

"Hurricanes Bonnie/Charley/Frances"
Return of Organization Exempt From Income Tax

OMB No 1545-0047

2003

Open to Public Inspection

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2003 calendar year, or tax year beginning **MAY 1, 2003** and ending **APR 30, 2004**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.	D Employer identification number 59-3182886
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 2071	E Telephone number (407) 872-3050
		City or town, state or country, and ZIP + 4 ORLANDO, FL 32802-2071	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

G Website: ▶ **WWW.CFCFLORIDA.ORG**

J Organization type (check only one) ▶ 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. **Some states require a complete return.**

H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No

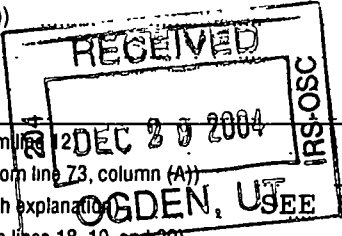
I Group Exemption Number ▶

M Check if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **3,671,594.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances

Revenue	1 Contributions, gifts, grants, and similar amounts received:				
	a Direct public support	1a	2,031,364.		
	b Indirect public support	1b			
	c Government contributions (grants)	1c			
	d Total (add lines 1a through 1c) (cash \$ 2,031,364. noncash \$)			1d	2,031,364.
	2 Program service revenue including government fees and contracts (from Part VII line 93)			2	279,577.
	3 Membership dues and assessments			3	
	4 Interest on savings and temporary cash investments			4	
	5 Dividends and interest from securities			5	364,378.
	6 a Gross rents	6a			
	b Less: rental expenses	6b			
	c Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7 Other investment income (describe ▶)			7		
8 a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
	908,655.	8a			
	b Less: cost or other basis and sales expenses	8b			
	908,655.	8c			
d Net gain or (loss) (combine line 8c, columns (A) and (B)) STMT 1			8d	908,655.	
9 Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	a Gross revenue (not including \$ <85,275.> of contributions reported on line 1a)	9a	85,275.		
	b Less: direct expenses other than fundraising expenses	9b			
	c Net income or (loss) from special events (subtract line 9b from line 9a)			9c	85,275.
10 a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
	c Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11 Other revenue (from Part VII, line 103)			11	2,345.	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	3,671,594.	
Expenses	13 Program services (from line 44, column (B))			13	1,227,947.
	14 Management and general (from line 44, column (C))			14	568,152.
	15 Fundraising (from line 44, column (D))			15	82,078.
	16 Payments to affiliates (attach schedule)			16	
	17 Total expenses (add lines 16 and 44, column (A))			17	1,878,177.
Net Assets	18 Excess or (deficit) for the year (subtract line 17 from line 12)			18	1,793,417.
	19 Net assets or fund balances at beginning of year (from line 73, column (A))			19	18,942,761.
	20 Other changes in net assets or fund balances (attach explanation)			20	1,905,913.
	21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	22,642,091.



SCANNED JAN 06 2005 Revenue

323001 12-17-03

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. Page 2

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ 974,479 . noncash \$	974,479.	974,479.	STATEMENT 5	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	85,000.	0.	85,000.	0.
26	Other salaries and wages	140,556.		140,556.	
27	Pension plan contributions	3,000.		3,000.	
28	Other employee benefits	41,734.		41,734.	
29	Payroll taxes	17,654.		17,654.	
30	Professional fundraising fees				
31	Accounting fees	21,438.		21,438.	
32	Legal fees	2,256.		2,256.	
33	Supplies	8,880.		3,189.	5,691.
34	Telephone	7,036.		7,036.	
35	Postage and shipping	9,492.		1,497.	7,995.
36	Occupancy	65,864.		65,864.	
37	Equipment rental and maintenance	15,454.		15,454.	
38	Printing and publications	15,293.		3,693.	11,600.
39	Travel				
40	Conferences, conventions, and meetings	59,384.		2,592.	56,792.
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	10,131.		10,131.	
43	Other expenses not covered above (itemize):				
a					
b					
c					
d					
e	SEE STATEMENT 3	400,526.	253,468.	147,058.	
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	1,878,177.	1,227,947.	568,152.	82,078.

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 4		Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts; but optional for others)	
a	CONTRIBUTIONS TO LOCAL AGENCIES FOR VARIOUS CHARITABLE PURPOSES IN AND AROUND CENTRAL FLORIDA	(Grants and allocations \$ 974,479.)	974,479.
b	ADMINISTRATIVE FEES RELATED TO MANAGEMENT FEE REVENUE DERIVED FROM HOLDING AND INVESTING FUNDS FOR COMMUNITY PROJECTS	(Grants and allocations \$)	253,468.
c		(Grants and allocations \$)	
d		(Grants and allocations \$)	
e	Other program services (attach schedule)	(Grants and allocations \$)	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)		1,227,947.

Part IV Balance Sheets

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	435,602.	45	92,135.
	46 Savings and temporary cash investments	4,761,692.	46	3,597,507.
	47 a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48 a Pledges receivable	48a	22,148.	
	b Less: allowance for doubtful accounts	48b	31,705.	48c
	49 Grants receivable			49
	50 Receivables from officers, directors, trustees, and key employees			50
	51 a Other notes and loans receivable	51a		
	b Less: allowance for doubtful accounts	51b		51c
	52 Inventories for sale or use			52
	53 Prepaid expenses and deferred charges		5,349.	53
	54 Investments - securities			54
	55 a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation	55b		55c
56 Investments - other	SEE STATEMENT 6	19,634,182.	56	24,572,194.
57 a Land, buildings, and equipment: basis	57a	74,465.		
b Less: accumulated depreciation	57b	40,140.	57c	34,325.
58 Other assets (describe SEE STATEMENT 7)		1,038,568.	58	1,238,404.
59 Total assets (add lines 45 through 58) (must equal line 74)		25,918,288.	59	29,567,644.
Liabilities	60 Accounts payable and accrued expenses		60	2,907.
	61 Grants payable		61	320,710.
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe SEE STATEMENT 8)		6,873,278.	65
66 Total liabilities (add lines 60 through 65)		6,975,527.	66	6,925,553.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted		67	21,250,533.
	68 Temporarily restricted		68	1,391,558.
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21)		18,942,761.	73	22,642,091.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		25,918,288.	74	29,567,644.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

COMMUNITY FOUNDATION OF CENTRAL FLORIDA,
INC.

Form 990 (2003)

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Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return

a	Total revenue, gains, and other support per audited financial statements	a	5,668,367.
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments \$		
(2)	Donated services and use of facilities \$		
(3)	Recoveries of prior year grants \$		
(4)	Other (specify): STMT 9 \$ 1,996,773.		
	Add amounts on lines (1) through (4)	b	1,996,773.
c	Line a minus line b	c	3,671,594.
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify): \$		
	Add amounts on lines (1) and (2)	d	0.
e	Total revenue per line 12, Form 990 (line c plus line d)	e	3,671,594.

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements	a	1,877,235.
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities \$		
(2)	Prior year adjustments reported on line 20, Form 990 \$		
(3)	Losses reported on line 20, Form 990 \$		
(4)	Other (specify): \$		
	Add amounts on lines (1) through (4)	b	0.
c	Line a minus line b	c	1,877,235.
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 \$		
(2)	Other (specify): STMT 10 \$ 942.		
	Add amounts on lines (1) and (2)	d	942.
e	Total expenses per line 17, Form 990 (line c plus line d)	e	1,878,177.

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
MARK BREWER 1411 EDGEWATER DRIVE, SUITE 203 ORLANDO, FL 32804	PRESIDENT/CEO 50	85,000.	2,550.	1,020.
JULIE WOLF SUNTRUST BANK, 200 S. ORANGE AVE. ORLANDO, FL 32801	CHAIRMAN 0.	0.	0.	0.
J. GORDON ARKIN 111 NORTH ORANGE AVENUE, SUITE 1800 ORLANDO, FL 32801	VICE CHAIRMAN 0.	0.	0.	0.
SUZIE ALLEN 4312 DOWN POINT LANE WINDERMERE, FL 34786	SECRETARY 0.	0.	0.	0.
TICO PEREZ BAKER & HOSTETLER, 200 S. ORANGE AVE. ORLANDO, FL 32801	TREASURER 0.	0.	0.	0.

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule. Yes No

**COMMUNITY FOUNDATION OF CENTRAL FLORIDA,
INC.**

Form 990 (2003)

59-3182886

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Part VI Other Information		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions 81a 0.		
b	Did the organization file Form 1120-POL for this year?	81b	X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? N/A	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b	
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> 0.; section 4912 <input type="checkbox"/> 0.; section 4955 <input type="checkbox"/> 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization 0.		
90 a	List the states with which a copy of this return is filed <input type="checkbox"/> NONE		
b	Number of employees employed in the pay period that includes March 12, 2003 90b 5		
91	The books are in care of <input type="checkbox"/> MARK BREWER, PRESIDENT/CEO Telephone no. <input type="checkbox"/> (407)-872-3050		
	Located at <input type="checkbox"/> 1411 EDGEWATER DR., STE 203, ORLANDO, FL ZIP + 4 <input type="checkbox"/> 32804		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year 92 0.		

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a MANAGEMENT FEES					279,577.
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	364,378.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	908,655.	
101 Net income or (loss) from special events			01	85,275.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a OTHER INCOME			01	261.	
b RETURNED GRANTS			01	2,084.	
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		1,360,653.	279,577.
105 Total (add line 104, columns (B), (D), and (E))					1,640,230.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
93	THE FOUNDATION HOLDS AND INVESTS FUNDS FOR COMMUNITY PROJECTS

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

completing schedules and statements, and to the best of my knowledge and belief, it is true, information of which preparer has any knowledge.

Date: 2/21/04

Preparer's name and title: MARK BREWER PRESIDENT/CEO

Date: _____ Check if self: _____ Preparer's SSN or PTIN: _____

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information--(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2003

Name of the organization **COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.** Employer identification number **59 3182886**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

COMMUNITY FOUNDATION OF CENTRAL FLORIDA,

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V, FORM 990	2d	X
e Transfer of any part of its income or assets?	2e	X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) SEE STATEMENT 11	3a	X
b Do you have a section 403(b) annuity plan for your employees?	3b	X
4 Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4	X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state **▶** _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 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 charitable, etc., 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4) (See page 6 of the instructions.)

COMMUNITY FOUNDATION OF CENTRAL FLORIDA,

Schedule A (Form 990 or 990-EZ) 2003 INC.

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Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.
 Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28)	2,028,259.	3,886,678.	1,032,801.	7,326,166.	14,273,904.
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	179,446.	177,014.			356,460.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	471,373.	538,473.	329,025.	993,721.	2,332,592.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets	1,827.	<2,769.>	SEE STATEMENT 12 37,962.		37,020.
23 Total of lines 15 through 22	2,680,905.	4,599,396.	1,399,788.	8,319,887.	16,999,976.
24 Line 23 minus line 17	2,501,459.	4,422,382.	1,399,788.	8,319,887.	16,643,516.
25 Enter 1% of line 23	26,809.	45,994.	13,998.	83,199.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a 332,870.
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 1,482,026.
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 16,643,516.
d Add: Amounts from column (e) for lines: 18 2,332,592. 19 _____ 22 37,020. 26b 1,482,026.					26d 3,851,638.
e Public support (line 26c minus line 26d total)					26e 12,791,878.
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 76.8580%
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: N/A (2002) _____ (2001) _____ (2000) _____ (1999) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: N/A (2002) _____ (2001) _____ (2000) _____ (1999) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)			27f N/A		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15

NONE

Part V Private School Questionnaire (See page 7 of the instructions)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement)	31	
<hr/>			
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32d	
<hr/>			
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)	33h	
<hr/>			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

COMMUNITY FOUNDATION OF CENTRAL FLORIDA,

Schedule A (Form 990 or 990-EZ) 2003 INC.

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Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table -		
	If the amount on line 40 is -		
	The lobbying nontaxable amount is -		
	Not over \$500,000 20% of the amount on line 40	} 41	
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000 \$1,000,000		
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.

EIN: 59-3182886

<i>Year ended April 30,</i>	2004	2003
Grant expense:		
A Gift for Teaching, Inc.	\$ 1,000	\$ -
Albin Polasek Museum and Sculpture Gardens	500	-
All Saints Episcopal Church	1,173	1,298
All Souls Catholic Church	190	269
American Cancer Society	9,431	10,441
American Musical & Dramatic Academy (D. Hudson)	-	3,000
American Red Cross	9,757	55
Association of Fundraising Professionals	2,858	2,500
Atlanta Community Ministries, Inc.	300	-
Atlantic Center for the Arts	1,000	-
Avant-Garde Mission, Inc.	1,800	-
B.E.T.A. Center	11,000	-
Bach Festival Society of Winter Park	5,413	404
Baptist Bible College (R. Willis)	1,500	-
Baptist College of Florida (G. Granger)	3,000	1,500
Bethune Cookman College (J. Daughtry)	-	3,000
Big Brothers Big Sisters of Central Florida	5,449	-
Bishop Grady Villas	10,000	-
Bishop Moore Catholic High School	250	-
Boundless Playground	2,000	-
Boys & Girls Clubs of Central Florida	10,000	870
Brede Wilkins Scholarship Foundation	407	294
Buoniconti Fund	500	-
Campus Crusade for Christ	10,000	-
Candlelighters Childhood Cancer Foundation of Greater Orlando	300	-
Center for Urban Leadership & Community Development	500	-
Central Florida Ballet, Inc.	500	-
Central Florida Hillel	500	-
Central Florida Performing Arts Alliance	963	511
Central Florida Women's Emergency Fund	187	183
Central Florida Zoological Society	2,334	6,469
Champion Community Schools	-	641
Children's Home Society of Florida	-	1,437
Christian HELP Foundation	-	15,000
Christian Service Center for Central Florida	-	1,983
City of Orlando Arts & Cultural Affairs	-	1,000
City of Winter Park	1,407	-
City of Winter Park Tree Fund	975	883
Coalition for the Homeless of Central Florida	70	6,265
Community Foundation of Central Florida	35,000	33,000
Community Health Centers, Inc.	7,865	7,000
Community Services Network	18,000	-
Crealde School of Art	-	1,100
Cystic Fibrosis Foundation	10,000	-

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.
 EIN: 59-3182886

<i>Year ended April 30,</i>	2004	2003
Daytona Beach Community College (A. Butts)	3,000	-
Diocese of Orlando	301	948
Easter Seals of Florida, Inc.	3,500	-
Edgewater High School Foundation	-	2,000
Esteem, Inc.	-	26,910
Enzian Theatres	5,000	-
Every Kid Outreach	500	-
First Baptist Church of Winter Haven	1,500	1,500
First Church of Christ Scientist	13,200	15,109
First Congregational Church of Lyme	505	559
First Congregational Church of Winter Park	3,200	2,400
First United Methodist Church of Orlando	5,160	5,060
First United Methodist Church of Oviedo	536	594
Florida A&M University (R. Parker)	1,500	1,500
Florida A&M University (D. Bryant)	-	1,000
Florida A&M University (A. Butts)	-	3,000
Florida A&M University (T. Blake)	-	1,000
Florida A&M University (M. Foggy)	1,000	-
Florida A&M University	-	132
FAMU Foundation	1,000	-
Florida Baptist Family Ministry	600	600
Florida Easter Seals Society	501	555
Florida Hospital Cancer Institute	100	-
Florida Hospital Foundation	653	4,279
Florida Senior Programs, Inc.	1,000	270
Florida Southern College (D. Maxwell)	1,500	1,500
Florida Southern College (A. Waller)	-	1,500
Florida Southern College (T. Dollison)	-	3,000
Florida Southern College (E. Miller)	1,500	1,500
Florida Southern College (A. Wilcox)	1,500	-
Florida State University (K. Shepard)	1,500	1,500
Florida State University (M. Griffin)	1,000	1,000
Florida State University (R. Sullivan)	-	1,000
Florida State University (V. Patel)	1,500	1,500
Florida State University (L. Martin)	1,000	-
Foundation for Osceola Education	-	20,000
Friends of Fleet Peoples Park, Inc.	500	-
Friends of Mead Garden	5,000	-
Frontline Outreach	2,500	-
Good Samaritan Health Center	-	1,100
Good Shepherd Corporation of Orlando	-	8,000
Goodwill Industries of Central Florida	-	21,000
GROWS Literacy Council, Inc.	10,500	-
Guardian Care Nursing & Rehabilitation Center	-	132
Gulf Coast Community College (G. Milner)	2,000	2,000

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.
 EIN: 59-3182886

<i>Year ended April 30,</i>	2004	2003
Hands On Orlando, Inc.	–	5,000
Harbor House	27,000	10,300
Harbor School	82	54
Healing the Children Florida	–	2,500
Heart of Florida United Way	63,608	41,773
Heritage Family Preservation Center	500	–
Hillsborough County United Soccer Club	500	–
Hindu University of America	–	16,155
Hi-Tech Tutoring Center, Inc.	520	–
Hopewell Methodist Church	1,010	1,118
Hospice of the Comforter	–	5,000
House of Healing, Inc.	400	–
Howard Phillips Center for Children and Families	1,799	–
Humane Society of Vero Beach & Indian River County	–	7,353
Inner Directions Foundation	–	9,995
InterFaith Hospitality	500	–
Jewish Family Services	–	5,000
Jewish National Fund	2,500	–
Jones High School Choral Music Program	–	1,500
Joy Metropolitan Community Church	500	–
Junior Achievement of Central Florida, Inc.	2,000	–
Kids House of Seminole County	–	5,000
Krishnamurti Foundation of America	5,000	–
La Amistad Foundation, Inc.	1,100	–
Lake Nona YMCA	500	500
Lakeside Alternatives Foundation, Inc.	400	–
Latino Elderly, Inc.	500	–
League of Women Voters of Florida Education Fund	–	750
Learning Disabilities Association of Central Florida	390	–
Leukemia and Lymphoma Society of Central Florida	1,846	–
Lifeline of Central Florida, Inc.	3,659	–
Living Hope International Ministry, Inc.	500	–
Mad Cow Theatre, Inc.	500	–
Make-A-Wish Foundation of America	200	–
Mary DePugh Nursing Home	9,514	3,669
Meals on Wheels, Etc. Inc.	1,000	–
Mental Health Association of Central Florida	393	20,375
Meridian Club	–	20,580
Metro Atlanta Recovery Residences	2,000	1,212
Miami University	1,220	881
MicheLee Puppets	500	–
National Association for Children of Alcoholics	–	500
National Association of Teachers of Singing	–	1,070
National Audubon Society	2,824	3,126
New Hope Center, Inc.	251,082	202,581

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.
 EIN: 59-3182886

<i>Year ended April 30,</i>	2004	2003
New Warner Chapel Outreach Ministries	500	-
Oakland Nature Preserve, Inc.	2,800	-
Oral Roberts University (D. Voss)	1,500	1,500
Orange County Arts and Cultural Affairs	1,500	-
Orange County Bar Educational Foundation	-	1,000
Orange County Public Schools Foundation	-	12,640
Orlando Ballet	-	1,769
Orlando Neighborhood Improvement Corporation	-	1,000
Orlando Opera Company	2,015	5,766
Orlando Philharmonic Orchestra	468	12,236
Orlando Science Center	36,101	6,183
Orlando Technical Education Center (A. Nunez)	-	1,000
Orlando Technical Education Center (J. Pierre-Louis)	770	-
Orlando Technical Education Center	-	20,000
Orlando Union Rescue Mission	-	1,000
Oviedo Cemetery	268	297
Oviedo Women's Club	268	297
PACE-Brantley Hall School	82	54
Pathways to Care	25,000	-
Philanthropy & Nonprofit Leadership Center	-	12,572
Planned Giving Council of Central Florida	1,000	-
Polk Community College (L. Rowe)	1,500	1,500
Polk Community College (M. Bandy)	1,500	1,500
Polk Community College (M. Woodward)	-	1,500
Polk Community College (A. Harris)	-	1,500
Polk Community College (K. King)	1,500	1,500
Polk Community College (C. Sauveur)	1,500	1,500
Polk Community College (A. Hartley)	1,500	-
Polk Community College (A. Clay)	1,500	-
Polk Community College (C. Garcia-Prescott)	1,500	-
Polk Community College (J. Francois)	1,500	-
Polk Community College (K. Stoner)	1,500	-
Prevent Blindness Florida	9,433	10,442
Primrose Center	9,260	10,242
Princeton Theological Seminary (K. Daniel)	1,500	-
Restore Orlando	385	378
Robert McCormick Tribune Foundation	2,000	1,500
Rollins College	14,205	15,725
Ronald McDonald House Charities	4,950	5,000
Russell Home for Atypical Children	-	500
Safe House of Seminole	-	8,800
Salvation Army	1,000	-
Second Harvest Food Bank of Central Florida	4,000	-
Seminole Community College (L. Gonsalves)	-	1,000
Seminole Community College (F. Huffman)	1,000	-

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.
 EIN: 59-3182886

<i>Year ended April 30,</i>	2004	2003
Seniors First, Inc.	4,000	-
Shepherd's Hope, Inc.	50,000	9,000
Southeastern College (M. Ortagus)	1,500	1,500
Southeastern College (K. Whittenton)	1,500	1,500
South Florida Community College (A. Jahjah)	1,500	-
SPCA of Central Florida	-	450
St. Francis House of Hospitality	1,000	-
St. John the Baptist Episcopal Church	-	132
St. Margaret Mary Catholic School	-	816
St. Margaret Mary Saturday Center	500	-
St. Mary Magdalen School	109	81
Stepping Stone Foundation	10,000	3,450
Stetson University (P. Smith)	-	1,500
Stetson University (K. Daniel)	-	1,500
Stetson University (A. Leach)	1,500	-
Stetson University (C. Smith)	3,000	-
Stetson University (M. Christian)	1,500	-
Stetson University (T. Oney)	3,000	-
Teen Crime Prevention Academy of Central Florida	3,000	-
Teen Pregnancy Prevention Coalition of Orange County	500	-
The Mustard Seed of Central Florida, Inc.	5,500	-
The Ripple Effect	500	-
Theatre Downtown, Inc.	-	1,000
Toastmasters Club 1066	595	1,260
Union University (A. Abney)	-	1,500
United Arts of Central Florida	10,000	19,500
United Cerebral Palsy of Central Florida	10,000	-
University Club of Winter Park	1,000	-
University of Central Florida (K. Antoine)	1,260	-
University of Florida (B. Hilson)	-	1,139
University of Florida (C. Brown)	-	1,000
University of Florida (K. Mangan)	-	1,000
University of Florida (A. Ayers)	1,500	-
University of Florida (G. Bill)	1,000	-
University of Florida (J. Sanders)	1,500	-
University of Florida (M. Ferguson)	1,000	-
University of Miami (J. Zwolinski)	1,500	-
University of North Florida (J. Sanders)	1,500	-
University of North Florida (K. Newton)	1,500	-
University of South Florida (N. Gustave)	1,500	1,500
University of Wisconsin	406	294
Valencia Community College (A. Dorielan)	-	1,139
Valencia Community College (D. Bell)	-	1,000
Westside Tech	-	1,000
Winter Garden Heritage Museum	500	-

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.
EIN; 59-3182886

<i>Year ended April 30,</i>	2004	2003
Winter Park Day Nursery	7,823	3,126
Winter Park Health Foundation	13,518	86,333
Winter Park Memorial Hospital	66,331	–
Winter Park Presbyterian Church	–	1,267
Winter Park Public Library	–	38,247
Winter Park YMCA	2,000	–
WMFE-FM	–	100
Women's Giving Alliance	5,000	–
Young Life M.O.W.	–	415
Total grant expense	974,479	917,893

COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.

EIN: 59-3182886

4/30/2004

<u>FIXED ASSETS</u>	<u>4/30/2003</u>	<u>ADDITIONS</u>	<u>DELETIONS</u>	<u>4/30/2004</u>
FURNITURE & FIXTURES	2,634			2,634
OFFICE EQUIPMENT	19,005	17,619	(5,513)	31,111
COMPUTER SOFTWARE	22,867	17,853		40,720
TOTALS	<u>44,506</u>	<u>35,472</u>	<u>(5,513)</u>	<u>74,465</u>

<u>ACCUMULATED DEPRECIATION</u>				
FURNITURE & FIXTURES	1,386	368		1,754
OFFICE EQUIPMENT	12,334	4,605	(3,307)	13,632
COMPUTER SOFTWARE	19,596	5,157		24,753
TOTALS	<u>33,316</u>	<u>10,131</u>	<u>(3,307)</u>	<u>40,140</u>

FORM 990	GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES			STATEMENT	1
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)	
SALE OF INVESTMENTS	908,655.	0.	0.	908,655.	
TO FORM 990, PART I, LINE 8	908,655.	0.	0.	908,655.	

FORM 990	OTHER CHANGES IN NET ASSETS OR FUND BALANCES		STATEMENT	2
DESCRIPTION				AMOUNT
UNREALIZED GAIN ON INVESTMENTS				1,732,532.
CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST				173,381.
TOTAL TO FORM 990, PART I, LINE 20				1,905,913.

FORM 990	OTHER EXPENSES			STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
MISCELLANEOUS OFFICE EXPENSE	5,425.		5,425.		
INVESTMENT MANAGEMENT FEES	78,534.		78,534.		
EDUCATION & TRAINING	4,047.		4,047.		
PARKING & MILEAGE	1,749.		1,749.		
INSURANCE	2,725.		2,725.		
SOFTWARE SUPPORT	10,943.		10,943.		
DUES & SUBSCRIPTIONS	5,234.		5,234.		
CONSULTING SERVICES	35,783.		35,783.		
LICENSES & FEES	413.		413.		
LOSS ON DISPOSAL OF EQUIPMENT	2,205.		2,205.		
ADMINISTRATIVE FEES	253,468.	253,468.			
TOTAL TO FM 990, LN 43	400,526.	253,468.	147,058.		

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
PART III

EXPLANATION

IT PROVIDES A PERMANENT POOL OF PHILANTHROPIC DOLLARS WHICH WILL SUPPORT COMMUNITY PROJECTS - HEALTH/HUMAN SERVICES, ARTS/CULTURE, AND EDUCATION.

FORM 990 CASH GRANTS AND ALLOCATIONS STATEMENT 5

CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
SEE ATTACHED SCHEDULE			NONE	974,479.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				974,479.

FORM 990 OTHER INVESTMENTS STATEMENT 6

DESCRIPTION	VALUATION METHOD	AMOUNT
STOCKS & BONDS	MARKET VALUE	24,572,194.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		24,572,194.

FORM 990 OTHER ASSETS STATEMENT 7

DESCRIPTION	AMOUNT
RECEIVABLE FROM CHARITABLE REMAINDER TRUST	1,055,720.
ASSETS HELD IN CHARITABLE REMAINDER TRUST	182,684.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	1,238,404.

FORM 990	OTHER LIABILITIES	STATEMENT	8
DESCRIPTION		AMOUNT	
LIABILITY UNDER SPLIT INTEREST AGREEMENTS		710,280.	
AMOUNTS HELD FOR OTHERS		2,445,711.	
LIABILITY FOR AGENCY FUNDS		3,445,945.	
TOTAL TO FORM 990, PART IV, LINE 65, COLUMN B		6,601,936.	

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
DESCRIPTION		AMOUNT	
INCREASE IN VALUE OF CHARITABLE REMAINDER TRUST		173,382.	
NET UNREALIZED GAINS ON INVESTMENTS		1,732,532.	
SPECIAL EVENT EXPENSE		<82,078.>	
REVENUE FROM SUPPORTING ORGANIZATION INCLUDED ON CONSOLIDATED FINANCIAL STATEMENTS		172,937.	
TOTAL TO FORM 990, PART IV-A		1,996,773.	

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT	10
DESCRIPTION		AMOUNT	
SPECIAL EVENT EXPENSE		82,078.	
EXPENSE FROM SUPPORTING ORGANIZATION INCLUDED ON CONSOLIDATED FINANCIAL STATEMENTS		<81,136.>	
TOTAL TO FORM 990, PART IV-B		942.	

SCHEDULE A	EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS	STATEMENT	11
	PART III, LINE 3		

POTENTIAL RECIPIENTS MUST PROVIDE A COPY OF THEIR 501(C)(3) DETERMINATION LETTER AS WELL AS COPIES OF THEIR FINANCIAL STATEMENTS AND OPERATING BUDGET. THOSE RECEIVING GRANTS SIGN A GRANT AGREEMENT CONTRACT AND DETAIL THE USE OF THE FUNDS WHEN THE GRANT IS COMPLETED.

SCHEDULE A	OTHER INCOME			STATEMENT 12
DESCRIPTION	2002 AMOUNT	2001 AMOUNT	2000 AMOUNT	1999 AMOUNT
MISCELLANEOUS	1,827.	<2,769.>	37,962.	0.
TOTAL TO SCHEDULE A, LINE 22	1,827.	<2,769.>	37,962.	0.

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

Note: Form 990-T corporations requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print	Name of Exempt Organization COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC.	Employer identification number 59-3182886
	Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 2071	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ORLANDO, FL 32802-2071	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- If the organization does **not** have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the **whole group**, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until DECEMBER 15, 2004 to file the exempt organization return for the organization named above. The extension is for the organization's return for:

► calendar year _____ or

► tax year beginning MAY 1, 2003, and ending APR 30, 2004.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ _____

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ► Anne-Marie L. Kagel Title ► CPA Date ► 9-14-04

LHA For Paperwork Reduction Act Notice, see instruction Form 8868 (12-2000)