boat ramps and the libraries. As of this writing, both of these areas are being evaluated and I'll give a quick verbal update as to their level of service on our call.

The BoCC has allocated \$250,000 for small business assistance, those with less than 25 employees, to borrow up to \$25,000. This is being administered through the CEP's Foundation. Please contact the CEP if you or anyone you know would like more information on this program. Highlights include it is a 36-month loan at a low interest rate.

In efforts to be transparent, we are using social media to post daily COVID-19 updates on our Marion County, Florida Facebook page along with a video message twice a week.

Our County Commission meetings continue to be held in the Auditorium Chambers. Public Comment is structured to allow for both in-person attendance or by calling into the meeting.

We mourn the loss of all lives lost during this time and we pray for their families and friends. We also recognize that it's important for people to return to their livelihoods soon. We stand ready to help ease any regulatory burdens that prevent people from returning to their normal lives, once it's deemed safe to do so.

In closing, this pandemic shows again just how critical it is to get funding for critical needs in our County. That's why insuring everyone gets counted during the 2020 Census is so important. Please help us get the word out that it's safe to report all of the information being requested online at 2020Census.gov

Child Care Providers – The Providers want to thank ELC for all the love and support that they receive from the staff. The updates of COVID-19 from Elizabeth was informative and helpful. They feel blessed to partner with ELCMC. **A BIG shout out to Roseann and her team!**

Episcopal Children's Services – Although our centers remain closed through April 30th, we are continuing to provide as much support to our families as possible:

- We have received some grant funding to purchase diapers and wipes for our parents.
 - As these supplies are received, our Facilities staff will be transporting them to each center location for distribution.
 - We are currently working to put together a staff volunteer list for each center in order to distribute the supplies.
 - Supplies will be issued by voluntary staff wearing protective gloves and face masks.
 - Family Advocates will notify parents of dates, location and times for pickup.
 - Parents will drive through an organized line to receive their supplies.
- We are sending weekly lesson plans to our families, so they are able to continue to support their child's age-appropriate learning and development.
- We have purchased a Zoom platform so teachers can begin to communicate with their children interactively.
- Our Disabilities, Mental Health, Health and Family Advocate departments are reaching out to families on a regular basis.

We are also providing as much support to our staff and colleagues as possible.

- All staff are working from home and continue to be paid for their regular hours, regardless of hours worked.

Tender Care – Is open and we continue to take extra precautions to protect patients, staff, and families in our communities. Such as fogging facilities, vans, and spraying frequently touched surfaces periodically throughout the day with our hospital grade disinfectant.

If you know of any families in need, we are still enrolling new patients and would be glad to help anyone that could benefit from our services.

Tender Care Medical Services A loving day care for children with special medical needs. We Care!

Ignite – The Fourth Annual Ignite Premier Luncheon was a great success and divine timing on March 12th! We are grateful our event was held before the tighter restrictions on social distancing. Through the support of our sponsors and the generosity of those who attended, we raised a total of \$45,000 for the Kimberly's Center.

OaSN - Outreach autism Services Network (OaSN) is open virtually and ready to assist individuals on the spectrum for autism and related neuro immune disorders, their families and caregivers! Our office number is (352) 462-0168. Press 1 or zero to be connected to our admin staff. Client service hours are 9am-2pm M-F.

Services currently being offered are as follows:

- Weekly Virtual Support Meetings through Zoom. Contact our office to get the schedule for each week and our Zoom link. If you subscribe to our weekly newsletter (see below). our weekly Virtual Support Meeting schedule and Zoom link will be emailed to you.
- Weekly newsletter that provides information about our virtual services offered each week. Click on this link to be added to our mailing list <https://outreachautismservicesnetwork.com/join-our-mailing-list/>
- A private group for autism families called the *OaSN Best Outcomes Forum*. You must have an intake form on file to join our forum. Please click on this link for our intake form for both children and adults with autism and related neuro immune disorders: <https://outreachautismservicesnetwork.com/intake-form/>

Lastly, we have compiled a resource list of community resources available now and also which doctors/therapists are offering telehealth. Our community resource list can be found on our website at this link: <https://outreachautismservicesnetwork.com/current-community-resources/>

Faith Based Centers – Some are having difficulty getting paper products and cleaning supplies. Earlene Carte was able to help through her a delivery service (Levy Jones). “It has been great coming together during this time and I pray it continues beyond COVID-19.”

Todd Panzer – Women's Pregnancy Center Gala is April 21st at 7pm, virtual.

- Ocala Family Medical Center is open for visits and telemedicine.
- COVID-19 Testing Sites are:
 - Advent Health – 1-877-VIRUSHQ
 - Heart of Florida – 1-352-732-6599
 - Florida Department of Health – 1-352-629-0137
 - Express Care of Belleview – 1-352-347-5225
 - Trinity Clinic – 1-352-512-0000
 - Premier Medical – The Villages – <https://coronavirus.ufhealth.org/testing>

College of Central Florida – The CF Learning Lab is closed at this time. The team has enrolled CF's youngest e-learners in a Canvas course so that their academic learning and social-emotional development can continue during this time.

CF has moved most academic programs to online learning format on a temporary basis through at least end of June (roughly 40% of our enrollment already was in a distance-learning format). A few programs in health sciences or law enforcement are delayed or stalled due to the outbreak. Staff undertook a call campaign to reach out to every student to check on them and make them aware of any needed resources for academics or personally. The CF Patriot Fund (for students) and Employee Emergency Assistance Fund have been used to support members of the CF community in their time of need. CF is loaning out a limited number of laptops and making “Wifi Parking Spots” available.

CF is implementing additional digital, print and radio advertising to reach displaced workers in addition to high school students who might be unsure of their plans for fall. We will increase and add virtual information/application sessions and live chat for the website. The College offers multiple fully online programs, many of which are able to be completed in under one year. The list is at <https://www.cf.edu/explore/degrees/online/online-certificates> These online certificates include Early Childhood Education – Child Care Center Management.

While the Early Childhood Education Conference was rescheduled from March 28 to June 6, we are in the process of determining the future date and delivery method of the conference if the new date becomes unviable.

DCF – Richard Forrester provided an Excel spreadsheet (attached).

Element

Food Stamp Issuance

Month

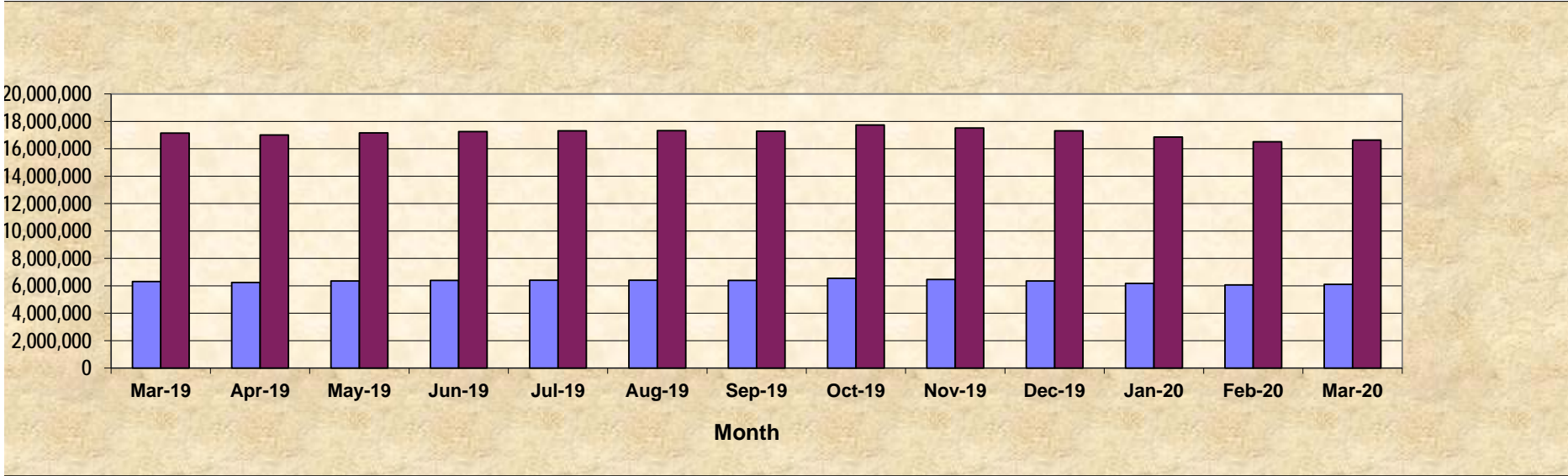
Mar-20

Row #1

Marion

Row #2

Circuit 5



Row	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Change	
														Year	Month
Marion	\$6,320,583	\$6,251,970	\$6,349,746	\$6,394,733	\$6,414,844	\$6,412,096	\$6,389,712	\$6,550,123	\$6,470,138	\$6,349,123	\$6,175,340	\$6,059,741	\$6,114,517	-3.3%	0.9%
Circuit 5	\$17,139,738	\$17,007,659	\$17,160,405	\$17,259,355	\$17,309,847	\$17,324,010	\$17,276,952	\$17,738,934	\$17,512,063	\$17,304,645	\$16,854,088	\$16,515,661	\$16,632,244	-3.0%	0.7%

COMMENTS FROM THE CUSTOMER SATISFACTION SURVEYS FOR FEBRUARY 2020

The **February 2020** winner for the prize was **Terri**. There were **12** online surveys completed. There were **10** parents that marked that they received a Parent and Child Activities Newsletter.

What do you like about the program in which you participate?

- Helpful information, activities, etc.
- VPK and daycare
- It is appreciated for the benefits it offers to foster parents
- Very nice and friendly but also quick and efficient
- That there is help for disabled, single mothers!
- Great service, appreciate how they treat everyone one with dignity and respect.
- Helpful, great service
- That I have help with child care and gives me the opportunity to go to work to provide for my kids.
- I don't recall her introducing herself. Could be I rushed her/the appt. I was in rush because of my ride and didn't want to be left there 36wks pregnant walking home. But I was very chatty with her and she was friendly towards me. Simple. It helps both parents mother & fathers financially. It costs a lot to keep children in school while they're trying to make ends meet by working or attending school.

What Changes would you recommend?

- Can't think of anything at this point in time
- For ELC to inspect the daycares. As far as finances go, direct where to go to get help when raises issues and/or concerns about a daycare.
- The signing up process and how long it takes for someone without a referral to get child care. I don't think there is any I could think of based on my experiences. My appointments are easy-going for me. And they answer my questions.

COMMENTS FROM THE CUSTOMER SATISFACTION SURVEYS FOR MARCH 2020

The **March 2020** winner for the prize was **Erica**. There were **10** online surveys completed. There were **8** parents that marked that they received a Parent and Child Activities Newsletter.

What do you like about the program in which you participate?

- It truly helps families in need !! All the staff is very friendly and helps any way they can.
- Without your help I would never make it being a single mom of four boys under 6! You are a lifesaver ❤️
- Makes child care affordable
- So helpful with information
- The resources that are available and the free books.
- Helping parents and children
- We wouldn't be able to afford daycare for our granddaughters if not for this program! we love ELC!!

What Changes would you recommend?

- Doing the process electronically instead of scanning in documents
- Several none

Notice of Meetings

Fiscal Year 2020 – 2021

The Early Learning Coalition of Marion County
Will meet as shown below:

Success By 6 (SB6) Leadership Council 9:00 a.m., Friday	Executive Committee 8:30 a.m., Thursday	Board 8:30 a.m., Thursday	Finance Committee 8:30 a.m., Thursday	Help Me Grow Leadership Team, 11:00 a.m., Thursday
	7-9-20		7-30-20	7-16-20
	8-13-20	8-27-20		
9-18-20	9-10-20		9-24-20	
	10-08-20	10-22-20		10-15-20
	11-12-20			
12-18-20	12-10-20		12-03-20	
	1-14-21		1-28-21	1-21-21
	2-11-21	2-25-21		
3-19-21	3-11-21		3-25-21	
	4-08-21	4-22-21		4-15-21
	5-13-21		5-27-21	
6-18-21	6-10-21	6-24-21		

- **ALL meetings** will be held at Early Learning Coalition of Marion County, 2300 SW 17th Road, Ocala, FL 34471 or via teleconference.

PURPOSE: Coalition Business

In accordance with the Americans with Disabilities Act, persons needing a special accommodation to participate in these meetings should contact Beatriz Montalvo at (352) 369-2315 or 1-800-955-8770 (Voice) Florida Relay Service at least 48 hours proper to the meeting.

Public comment will be solicited prior to the Board taking action on its consent agenda and any other matter which requires board approval.

If a person decides to appeal any decision made by any of the Committees or Board noticed above with respect to any matter considered at such meeting or hearing, he or she will need a record of the proceedings, and that, for such purpose, he or she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Notice has been made of these meetings to cover the Government in the Sunshine Law through publication and distributions of same.