

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 black lung benefit trust or private foundation)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2012
Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 05-01-2012, 2012, and ending 04-30-2013

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC		D Employer identification number 59-3182886	
	Doing Business As		E Telephone number (407) 872-3050	
	Number and street (or P O box if mail is not delivered to street address) Room/suite 1411 EDGEWATER DRIVE No 203			
	City or town, state or country, and ZIP + 4 ORLANDO, FL 328046361		G Gross receipts \$ 5,086,973	
F Name and address of principal officer MARK BREWER 1411 EDGEWATER DRIVE No 203 ORLANDO, FL 328046361		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number		
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: WWW.CFCFLORIDA.ORG				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation 1993	M State of legal domicile FL

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities The Community Foundation of Central Florida provides philanthropic dollars to (see Schedule O) support community projects in the areas of healthcare, human services, arts and humanities, education, religion, community improvement, environment and animals, and philanthropy and voluntarism		
	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	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	11
	6 Total number of volunteers (estimate if necessary)	6	29
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	5,652,144	2,477,008
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	852,025	36,213
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,319,276	2,573,017
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,585	735
		8,849,030	5,086,973
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,070,990	4,790,446
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	638,164	764,528
	16a Professional fundraising fees (Part IX, column (A), line 11e)	32,000	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>236,497</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,319,702	443,047
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	6,060,856	5,998,021
19 Revenue less expenses Subtract line 18 from line 12	2,788,174	-911,048	
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	53,535,979	55,157,448
	21 Total liabilities (Part X, line 26)	1,673,989	1,546,741
22 Net assets or fund balances Subtract line 21 from line 20	51,861,990	53,610,707	

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	2013-09-10 Date			
	Mark Brewer PRESIDENT/CEO Type or print name and title				
Paid Preparer Use Only	Prnt/Type preparer's name Anne-Marie Barrett CPA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P00546302
	Firm's name CROSS FERNANDEZ & RILEY LLP	Firm's EIN 59-3651466		Phone no (407) 841-6930	
	Firm's address 201 S ORANGE AVE SUITE 800 ORLANDO, FL 328013421				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III Yes No

1 Briefly describe the organization's mission

Building Community by Building Philanthropy We are a knowledgeable philanthropic resource that assists donors, nonprofit organizations and professional advisors with making social investments to achieve their charitable goals

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 \$ 5,110,311 including grants of \$ 4,790,446) (Revenue \$ 36,213)

Grants to 228 not for profit organizations for various charitable purposes in Central Florida, across the United States and internationally Provide a knowledge base designed to support transparency by delivering web-based information about the financial, operational and programmatic health of local nonprofit organizations The knowledge base is a one-of-a-kind resource that connects people who want to make a difference with local charitable organizations doing important work

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)











4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,110,311

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)? <i>If "Yes," complete Schedule A</i> <input checked="" type="checkbox"/>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
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? <i>If "Yes," complete Schedule C, Part II</i>		No
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? <i>If "Yes," complete Schedule C, Part III</i>		No
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? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>	Yes	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule D, Part VI</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule D, Part VII</i> <input checked="" type="checkbox"/>	Yes	
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? <i>If "Yes," complete Schedule D, Part VIII</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule D, Part IX</i> <input checked="" type="checkbox"/>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
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)? <i>If "Yes," complete Schedule D, Part X</i> <input checked="" type="checkbox"/>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> <input checked="" type="checkbox"/>		No
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> <input checked="" type="checkbox"/>	Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a Did the organization maintain an office, employees, or agents outside of the United States?		No
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? <i>If "Yes," complete Schedule F, Parts I and IV</i> <input checked="" type="checkbox"/>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> <input checked="" type="checkbox"/>	Yes	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> <input checked="" type="checkbox"/>		No
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> 	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> 	22	Yes	
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> 	23	Yes	
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 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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>	25a		No
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>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
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>	27		No
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>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
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>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	29	Yes	
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> 	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
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>	32		No
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> 	33		No
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> 	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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> 	35b		No
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> 	36		No
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> 	37		No
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	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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		No

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?		No
10b	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?	Yes	
11b	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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization		No
	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?		No
16b	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 **▶**
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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, physical address, and telephone number of the person who possesses the books and records of the organization
▶MEGHAN WARRICK CFO 1411 EDGEWATER DR STE 203 ORLANDO, FL (407) 872-3050

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

Check if Schedule O contains a response to any question 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, or 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) STEPHEN ELKER CHAIRMAN	2 00	X		X			0	0	0	
(2) SUSAN ARKIN VICE CHAIRMAN	2 00	X		X			0	0	0	
(3) MARTY RUBIN SECRETARY	2 00	X		X			0	0	0	
(4) KAKI RAWLS TREASURER	2 00	X		X			0	0	0	
(5) AARON GOROVITZ BOARD MEMBER	1 00	X					0	0	0	
(6) ROB PANEPINTO BOARD MEMBER	1 00	X					0	0	0	
(7) EUGENE CAMPBELL BOARD MEMBER	1 00	X					0	0	0	
(8) ROBERT F THOMSON II BOARD MEMBER	1 00	X					0	0	0	
(9) ALEXIS PUGH BOARD MEMBER	1 00	X					0	0	0	
(10) LYN BERELSMAN BOARD MEMBER	1 00	X					0	0	0	
(11) STACEY PRINCE-TROUTMAN BOARD MEMBER	1 00	X					0	0	0	
(12) DEREK BRUCE BOARD MEMBER	1 00	X					0	0	0	
(13) ROBIN ROBERTS BOARD MEMBER	1 00	X					0	0	0	
(14) AVANISH AGGARWAL BOARD MEMBER	1 00	X					0	0	0	
(15) WAYMON ARMSTRONG BOARD MEMBER	1 00	X					0	0	0	
(16) PAULA SHIVES BOARD MEMBER	1 00	X					0	0	0	
(17) MARK BREWER PRESIDENT/CEO	50 00	X		X			137,483	0	14,143	

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 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					
	f All other contributions, gifts, grants, and similar amounts not included above 1f	2,477,008				
	g Noncash contributions included in lines 1a-1f \$	186,486				
	h Total. Add lines 1a-1f	2,477,008				
Program Service Revenue	2a MANAGEMENT FEES					
		Business Code				
		561000	36,213	36,213		
	b					
	c					
	d					
	e					
f All other program service revenue						
g Total. Add lines 2a-2f		36,213				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		707,870		707,870	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
		b Less rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	1,865,147			
		(ii) Other				
		b Less cost or other basis and sales expenses	0			
		c Gain or (loss)	1,865,147			
	d Net gain or (loss)		1,865,147		1,865,147	
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b Less direct expenses				
c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses					
	c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold					
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11a Returned Grants	900099	735	735			
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		735				
12 Total revenue. See Instructions		5,086,973	36,948	0	2,573,017	

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 to any question 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 governments and organizations in the United States. See Part IV, line 21	4,727,920	4,727,920		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	47,526	47,526		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	15,000	15,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	145,000	36,250	20,300	88,450
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	418,844	140,000	228,310	50,534
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	11,432	3,574	5,040	2,818
9	Other employee benefits	156,178	48,819	68,862	38,497
10	Payroll taxes	33,074	10,338	14,583	8,153
11	Fees for services (non-employees)				
a	Management				
b	Legal	990		990	
c	Accounting	20,475		20,475	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	192,948		188,948	4,000
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,275		2,275	
12	Advertising and promotion	1,875		1,875	
13	Office expenses	7,261		7,261	
14	Information technology	75,818	50,452	13,190	12,176
15	Royalties				
16	Occupancy	80,482	16,700	48,490	15,292
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,447	2,875	814	7,758
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	18,556	5,800	8,182	4,574
23	Insurance	3,710		3,710	
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	Utilities	10,051	3,142	4,432	2,477
b	Maintenance	8,225		8,165	60
c	Parking and Mileage	5,006	1,565	2,207	1,234
d					
e	All other expenses	3,928	350	3,104	474
25	Total functional expenses. Add lines 1 through 24e	5,998,021	5,110,311	651,213	236,497
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 Sheet

Check if Schedule O contains a response to any question in this Part X

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	99,335	1	134,287
	2 Savings and temporary cash investments	3,136,950	2	3,122,249
	3 Pledges and grants receivable, net	22,123	3	21,548
	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	10,821	9	22,818
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 193,955		
	b Less accumulated depreciation	10b 158,095	43,774	10c 35,860
	11 Investments—publicly traded securities	35,102,718	11	34,758,590
	12 Investments—other securities See Part IV, line 11	13,880,944	12	15,845,256
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	1,239,314	15	1,216,840
16 Total assets. Add lines 1 through 15 (must equal line 34)	53,535,979	16	55,157,448	
Liabilities	17 Accounts payable and accrued expenses	13,507	17	12,200
	18 Grants payable	1,007,382	18	824,972
	19 Deferred revenue		19	
	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		24	
	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	653,100	25	709,569
	26 Total liabilities. Add lines 17 through 25	1,673,989	26	1,546,741
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	50,266,197	27	51,857,445
	28 Temporarily restricted net assets	1,595,793	28	1,753,262
	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	51,861,990	33	53,610,707	
34 Total liabilities and net assets/fund balances	53,535,979	34	55,157,448	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,086,973
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,998,021
3	Revenue less expenses Subtract line 2 from line 1	3	-911,048
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	51,861,990
5	Net unrealized gains (losses) on investments	5	2,652,471
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	7,294
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	53,610,707

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question 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		No
2b 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 type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c 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	Yes	
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?		No
3b 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		

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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. ▶ See separate instructions.

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number

59-3182886

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 11, 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)
- 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 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)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	3,160,973	5,954,114	2,604,245	5,652,144	2,477,008	19,848,484
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	3,160,973	5,954,114	2,604,245	5,652,144	2,477,008	19,848,484
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)						3,654,820
6 Public support. Subtract line 5 from line 4						16,193,664

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	3,160,973	5,954,114	2,604,245	5,652,144	2,477,008	19,848,484
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	884,972	796,365	887,772	1,098,899	707,870	4,375,878
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 IV.)		-8,310	1,865	25,585	735	19,875
11 Total support (Add lines 7 through 10)						24,244,237
12 Gross receipts from related activities, etc. (see instructions)					12	3,087,891
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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 2012 (line 6, column (f) divided by line 11, column (f))	14	66 790 %
15 Public support percentage for 2011 Schedule A, Part II, line 14	15	66 260 %
16a 33 1/3% support test—2012. 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—2011. 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—2012. 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 IV 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—2011. 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 IV 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 9 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 IV.)						
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 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 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	

- 19a 33 1/3% support tests—2012.** 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—2011.** 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization

COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number

59-3182886

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 show total number at end of year, aggregate contributions, aggregate grants, and aggregate value.

- 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?
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?

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

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

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a-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?
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, 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)?
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" to 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
1b 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
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

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

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	38,123,624	39,835,291	35,619,101	25,773,687	34,369,305
b Contributions	609,419	760,576	801,598	3,105,212	2,693,548
c Net investment earnings, gains, and losses	4,312,022	-683,296	5,413,004	8,358,906	-9,604,909
d Grants or scholarships	1,139,614	990,749	1,152,319	904,545	1,188,404
e Other expenditures for facilities and programs					
f Administrative expenses	980,070	798,198	846,093	714,159	495,853
g End of year balance	40,925,381	38,123,624	39,835,291	35,619,101	25,773,687

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 100.000 %
 - c** Temporarily restricted endowment
- The percentages in 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)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 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. 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				
b Buildings				
c Leasehold improvements		60,416	44,087	16,329
d Equipment		133,539	114,008	19,531
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				35,860

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	6,625,169
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	1,930,675	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	553,494	
e	Add lines 2a through 2d			2e 2,484,169
3	Subtract line 2e from line 1			3 4,141,000
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	945,973	
c	Add lines 4a and 4b			4c 945,973
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5 5,086,973

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	5,854,187
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	351,517	
e	Add lines 2a through 2d			2e 351,517
3	Subtract line 2e from line 1			3 5,502,670
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	495,351	
c	Add lines 4a and 4b			4c 495,351
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5 5,998,021

Part XIII Supplemental Information

Complete this part to 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.

Identifier	Return Reference	Explanation
Description of Intended Use of Endowment Funds	Part V, Line 4	Endowment funds provide sustainable funding for charitable projects in Central Florida and across the United States
Description of Uncertain Tax Positions Under FIN 48	Part X, Line 2	The Foundation is subject to the accounting standards on accounting for uncertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Management evaluated the tax positions for the Foundation and concluded that the Foundation has taken no uncertain income tax positions that require adjustments to the financial statements to comply with the provisions of this guidance. The Foundation's open tax years subject to examination by the Internal Revenue Service generally remain open for three years from the date of filing.
Part XI, Line 2d - Other Adjustments		Internal administrative fees 117,215 Change in value of charitable remainder trust 349,544 Revenue related to the N Donald Diebel, Jr, MD Good Samaritan Fund, Inc -5,000 Revenue related to the Lake Community Foundation, Inc 88,735 Revenue related to the Isleworth Community Trust, Inc 3,000
Part XI, Line 4b - Other Adjustments		Funds held for Agencies Contributions 382,133 Funds held for Agencies Interest and Dividends 153,038 Funds held for Agencies on Realized Gains 410,802
Part XII, Line 2d - Other Adjustments		Expense related to the N Donald Diebel, Jr, MD Good Samaritan Fund, Inc 14,657 Expense related to the Lake Community Foundation, Inc 216,696 Expense related to the Isleworth Community Trust, Inc 2,949 Internal administrative fees 117,215
Part XII, Line 4b - Other Adjustments		Fees related to managing funds held for agencies & agency authorized grants 495,351

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2012

Open to Public Inspection

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990. See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number 59-3182886

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. 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 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees, agents, and independent contractors in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures for and investments in region. Rows include North America, Central America and the Caribbean, Europe (Including Iceland & Greenland), and a Totals row.

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).* Yes No

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

2012

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number 59-3182886

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?
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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to 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.

(a) Name and address of organization or government (b) EIN (c) IRC Code 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 non-cash assistance (h) Purpose of grant or assistance

See Additional Data Table

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. The table is currently empty.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 91
3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to 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 non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Educational Scholarships to Individuals	24	47,526			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The Community Foundation of Central Florida monitors grants by conducting due diligence on grantee organizations before grants are approved Grant contracts accompany certain grants as considered appropriate Pre-grant meetings, mid-year and final evaluations are included in our grant monitoring process as the circumstances of each grant warrant

Software ID:
Software Version:
EIN: 59-3182886
Name: COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Alzheimer's & Dementia Resource Center Inc 1506 Lake Highland Drive Orlando, FL 32803	59-2496511	501(c)(3)	34,000				Staffing Costs for First Year of Maturing Minds Clinic
American Cancer Society National Office of Probate and Trust Management Services PO Box 72 Oklahoma City, OK 73162	13-1788491	501(c)(3)	8,571				In memory of Charlotte Simon, Designated for Florida Division
American Red Cross of Central Florida PO Box 536726 Orlando, FL 328536276	53-0196605	501(c)(3)	10,534				To support Hurricane Sandy relief efforts, Operating, Annual Distribution
Arthritis Foundation 408 West 12th Street Bradenton, FL 34205	59-0816892	501(c)(3)	22,628				2013 Agency Endowment Distribution
BASE Camp Children's Cancer Foundation 2020 W Fairbanks Avenue Suite 101 Winter Park, FL 32789	59-3152723	501(c)(3)	6,000				General contribution to assist families dealing with children with malignancies
Bach Festival Society Of Winter Park Inc 1000 Holt Ave - 2763 Rollins College Winter Park, FL 327894499	59-6015959	501(c)(3)	6,386				Annual Distribution, Primary consideration for the needs of the Bach Festival Choir
Bags of Hope Central Florida Inc PO Box 915732 Longwood, FL 32791	27-1634938	501(c)(3)	10,000				For the expansion of the children served by the Kid's Club
Bank of America Charitable Gift Fund PO Box 55850 MA5-100-16-06 Boston, MA 02205	04-6010342	501(c)(3)	618,354				to establish a fund
Best Friends Animal Society 5001 Angel Canyon Road Kanab, UT 84741	23-7147797	501(c)(3)	7,000				To support their vision of kindness to animals builds a better world for all of us
Big Potato Foundation 882 Jackson St Winter Park, FL 32789	45-2994545	501(c)(3)	10,000				Karing for Kathy
Boys & Girls Clubs Of Central Florida 101 E Colonial Drive Orlando, FL 32801	59-0951887	501(c)(3)	12,000				This grant designated specifically for the Eatonville branch of Boys & Girls Club, General Contribution
Brooksville Elementary School 885 N Broad Street Brooksville, FL 34601		Governmental Entity	9,110				Aerospace Connections in Education (ACE) Program, 20 new tablets for the first graders
Camaraderie Foundation Inc PO Box 547276 Orlando, FL 32854	27-0593856	501(C)(3)	6,840				Program Evaluation, General Contribution
Cat Protection Society Inc PO Box 1078 Sorrento, FL 327761078	59-3413294	501(c)(3)	36,107				Annual Distribution
Central Florida Hotel & Lodging Association Foundation Inc 6675 Westwood Blvd Suite 210 Orlando, FL 32821	26-4207486	501(C)(3)	11,702				General contribution
Central Florida Zoological Society Inc PO Box 470309 Lake Monroe, FL 327470309	59-1357197	501(c)(3)	19,196				One horn rhino exhibit, Annual Distribution
Christian Sharing Center Inc 600 North Highway 17-92 Suite 158 Longwood, FL 327503638	59-2744535	501(c)(3)	9,782				General Contribution
Coalition For The Homeless of Central Florida Inc 639 West Central Blvd Orlando, FL 328012507	59-2814255	501(c)(3)	13,274				Operating, General contribution, Unrestricted, Annual Distribution, 2013 Agency Endowment Distribution, For daycare services and the Women's Residential Counseling Center
Community Coordinated Care For Children Inc 3500 West Colonial Drive Orlando, FL 32808	59-1371754	501(c)(3)	184,255				To provide child care management, placement services and child care subsidies, 2013 Agency Endowment Distribution
Community Foundation of Greater Lakeland Inc 1501 South Florida Avenue Lakeland, FL 338031152	59-3649871	501(c)(3)	9,770				To the Community Foundation of Greater Winter Haven for medical, hospital and other care for sick and injured persons
Community Vision Inc 704 Generation Point 101 Kissimmee, FL 34744	59-2896657	501(c)(3)	39,489				2013 Agency Endowment Distribution
Early Learning Coalition of Orange County PO Box 540387 Orlando, FL 32854	31-1759186	501(c)(3)	135,000				The Parramore Kidz Zone (PKZ) Baby Institute
Edgewood Children's Ranch 1451 Edgewood Ranch Road Orlando, FL 32835	59-1150182	501(c)(3)	25,818				2013 Agency Endowment Distribution
Elmhurst College Office of the President 190 Prospect Ave Elmhurst, IL 60126	36-2169145	501(c)(3)	15,000				Barbara and Robert W Swords Memorial Endowment Fund
First Academy Inc 2667 Bruton Blvd Orlando, FL 32805	20-3860569	501(c)(3)	25,000				for the middle school gym expansion
First Church of Christ Scientist 210 Massachusetts Avenue PO5-10 Boston, MA 021153195	04-2254742	501(c)(3)	6,923				Annual distribution
First Presbyterian Church of Orlando 106 East Church St Orlando, FL 32801	59-0624394	501(c)(3)	5,250				Gathering of Women, General contribution
First Tee of Central Florida 9685 Lake Nona Village Place Suite 205 Orlando, FL 32827	27-0149539	501(C)(3)	5,000				General contribution
Florida After School Alliance Inc PO Box 20425 St Petersburg, FL 337420425	59-3062864	501(c)(3)	5,237				2013 Agency Endowment Distribution
Florida Hospital Foundation 2809 N Orange Avenue Orlando, FL 32804	59-6151162	501(c)(3)	10,000				To be directed to the Florida Hospital Cancer Institute in honor of Dr Linda Lukman

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Food for the Poor 6401 Lyons Rd Coconut Creek, FL 33073	59-2174510	501(c)(3)	32,000				HOMES FOR HAITI /ORLANDO GALA
Foundation for Building Community Inc 75 South Ivanhoe Boulevard Orlando, FL 32804	59-3678634	501(c)(3)	5,000				as the 2013 Investment in the Central Florida Partnership
Foundation for Foster Children 2265 Lee Rd Ste 203 Winter Park, FL 32789	26-1682601	501(c)(3)	30,537				General purpose
Foundation for Osceola Education Inc 2310 New Beginnings Road Suite 118 Kissimmee, FL 34744	59-2960396	501(c)(3)	46,200				for scholarships for up to four years for seniors at high schools in Osceola County
Girls For a Change PO Box 1436 San Jose, CA 95109	26-0035835	501(c)(3)	7,100				"Change Your World" training and experience for Central Florida girls and their agency staff
Harbor House of Central Florida Inc PO Box 680748 Orlando, FL 32868	59-1712936	501(c)(3)	20,438				Paws for Peace Kennel Operating Support, To Men of Courage, Annual distribution
Haywood Arts Repertory Theater PO Box 1024 Waynesville, NC 28786	58-1652524	501(C)(3)	50,000				to support the Hart Theater Stage II Capital Campaign
Health Council of East Central Florida Inc 2461 W SR 426 Suite 2041 Oviedo, FL 32765	59-2227752	501(c)(3)	10,000				For the input, analysis and reporting of data generated by numerous community-based organizations that work under the PKZ umbrella
Heart of Florida United Way Dr Nelson Ying Center 1940 Traylor Boulevard Orlando, FL 32804	59-0808854	501(c)(3)	83,928				General Contribution, Operating, Annual Distribution, 2013 Agency Endowment Distribution
Holy Family Catholic Church 5129 S Apopka-Vineland Road Orlando, FL 32819	53-0196617	501(c)(3)	10,000				Security Camera for the Church Property
Homes for our Troops Inc 6 Main St Taunton, MA 02780	54-2143612	501(C)(3)	8,666				To support the Orlando Projects
Hospice of the Comforter Inc 605 Montgomery Rd Altamonte Springs, FL 32714	59-2935928	501(c)(3)	19,566				A donation in the name of Harold Catto, Education and Training for Hospice RN's, General Contribution
Kids Beating Cancer aka John Voight Foundation 615 East Princeton Street Suite 400 400 Orlando, FL 32803	59-3136203	501(c)(3)	19,266				To help with transplantation for children in need, General Contribution, Capacity Building and Outreach and Education Plan
Kingsford Elementary School 1400 Dean Street Mulberry, FL 33860		Governmental Entity	9,250				Science classes with LEGO Education WeDo Robotics, Non-Fiction Leveled Libraries, Build a Book kits for 60 families and books for home libraries, 6 Letters Alive kits
Lake Baldwin Community Church 1300 Lake Baldwin Lane Orlando, FL 32814	20-0871726	501(C)(3)	25,000				General purpose
Lake Highland Preparatory School 901 N Highland Avenue Orlando, FL 32803	59-0624431	501(c)(3)	6,000				General Contribution, Football Gift Account
Legacy of Hope International Inc PO Box 3145 Irmo, SC 29063	55-0850360	501(c)(3)	25,000				General contribution
Make-A-Wish Foundation of Central & Western North Carolina 212 S Tryon St Suite 1080 Charlotte, NC 28281	56-1492432	501(c)(3)	18,500				To support Fund-A-Wish, General Support for Organization, To meet match for Season of Wishes Campaign
Make-A-Wish Foundation of Georgia and Alabama 1775 The Exchange SE Suite 200 Atlanta, GA 30339	58-2146828	501(c)(3)	10,000				Wishes Can't Wait Campaign
Mayflower Retirement Center Inc 1620 Mayflower Court Winter Park, FL 32792	59-2617174	501(c)(3)	22,889				2013 Agency Endowment Distribution, For support and maintenance of the Mayflower Benevolent Fund
Meridian Club of Winter Park Scholarship Fund PO Box 1300 Winter Park, FL 32790	51-0205095	501(C)(3)	6,357				Annual Distribution, To be administered as a general scholarship fund, Scholarships are restricted to the college education of African American boys and girls
Mount Saint Mary Academy 1645 Route 22 West at Terrill Road Watchung, NJ 07069	22-2981173	501(c)(3)	10,000				Scholarships for underprivileged young girls
Nap Ford Community School 648 W Livingston St Orlando, FL 32801	59-3662275	501(c)(3)	18,000				To hire up to 2 youth (s) who reside in the Parramore Heritage Community to serve as Teacher Assistants
National Christian Foundation Orlando 200 E Robinson Street Suite 750 Orlando, FL 32801	58-1493949	501(C)(3)	1,275,821				To establish a donor advised fund named the Edward E Haddock Jr Family Foundation Fund
New Hope For Kids 900 N Maitland Avenue Maitland, FL 32751	59-1791345	501(c)(3)	339,363				2013 Agency Endowment Distribution, General Contribution, Unrestricted, Annual distribution, A new money matching grant, New money match grant, in memory of Robert Patrick Sullivan and Ann Hagen
New Image Youth Center 212 S Parramore Avenue Orlando, FL 32805	56-2482818	501(c)(3)	70,000				To provide a daily after school & summer camp program
Ohio Wesleyan University Office of the President University Hall 101 Delaware, OH 43015	31-4379585	501(c)(3)	33,000				General contribution to the Ohio Wesleyan Fund
Operation Smile 6435 Tidewater Dr Norfolk, VA 23509	54-1460147	501(c)(3)	10,000				General purposes
Orlando Ballet Inc 1111 N Orange Avenue Suite 4 Orlando, FL 32804	23-7427817	501(c)(3)	8,526				Annual distribution, Winner of the Most Viewed Portrait (increased visit over November for a referral site) contest for December, 2013 Agency Endowment Distribution
Orlando Community & Youth Trust Inc 595 N Primrose Avenue Orlando, FL 32803	65-0572536	501(c)(3)	140,000				To offer comprehensive youth development programs

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Orlando Day Nursery Association 626 Lake Dot Circle Orlando, FL 32801	59-0651096	501(c)(3)	9,000				To hire up to 4 youth (s) who reside in the Parramore Heritage Community to serve as Teaching Interns
Orlando Health Foundation 3160 Southgate Commerce Blvd Suite 50 Orlando, FL 32806	59-2244943	501(c)(3)	11,477				General contribution, To support the NICU expansion at Winnie Palmer
Orlando Museum of Art Inc 2416 N Mills Avenue Orlando, FL 328031483	59-0910352	501(c)(3)	11,426				Annual distribution, support and maintenance, to support education programs for children
Orlando Philharmonic Orchestra Inc 812 East Rollins Street Suite 300 Orlando, FL 328031203	59-3058884	501(c)(3)	46,715				Annual Distribution, To support the concert opera series, To support education programs for children, 2012 Agency Endowment Distribution, 2013 Agency Endowment Distribution
Orlando Union Rescue Mission Inc 1521 W Washington Street Orlando, FL 32805	59-1035082	501(c)(3)	22,670				Annual Distribution, To provide 800 Meals to hungry men, women and children
Parkview Outreach Community Center 1205 Dr Martin L King Jr Way Haines City, FL 33844	01-0790991	501(c)(3)	25,000				To acquire an EKG machine and to provide funds for laboratory testing
Prevent Blindness Florida 800 2nd Avenue South Suite 390 St Petersburg, FL 33701	59-6181662	501(c)(3)	6,476				For assistance to needy people in Central Florida
Robert R McCormick Tribune Foundation 205 North Michigan Ave Suite 4300 Chicago, IL 60601	36-3689171	501(c)(3)	6,000				General contribution to the Sentinel Family Fund, Orlando Sentinel Family Fund's United Partners Campaign
Rollins College 1000 Holt Avenue - 2711 Winter Park, FL 327894499	59-0624440	501(c)(3)	42,747				Annual distribution, to support the Venture Plan Competition, Gold membership to the Donors Forum of Central Florida, Annual Distribution, Center for Advanced Entrepreneurship
Rollins College Philanthropy and Nonprofit Leadership Center 1000 Holt Avenue 2755 Winter Park, FL 32789	59-0624440	501(c)(3)	18,500				Capacity Building Work with Freedom Ride, Inc , Coordinate and manage specific efforts for 200 Central Florida low-income girls ages 11-18 to receive a day of training called "Changing Your World"
Rollins College Center for Advanced Entrepreneurship 1000 Holt Avenue 2722 Winter Park, FL 32789	59-0624440	501(C)(3)	12,500				Educational Support for 2 MBA Interns
Sanford-Burnham Medical Research Institute 6400 Sanger Rd Orlando, FL 32827	51-0197108	501(C)(3)	10,000				To support melanoma research
Second Harvest Food Bank Of Central Florida Inc 411 Mercy Drive Orlando, FL 32805	59-2142315	501(c)(3)	43,387				For the Kids Cafe Reeves Terrace, General Contribution, Provide matching funds for recent pledge drive, 2013 Agency Endowment Distribution, To assist with replenishment of food items for the food pantry for the holidays
Seniors First Inc 5395 LB McLeod Road Orlando, FL 32811	59-2759603	501(c)(3)	23,228				Development Position, 2013 Agency Endowment Distribution
Shepherd's Hope Inc 4851 S Apopka-Vineland Rd Orlando, FL 32819	59-3420727	501(c)(3)	128,264				2012 Agency Endowment Distribution, Call to Hope Society, 2013 Agency Endowment Distribution
St Andre Bessette Parish 291 Union Ave Laconia, NH 03246	53-0196617	501(c)(3)	25,000				General Contribution to the charitable assistance account
Steppin Stone Farm Inc 8421 Pritcher Road Lithia, FL 33547	23-7348139	501(C)(3)	10,000				General Contribution
Stetson University College of Law 1401 61st Street South Gulfport, FL 33707	59-0624416	501(C)(3)	100,000				for the Hope Scholarship
SunSystem Development Corporation 2809 N Orange Avenue Orlando, FL 32804	59-2219301	501(c)(3)	25,000				To support the Florida Center for Pediatric Dermatology
The Boggy Creek Gang Inc 30500 Brantley Branch Road Eustis, FL 32736	59-3012889	501(c)(3)	10,666				General Contribution
The Mustard Seed Of Central Florida Inc 12 Mustard Seed Lane Orlando, FL 328106271	59-2906383	501(c)(3)	25,000				General contribution
The Nature Conservancy in Florida 222 S Westmonte Dr Ste 300 Altamonte Springs, FL 32714	53-0242652	501(c)(3)	51,000				General contribution, Operating
UCF College of Medicine Health Sciences Campus at Lake Nona 6850 Lake Nona Boulevard 3rd Floor Orlando, FL 32827	59-0799925	Governmental Entity	30,000				for the Diebel Legacy Fund Medical Samaritan Program
UCP of Central Florida Inc 1221 W Colonial Dr Suite 300 Orlando, FL 32804		501(C)(3)	37,715				East Orange building campaign, for the care and training of the children enrolled and who attend, 2013 Agency Endowment Distribution
United Arts of Central Florida Inc 2450 Maitland Center Parkway Suite 201 Maitland, FL 32751	59-1166446	501(c)(3)	5,000				as follows \$2,500 to the General Fund and \$2,500 designated to the Bach Festival Society
University of Central Florida Foundation Inc 12424 Research Parkway Suite 250 Orlando, FL 32826	59-6211832	501(c)(3)	12,620				Pine Hills Nutrition Study, to Public Administration for the sponsorship of three students for the Public Administration Research
Valencia College Foundation Inc 190 S Orange Avenue Orlando, FL 32801	23-7442785	501(c)(3)	5,500				Tina's Heart Memorial Scholarship, Orange County Take Stock in Children for the 2013 Take Stock in Children Golf Tournament
Washington High School 1111 South Ave B Washington, IA 52353	59-0794396	Governmental Entity	10,000				This grant will transform the WHS library/media room
Winter Park Library Assn 460 E New England Avenue Winter Park, FL 32789		501(c)(3)	31,956				Operating costs, Annual distribution
Winter Park Memorial Hospital 200 N Lakemont Avenue Winter Park, FL 32792	59-3143908	501(c)(3)	55,351				Annual distribution, Help and assistance of the African-American population of the City of Winter Park, To support programs and facilities

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 non-cash assistance	(h) Purpose of grant or assistance
Woman's Club of Winter Park Scholarship Fund PO Box 1433 Winter Park, FL 32790	23-7010314	501(C)(3)	21,670				Annual Distribution

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2012

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number

59-3182886

Part I Questions Regarding Compensation

- 1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

- a** The organization?
- b** Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARK BREWER PRESIDENT/CEO	(i)	137,483	0	0	0	14,143	151,626	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2012

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization: COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number: 59-3182886

Part I Types of Property

Table with 4 columns: (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. Row 9 is filled with 'X', '3', '186,486', and 'Average FMV on gift date'.

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 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?
b If "Yes," describe the arrangement in Part II
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?
b If "Yes," describe in Part II
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Table with 3 columns: Question, Yes, No. Rows 30a, 31, 32a are filled with 'No', 'Yes', and 'No' respectively.

Part III **Supplemental Information.** Complete this part to 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.

Identifier

Return Reference

Explanation

Schedule M (Form 990) (2012)

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 to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2012

**Open to Public
Inspection**

Name of the organization
COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number

59-3182886

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 11	The Audit Committee reviews Form 990 and recommends it for approval to the Foundation's Board of Directors. A copy of the Form 990 was provided to the Board of Directors for their review, as part of the board agenda for its August 2013 meeting.
	Form 990, Part VI, Section B, line 12c	The organization's conflict of interest policy disclosure statement is completed annually by board and committee members. Updates are made throughout the year as circumstances warrant. Staff and committee chairs monitor compliance with the policy as potential conflicts arise.
	Form 990, Part VI, Section B, line 15a	The President/CEO's salary is reviewed and approved by the board of directors. Sector based data is used to determine the comparability of the salary to similar positions at similarly situated organizations. Written minutes of all board of directors meetings are kept.
	Form 990, Part VI, Section C, line 19	Governing documents, conflict of interest policy, and financial statements of the Community Foundation of Central Florida are made available upon request. These documents are also available on the organization's website.
Changes in Net Assets or Fund Balances	Form 990, Part XI, line 9	Change in Value - Split Interest Agreement 7,294

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2012

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

Employer identification number

59-3182886

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) N Donald Diebel Jr MD Good Samaritan Fund Inc 1150 Via Lugano Winter Park, FL 32789 20-0050131	Support Central Florida	FL	501c3	509a3 - I			No
(2) Isleworth Community Trust Inc 9350 Conroy Windermere Road Windermere, FL 34786 20-3507903	Support Central Florida	FL	501c3	509a3 - I			No
(3) Lake Community Foundation Inc PO Box 1060 Eustis, FL 32727 51-0497006	Support Central Florida	FL	501c3	509a3 - I			No
(4) 1904 Foundation Inc PO Box 40 Winter Park, FL 32790 06-1669947	Support Central Florida	FL	501c3	509a3 - II			No

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l		No
1m		No
1n		No
1o		No
1p		No
1q	Yes	
1r		No
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NO REPORTABLE TRANSACTIONS			

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Software ID:
Software Version:
EIN: 59-3182886
Name: COMMUNITY FOUNDATION OF CENTRAL FLORIDA INC

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