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Form **990**

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)

OMB No 1545-0047

Department of the Treasury Internal Berginue Service

132001 01-23-12

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

Open to Public Inspection

AF	or the 2	2011 calendar year, or tax year beginning $$	nding <u>J</u>	UN 30, 2012					
B C	heck if	C Name of organization	_	D Employer identific	ation number				
	Address change	COMMUNITY FOUNDATION OF BROWARD, INC.							
	Name change	Doing Business As		59-2477112					
	Initial return Termin- ated		oom/suite 00	E Telephone number (954)	761-9503				
	Amender return	City or town, state or country, and ZIP + 4		G Gross receipts \$	44,505,005.				
	Applica- tion pending	FORT LAUDERDALE, FL 33301		H(a) is this a group re					
	, .	F Name and address of principal officer:LINDA B CARTER		for affiliates?	Yes X No				
		SAME AS C ABOVE npt status:	527	H(b) Are all affiliates incl	uded? Yes No list (see instructions)				
		: ► WWW.CFBROWARD.ORG	<u> </u>	H(c) Group exemption					
		rganization X Corporation	L Year		State of legal domicile FL				
	rt I	Summary							
9	1 B	riefly describe the organization's mission or most significant activities: SEE A	TTACH	ED STATEMEN	г #1.				
Activities & Governance	_								
ern		theck this box 🕨 📖 if the organization discontinued its operations or dispose	ed of more						
8		lumber of voting members of the governing body (Part VI, line 1a)		3	20				
જ		lumber of independent voting members of the governing body (Part VI, line 1b)		4	12				
ties		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	50				
ξį		otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
¥	l	let unrelated business texable income from Form 990-T, line 34		7b	-1,284.				
	<u> </u>	tet difficiated busiless takabe moorne month of the original or		Prior Year	Current Year				
ø.	8 C	Contributions and grants (Part All Line 18)		8,010,411.	7,482,491.				
Revenue	ı	Program service revenue (Part VIII, line 2g)		0.	0.				
eve	10 Ir	nvestment income (Part VIII (column (A), lines 3, 4, and 7d)		3,566,226.	3,210,232.				
Œ	11 C	Other revenue (Part Will column (A), lines 5,6d, 8c,96,10c, and 11e)		33,581.	36,358.				
		otal revenue - add (nes 8 through 11 (must equal Part VIII, column (A), line 12)		11,610,218.	10,729,081.				
	1	Grants and similar amounts paid Part X, column (A), lines 1-3)		4,685,441.	4,632,340.				
		Benefits paid to or for members (Part IX, column (A), tine 4)		1 092 265	1 152 442				
Ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	1,082,265.	1,153,442.				
Expenses		Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	0.	0.					
EX		otal fundraising expenses (Part IX, column (D), line 25) 467, 44 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	Ŭ•	1,085,122.	1,166,163.				
		ottal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		6,852,828.	6,951,945.				
	19 F	Revenue less expenses. Subtract line 18 from line 12	<u> </u>	4,757,390.	3,777,136.				
Net Assets or Fund Balances			Be	ginning of Current Year	End of Year				
sets alan	20 T	otal assets (Part X, line 16)	1	00,037,788.	99,120,940.				
A A B	21 T	otal liabilities (Part X, line 26)	_	13,095,323.	15,887,732.				
S	22 N	Net assets or fund balances. Subtract line 21 from line 20		86,942,465.	83,233,208.				
P	art II	Signature Block							
Jund	er penali	ties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	nents, and to the best of m	y knowledge and beliet, it is				
	`	, and complete Declaration of preparer (other than officer) is based on all information of whi	cii prepare		13				
	_	Signature of officer		Date	<u> </u>				
	<u>"</u>	LINDA B CARTER, PRESIDENT/CEO							
		Type or print name and title							
्रो		Print/Type preparer's name Preparer's signature	_	Date Check	PTIN				
O'Sig Willer Pair	ı [:	ISRAEL J. GOMEZ	PA	2.6.13 If self-employ					
				S Firm's EIN	59-1363792				
Use	Only	11111 3 ddd 1033	10		F.4. 881. 0006				
		FT. LAUDERDALE, FL 33308		Phone no 9	54-771-0896				
Mar	v the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No				

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		Х
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			.,
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		v	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
•	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	<u> </u>
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 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	<u>X</u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_^_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	 ' ' ' 		
120	Schedule D, Parts XI, XII, and XIII	12a	Х	İ
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	<u> </u>	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	 		v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
4.0	·	13		
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? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			1
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	
	complete Schedule G, Part III	19	_	X
20a		20a	├	X
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(2011)

COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 Form 990 (2011) Part IV Checklist of Required Schedules (continued) Yes No 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? If "Yes," complete Schedule I. Parts I and II X 21 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? If "Yes," complete Schedule I, Parts I and III 22 Х 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? If "Yes," complete X Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х Schedule K. If "No", go to line 25 24a 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 Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X Schedule L, Part I 25b 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes." complete Schedule L. Part II 26 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 27 Х of any of these persons? If "Yes," complete Schedule L, Part III 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): 28a a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X 28c director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Х 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? 34 If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of X section 512(b)(13)? If "Yes," complete Schedule R. Part V, line 2 35ь

38 X Form 990 (2011)

36

37

Х

X

36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

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? If "Yes," complete Schedule R, Part VI
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2	2011) COMMUNITY	FOUNDATION	OF	BROWARD,	INC.	59-2477112	Pa	age
Part V	Statements Regarding Other	IRS Filings and 1	Гах (Compliance				
	Check if Schedule O contains a respo	nse to any question in	this F	Part V				
	•	· · · · · · · · · · · · · · · · · · ·					Vac	No

	Officer if Schedule S contains a response to any question in this rail v		26	كيا
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 19		Yes	No
1a b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return . 2a 12			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	Х	1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			v
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	<u> X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		\vdash
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			x
	to file Form 8282?	7c	ļ	<u>^</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.		X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	1	 -
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>9</u>		
_	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			1
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		x
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	1	X
ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	ļ	ļ	1
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	ļ	<u>, </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	4		
	Enter the amount of reserves on hand	 	<u> </u>	1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	┼—	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(2011)
		Forn	, uui)	7201111

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

	Check if Schedule O contains a response to any question in this Part VI		"			
<u> 26C</u>	tion A. Governing Body and Management				V	
4	Enter the number of voting members of the neverting hady at the and of the Assessment	1	20		Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year	1a	20			
	If there are material differences in voting rights among members of the governing body, or if the governing	1				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0	16	20			
2	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship.	1b	I			
_	officer, director, trustee, or key employee?	iip witti	arry other	2		х
3	Did the organization delegate control over management duties customarily performed by or under the	ha dira	et eupendelen	-	-	
J	of officers, directors, or trustees, or key employees to a management company or other person?	iic direc	ot supervision	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form	990 w	e filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as		13 mca :	5		X
6	Did the organization have members or stockholders?			6		Х
	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or			
	more members of the governing body?			7a	,	х
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?		,	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	e following			
а	The governing body?	·	·	8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	ore filing the form?	11a	X	ļ
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a				12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	_X_	ļ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," a	'escribe		17	
	in Schedule O how this was done			12c	X	-
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approve		ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	7			v	İ
a	The organization's CEO, Executive Director, or top management official			15a	X	
D	Other officers or key employees of the organization ,			15b	Α	
18-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	amont .	with a			
100	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange taxable entity during the year?	oment \	with a	16a		х
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu	ate ito i	narticination	a		···
,	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to evalu		•			
	exempt status with respect to such arrangements?		···· ·	16b		1
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶FL				-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-T (Sec	tion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply. X Own website X Another's website Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy, an	d finar	icial	
	statements available to the public during the tax year.		penejj un			
20	State the name, physical address, and telephone number of the person who possesses the books MICHAEL VIZZI - (954)761-9503	and rec	ords of the organiza	tion: ▶		
	910 EAST LAS OLAS BLVD, NO. 200, FORT LAUDERDALE,	FL	33301			
13200 01-23-				Form	990	(2011)

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.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)	orga	ınıza	illon (C		nper	ısaı	(D)	(E)	(F)
Name and Title	Average hours per week	box	Position do not check more the lox, unless person is officer and a director/i				h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	жеу еттріоуте	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) RICHARD BERKOWITZ	2 00	Х		x				0.	0.	0.
CHAIR	2.00	^		^	-	<u> </u>		· · · · · · · · · · · · · · · · · · ·	0.	
(2) DR. WENDY MASI	2.00	X		X	ļ			0.	0.	0.
VICE CHAIR	2.00	^		^	-	┢	┢	· · · · · · · · · · · · · · · · · · ·		
(3) KAREN MITCHELL CURRAN TREASURER	2.00	x		X			Ì	0.	0.	0.
(4) JAMES LABATE	2.00	23		125		┢	╁			
SECRETARY	2.00	X		х				0.	0.	0.
(5) JOAN CRAIN										
BOARD MEMBER	2.00	X	i					0.	0.	0.
(6) BERNIE FERNANDEZ, M.D.				 						
BOARD MEMBER	2.00	X						0.	0.	0.
(7) JANET JORDAN										
BOARD MEMBER	2.00	X						0.	0.	0.
(8) ARMANDO LEIGHTON, JR.										
BOARD MEMBER	2.00	X						0.	0.	0.
(9) ALAN LEVY					1					
BOARD MEMBER	2.00	X						0.	0.	0.
(10) JAMES MONROE								_	_	_
BOARD MEMBER	2.00	X	<u> </u>	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(11) JACQUELYN ROGOW							-			
BOARD MEMBER	2.00	X		_		<u> </u>	_	0.	0.	0.
(12) TONY SEGRETO				1			ŀ			
BOARD MEMBER	2.00	X	┞	_	_	├	┞	0.	0.	0.
(13) WILLIAM SNYDER	1 2 20	,,								_
BOARD MEMBER	2.00	X	├-	-	<u> </u>	-	├-	0.	0.	0.
(14) RAYMOND SOUTHERN	2 00	v						0.	0.	0.
BOARD MEMBER	2.00	X	-	ļ	⊢	┼	-	<u> </u>	0.	<u> </u>
(15) PAUL TANNER	2.00	x						0.	0.	0.
BOARD MEMBER	- 2.00	┼^	\vdash	+	-	\vdash	+-	1		
(16) GARY BITNER	2.00	X					1	0.	0.	0.
BOARD MEMBER	2.00	↑	┼─	+	-	+	\vdash	 		
(17) FRANCIE BISHOP GOOD BOARD MEMBER	2.00	x						0.	0.	0.
122007 01 22 12	, 2:00	1 **						<u></u>		Form 990 (2011)

132007 01-23-12

COMMUNITY FOUNDATION OF BROWARD, INC.

Form 990 (2011) COMMUNIT	Y FOUNDA	AT.	101	1 (<u>OF</u>	BI	<u> 201</u>	WARD, INC.	<u> </u>	<u>.77</u>	<u>112</u>	Pa	2ge 8
Part VII Section A. Officers, Directors, Tri		nplo	yee	s, a	nd l	High	est	Compensated Emp	oyees (continued)				
(A) Name and title	(B) Average hours per week	offic	not c	Pos heck ss pe	rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related		Esti amo	(F) mate ount o ther	-
	(describe hours for related organizations in Schedule organizations in Schedule organizations in Schedule organizations in Schedule organizations in Schedule organizations in Schedule organizations in Schedule organization org		the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		orga	m the nizati relate	ed					
(18) NANCY BLOSSER	2.00	х								0.			0.
BOARD MEMBER (19) MARGARITA CASTELLON	2.00	^	-	-	┼─	\vdash	-			-			•
BOARD MEMBER	2.00	X								0.			0.
(20) KATHERINE EGGLESTON													
BOARD MEMBER	2.00	X	<u> </u>			<u> </u>	ļ	() •	0.			0.
(21) LINDA B. CARTER	40.00			,				174 100	,		1 /	2	0.2
PRESIDENT/CEO	40.00	-	├	X		+	-	174,108) •	0.	14	. , Z	83.
		ļ <u>-</u>	ļ								-		
			_			_				,			
-								-					
1b Sub-total		J		Ц.,.		┪	1	174,108	3.	0.	14	1,2	83.
c Total from continuation sheets to Part V	II, Section A) .	0.			0.
d Total (add lines 1b and 1c)						<u> </u>		174,108		0.	14	1,2	83.
2 Total number of individuals (including but	not limited to ti	hose	e list	ed a	abov	e) w	ho r	received more than \$	100,000 of reportable	e			1
compensation from the organization												Yes	No
3 Did the organization list any former officer			e, k	еу е	mpl	oyee	, or	highest compensate	d employee on				х
line 1a? If "Yes," complete Schedule J for 4 For any individual listed on line 1a, is the s			omr	ene	atio	n an	d of	ther compensation fro	om the organization		3		
and related organizations greater than \$15									m the organization		4	X]
5 Did any person listed on line 1a receive or			-						dividual for services				
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	uch	per	rson					5		X
Section B. Independent Contractors													
1 Complete this table for your five highest c										pens	ation fr	om	
the organization. Report compensation for	r the calendar	/ear	ena	ing	with	or v	vitni	n the organization's t			(C	`	
(A) Name and busines	s address							Description		C	comper		n
FORT LAUDERDALE BROWARD, LLC, 1 EAST													
BROWARD BLVD, # 700, FOR	T LAUDE	RD.	AL	E,	F	L		RENT			126	5,4	19.
													
				_			_						
			-			-							
2 Total number of independent contractors	(including but	not !	lmite		n the	nse l	iste	d above) who receive	d more than				

Form **990** (2011)

\$100,000 of compensation from the organization

L	•				(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, Giffs, Grants and Other Similar Amounts	1 a	Federated campaigns Membership dues	1a 1b					
A ts	c	Fundraising events	1c					
<u> </u>	đ	Related organizations	1d					
Sign	е	Government grants (contributi						
흥합	f	All other contributions, gifts, grant		7400401		,		
흕뒴		similar amounts not included above		7482491.				
달	9	Noncash contributions included in lines	1a-1f \$	372 , 065.	7400401			
<u>0 e</u>	<u> </u>	Total. Add lines 1a-1f	1	•	7482491.			
	_			Business Code				
, <u>ĕ</u>	2 a							
E S	b		_					
ΕŞ	C							
6	d							
Program Service Revenue	e 4	All other program service reve						
-	a		illue	•				
\dashv	3	Investment income (including	dividends intere					
	Ū	other similar amounts)	arridorido, intere	→	1909823.			1,909,823.
	4	Income from investment of tax	x-exempt bond p	roceeds				
	5	Royalties	, chemp, ceme p	>				
	•	,	(ı) Real	(II) Personal				
	6 a	Gross rents						
l	Ь	Less: rental expenses						
ļ		Rental income or (loss)						
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(iı) Other				
		assets other than inventory	35,076,333.					
	b	Less: cost or other basis						
		and sales expenses	33,767,434.					
	С	: Gain or (loss)	1,308,899.	-8,490.				
	d	Net gain or (loss)			1300409.			1,300,409.
e	8 a	Gross income from fundraising	g events (not					
eu		including \$	of					
Other Reven		contributions reported on line	1c). See					
ē		Part IV, line 18	а					
뒿		Less: direct expenses	ь	L				
		Net income or (loss) from fund	-	<u> </u>			-	
	9 a	Gross income from gaming ac						
		Part IV, line 19	a .					
		Less: direct expenses	b	L				
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less						
		and allowances Less. cost of goods sold	a b					
1			_	<u> </u>			•	
1		 Net income or (loss) from sale Miscellaneous Revenu 		Business Code				
	11 a	FEES		900099	36,358.	36,358.		
	II a					1 2 7 2 0 2	 	
	~	·					 	
	d	All other revenue					<u> </u>	
	e	Total. Add lines 11a-11d			36,358.			
	12	Total revenue. See instructions			10,729,081.		0.	3,210,232.
13200 01-23)9 -12							Form 990 (2011)

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) but are not required to complete columns (B), (C), and (D).

not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and	4 632 340			
· · · · · · · · · · · · · · · · · · ·	4,032,340.	4,032,340.		
1				
·			·····	
- ·				
ρ				
		-		
·	289,610.	46.874	160.035.	82,70
				02770
	672,243.	331,878,	117,297	223,068
· · · · · · · · · · · · · · · · · · ·		33273.33	12,72,70	220,000
	21.086	8,303	6.080	6.703
The state of the s				6,703 30,752
· · · · · · · · · · · · · · · · · · ·				23,450
· ·	,,,,,,,	23,0101	21/2031	23,13
*	9,336.		9,336.	
· ·				
	3373331			
· · · · · · · · · · · · · · · · · · ·	358,919		358,919	
		165,159,		
				28,659
- · ·				9,480
·				11,710
-		,		
	232,369.	141,744.	67,387.	23,238
				330
<u></u>				
· ·				
	4,088.	1.594.	1,186,	1,308
·		2/0320	1/1000	
			· · · · · · · · · · · · · · · · · · ·	,
· · · · · · · · · · · · · · · · · · ·	11,951.	3,824.	4.661.	3,466
		-,	-/	
above (List miscellaneous expenses in line 24e If line				
24e amount exceeds 10% of line 25, column (A)				
	73,070.	61.577.	11,493,	
				18,999
				20,333
				_
				3,576
·				467,440
Joint costs. Complete this line only if the organization	-,,,-		333,337.	207721
			1	
reported in column (R) joint costs from a combined	l	I	1	
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroli taxes Fees for services (non-employees): Management Legal Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation ont included above, to disqualfiled persons (as defined under section 4958(n)(1)) and persons described in section 4958(c)(3)(B) Other salanes and wages Pension plan accruals and contributions (include section 401(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees): Management Legal Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses llemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0) DIRECT FUND EXPENSES PRINTING DUES & SUBSCRIPTIONS LICENSES & PERMITS All other expenses	Carst and other assistance to governments and organizations in the United States. See Part IV, line 21 4,632,340. 4,	Cardia and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, line 18 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1)) and persons described in section 4958(f)(1) and persons 49, 612, 243, 331, 878. 117, 7297. 117, 297. 117

Par	t X	Balance Sheet		_		
				(A) Beginning of year	·	(B) End of year
	1	Cash - non-interest-bearing		135,718.	1	334,617.
	2	Savings and temporary cash investments			2	277,144.
	3	Pledges and grants receivable, net		375.	3	550,098.
	4	Accounts receivable, net	·	271,990.	4	93,881.
	5	Receivables from current and former officers, di	ectors, trustees, kev			
		employees, and highest compensated employee				
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section	·····		14 (14 (14 (14 (14 (14 (14 (14 (14 (14 (
	_	4958(f)(1)), persons described in section 4958(c)				
		employers and sponsoring organizations of sect				
		employees' beneficiary organizations (see instru			6	
Assets	7	Notes and loans receivable, net	,		7	
SSI	8	Inventories for sale or use			8	
•	9	Prepaid expenses and deferred charges		98,436.	9	55,962.
		Land, buildings, and equipment: cost or other	1 1			······································
		basis. Complete Part VI of Schedule D	10a 325,828	•		
	ь	Less: accumulated depreciation	10b 70,091	26,006.	10c	255,737.
	11	Investments - publicly traded securities		78,622,636.	11	255,737. 71,074,553.
	12	Investments - other securities. See Part IV, line 1	1	16,470,261.	12	23,883,543.
	13	Investments - program-related. See Part IV, line		2,300,000.		2,180,000.
	14	Intangible assets	•		14	
	15	Other assets. See Part IV, line 11	2,112,366.	15	415,405.	
	16	Total assets. Add lines 1 through 15 (must equ.	100,037,788.		99,120,940.	
	17	Accounts payable and accrued expenses	89,566.		205,727.	
	18	Grants payable		616,834.		1,048,292.
	19	Deferred revenue	76,891.	19	64,272.	
	20	Tax-exempt bond liabilities			20	
s	21	Escrow or custodial account liability. Complete	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director				
ğ		highest compensated employees, and disqualifi				
Ë		of Schedule L			22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, pa				
		parties, and other liabilities not included on lines				
		Schedule D	,	12,312,032.		14,569,441.
	26	Total liabilities. Add lines 17 through 25		13,095,323.	26	15,887,732.
		Organizations that follow SFAS 117, check he	ere X and complete			
Ś		lines 27 through 29, and lines 33 and 34.				
ĕ	27	Unrestricted net assets		84,393,237.	27	81,801,226.
ala	28	Temporarily restricted net assets		2,549,228.	28	1,431,982.
В	29	Permanently restricted net assets			29	
Ë		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and			
5		complete lines 30 through 34.				
sts	30	Capital stock or trust principal, or current funds			30	
SSE	31	Paid-in or capital surplus, or land, building, or ed	juipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			32	
ž	33	Total net assets or fund balances		86,942,465.	33	83,233,208.
	34	Total liabilities and net assets/fund balances		100,037,788.		99,120,940.

Form 990 (2011)

	•				1	?
Form	990 (2011) COMMUNITY FOUNDATION OF BROWARD, INC.	_59-	<u>-2477</u>	112	Pag	_{1e} 12
Pa	Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				_	X
	,					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,72		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,95		
3	Revenue less expenses. Subtract line 2 from line 1	3	3	,77	7,1	36.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	86	,94	$2,\overline{4}$	65.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-7	,48	6,3	93.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	83	,23	3,2	08.
Pa	t 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: Cash X Accrual Other					
	if the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule ()			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt			
	Act and OMB Circular A·133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ıred au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b		

Form **990** (2011)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number

				TY FOUNDATIO						55	9-2477112		
Pa	rt I	Reason	or Public Chari	ty Status (All organization	ations mus	t complet	e this part	.) See inst	ructions.				
The	he organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)												
1	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 hospit	al service organization o	lescribed i	n section	170(b)(1)(A)(iii).					
4		A medical res	earch organization of	perated in conjunction v	with a hosi	ortal descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter t	he hospital's name,		
		city, and state	ə:		•						·		
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).												
	$\overline{\mathbf{x}}$												
•		-	b)(1)(A)(vi). (Complet		or its supp	on nom a	governine	intai oint o	i iioiii tiie	generar	public described in		
8				ection 170(b)(1)(A)(vi). (Complete	Dart II \							
9	\equiv	-				•	om contri	butions m	ombombu	a food or	ad aross resolate from		
9		-	•	eives: (1) more than 33 1					•				
			· · · · · · · · · · · · · · · · · · ·	nctions - subject to certa									
				axable income (less sect	ion o i i (a)	y irom bu:	511165565 8	icquirea b	y ine orga	mzallon 8	aitei Julie 30, 19/3.		
40			509(a)(2). (Complete		at far aribli	a anfatu. S		- E00/-\/A	11				
10	\vdash	_		perated exclusively to tes	-								
11	ш	•		perated exclusively for the		•			•				
		•		itions described in section		•		.). See se c	ition 509(a	a)(3). One	eck the box that		
			· · · · · · · · · · · · · · · · · · ·	organization and comple		-					Turne III. Other		
		a Type I		- ,,	• •		tionally int	-		O 	Type III - Other		
е		-	•	t the organization is not		-	-	-					
				han one or more publicly						(a)(1) or	section 509(a)(2).		
f		-		ten determination from t	ne IHS tha	ππsaιy	pe I, Type	II, or Type	9 111				
			rganization, check th		.01								
8	ı			organization accepted an									
		**	· ·	rectly controls, either al	one or tog	etner with	persons c	iescribed i	n (II) and (I	III) below,			
		-		upported organization?							11g(i)		
			•	described in (i) above?		•					11g(ii)		
				person described in (i) o							11g(iii)		
h	1	Provide the f	ollowing information	about the supported org	ganization(s).							
				(iii) Type of	kina ia an		(n) Did		(vi) Is	the I			
(i		of supported	(ii) EIN	organization	(IV) IS the o in col (i) lis		(v) Did you organizat		organizatio	on in col	(vii) Amount of		
	orga	anization		(described on lines 1-9	governing			support?	(i) organiz U S	ed in the ?	support		
				above or IRC section (see instructions))		No	Yes		Yes	No			
				(300 1134146110113))	Yes	140	162	No	162	140			
										1 1			
	_					· · —				 			
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Form 990 or 990-EZ.

2011.05020 COMMUNITY FOUNDATION OF BRO F5924771

Schedule A (Form 990 or 990-EZ) 2011

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2011 COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	17,185,079.	5,359,929.	11,550,490.	8,010,411.	7,482,491.	49,588,400.
2	Tax revenues levied for the organ-						
	ization'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	17,185,079.	5,359,929.	11,550,490.	8,010,411.	7,482,491.	49,588,400.
	The portion of total contributions		,	•	······································		
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included		1				
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						14,794,876.
6	Public support. Subtract line 5 from line 4	***************************************	***************************************	terrolius Herendelor I I - I	***************************************		34,793,524.
	ction B. Total Support	<u> </u>	<u></u>			L	30,100,000.
	indar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	17,185,079.	5,359,929.	11,550,490.	8,010,411.	7,482,491.	49,588,400.
8	Gross income from interest,		7.000	00,000,000,	-,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,101,595.	923,125.	939,760.	1,369,345.	1,642,500.	5,976,325.
9	Net income from unrelated business	7,202,000.	, - <u>-</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,002,010.	2,002,000	0,010,020.
·	activities, whether or not the			11			
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)	928.939.	951,725.	1,050,049.	1,191,692.	1,129,493.	5,251,898.
11		320,303.		1,030,013.	1,131,032.	1,123,233.	60,816,623.
12	Gross receipts from related activities,	etc /see instruction		ii.		12	00,010,023.
13	-		*	d fourth or fifth to	v vear as a sectio	L. · · - 1	
10	organization, check this box and stor		s mat, second, time	a, louitii, or mili ta	A year as a section	11 30 1 (0)(3)	▶□
Se	ction C. Computation of Publ		rcentage	-			
	Public support percentage for 2011 (=-	column (fl)		14	57.21 %
	Public support percentage from 2010		•	(1)		15	54.72 %
	33 1/3% support test - 2011. If the			n line 13 and line 1	14 is 33 1/3% or n		
100	stop here. The organization qualifies	_			14 13 00 170 70 01 1	nore, crieck this bo	► X
	33 1/3% support test - 2010. If the		_		line 15 ie 33 1/3%	or more check th	
•	and stop here. The organization qual	_			1116 13 13 33 1737	or more, check th	▶ □
17-	and stop here. The organization qual 10% -facts-and-circumstances tes				13 16a or 16h	and line 14 is 10%	or more
	and if the organization meets the "fac	_					
						it iv now the organ	ization -
	meets the "facts-and-circumstances"	-	•		-	17a, and line 15 in 1	10% or
	10% -facts-and-circumstances tes	-					
	more, and if the organization meets the				· ·		_
18	organization meets the "facts-and-circ Private foundation. If the organization						
10	Fire organization. If the organization	ni dia noi check a	DOX OIT HITE TO, TO	a, 100, 17 a , 01 170		dule A (Form 990	

Schedule A (Form 990 or 990-EZ) 2011 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.)

Se	ction A. Public Support	-						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 per-							
	formed, or facilities furnished in	'				ł		
	any activity that is related to the organization's tax-exempt purpose					ĺ		
3	Gross receipts from activities that							
_	are not an unrelated trade or bus-							
	iness under section 513					l .		
4	Tax revenues levied for the organ-					<u> </u>		
•	ization's benefit and either paid to							
	·					1		
_	or expended on its behalf					1		
5	The value of services or facilities					l		
	furnished by a governmental unit to							
_	the organization without charge		 			-		
	Total. Add lines 1 through 5					ļ		
7:	Amounts included on lines 1, 2, and		1	•				
	3 received from disqualified persons				-			
ı	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					<u> </u>		
•	Add lines 7a and 7b				ļ	ļ.,,		
8	Public support (Subtract line 7c from line 6)		1					
Se	ction B. Total Support					·		
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010_	(2011	(f) Total
9	Amounts from line 6							
10	a Gross income from interest,							
	dividends, payments received on securities loans, rents, royalties							
	and income from similar sources					1		ļ
1	b Unrelated business taxable income	-						
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
	c Add lines 10a and 10b					† 		
11					 	<u> </u>		
•	activities not included in line 10b,			•				}
	whether or not the business is							
12	regularly carried on Other income. Do not include gain		-	 	 	+		
	or loss from the sale of capital							
	assets (Explain in Part IV.)		-	1	+	+		+
	Total support (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>			524	(-)(O)	
14	First five years. If the Form 990 is fo	r the organization'	s first, second, thi	ra, tourth, or lifth	tax year as a section	on 501((၁)(၁) organi	zation,
<u> </u>	check this box and stop here	is Current D-						
	ction C. Computation of Publ					1=	-	
	Public support percentage for 2011 (• • • • • • • • • • • • • • • • • • • •	<u> </u>	column (f))		15 16		<u>%</u> %
	Public support percentage from 2010	·			·	110		
_	ction D. Computation of Inve					1.7		
	Investment income percentage for 20			ne 13, column (t))		17		%
	Investment income percentage from				45	18	1/	47 :
19	a 33 1/3% support tests - 2011. If the						%, and line	17 IS NOT
	more than 33 1/3%, check this box a		-				00 4 500	. ▶□
	b 33 1/3% support tests - 2010. If the							
	line 18 is not more than 33 1/3%, che							
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check	this box and see in	structi	ons	P

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► 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.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

		ON OF BROWARD, INC.	59-2477112
Par			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	86	316
2	Aggregate contributions to (during year)	1,151,040.	6,414,759.
3	Aggregate grants from (during year)	1,470,561.	3,184,236.
4	Aggregate value at end of year	14,160,796.	83,668,807.
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	
	are the organization's property, subject to the organization's		X Yes No
6	Did the organization inform all grantees, donors, and donor a		-
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	
_	impermissible private benefit?		X Yes No
Par	Will all the second sec		/, line 7.
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		
	Protection of natural habitat	Preservation of a certified I	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
Þ	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic sti	* *	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	anization during the tax
	year ▶	And Income of N	
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		Yes No
	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting. Amount of expenses incurred in monitoring, inspecting, and		
7			
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(ii)(4)	Yes No
9	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservat	tion agreements in its revenue and expense stat	
•	include, if applicable, the text of the footnote to the organization		
		ation 5 infancial statements that describes the c	riganization 3 accounting to
Pa	conservation easements.	of Art. Historical Treasures, or Other	r Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (A		and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descri		,
ь	If the organization elected, as permitted under SFAS 116 (A)		balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	, , , , , , , , , , , , , , , , , , , ,	3
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial dair	
-	the following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
ь	Assets included in Form 990, Part X		► \$ ► \$
		·	

Schedule D (Form 990) 2011

Sched	dule D (Form 990) 2011 COMMUNI	TY FOUNDAT	ION OF BRO	WARD,	INC.	5	9-24	77112	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, c	or Other				
3	Using the organization's acquisition, accessing	on, and other records	s, check any of the	following tha	t are a sigr	nificant us	e of its	collection	rtems
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange progra	ams				
b	Scholarly research	е	Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further the	ne organizati	on's exem _i	pt purpos	e ın Part	XIV.	
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or oth	er simılar a	ssets			
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	llection?				Yes	☐ No
Par	Escrow and Custodial Arran reported an amount on Form 990, Par		te if the organizatio	n answered	"Yes" to Fo	orm 990, I	Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other as	sets not in	cluded			
	on Form 990, Part X?		•					Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fol	lowing table:						
		•	· ·					Amount	,
С	Beginning balance					1c			-
	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					Yes	□ No
	If "Yes," explain the arrangement in Part XIV.								
Par			swered "Yes" to Fo	rm 990, Part	IV, line 10				
		(a) Current year	(b) Prior year	(c) Two year	rs back (d) Three yea	ars back	(e) Four	years back
1a	Beginning of year balance	84,413,741.	71,877,100.	60,68		71,82			1
ь	Contributions	5,360,797.	6,040,594.		7,596.		9,774.	 	, , , , , , , , ,
c	Net investment earnings, gains, and losses	-1,928,576.	10,855,557.		1,678.	-11,43			
d	Grants or scholarships	2,956,973.	3,026,524.	1	8,664.		6,551.	···· ·····	
	Other expenditures for facilities		, ,	1	-1				
•	and programs	298,306.	318,406.	21	4,476.	25	0,721.		
f	Administrative expenses	1,195,674.	1,014,580.		8,345.		8,555.		
	End of year balance	83,395,009.	84,413,741.		7,100.		9,311.		
2	Provide the estimated percentage of the cur			<u> </u>				L	
a	Board designated or quasi-endowment		%	-,,					
b	Permanent endowment ▶	%							
	Temporarily restricted endowment ▶	%							
•	The percentages in lines 2a, 2b, and 2c show								
3a	Are there endowment funds not in the posse		ation that are held a	nd administe	ered for the	organiza	tion		
	by:							Γ	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	Х
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	n Schedule R?					3b	
4	Describe in Part XIV the intended uses of the	·						L == 1	. <u>I</u>
	t VI Land, Buildings, and Equipm							·····	
L <u></u>	Description of property	(a) Cost or of		or other	(c) Acc	umulated		(d) Book	value
	bosonphon of proporty	basis (investri	1	(other)		eciation		(4, 500	
1a	Land	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· · · ·	•				<u> </u>
	Buildings	-							
	Leasehold improvements		2.2	2,853.		2,99	2.	219	861.
	Equipment			7,971.		39,68			3,286.
	Other			5,004.		27,41			7,590.
	I. Add lines 1a through 1e. (Column (d) must e	equal Form 990. Part	• •	<u> </u>	•		<u> </u>		737.

Schedule D (Form 990) 2011

(a) Description of liability (b) Book value

(1) Federal income taxes
(2) AGENCY TRANSACTION PAYABLE 14,569,441.

(3)
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

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

FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under 15th 48 (ASC 740)

2. FIN 48 (ASC 740) 132053 01-23-12

	dule D (Form 990) 2011 COMMUNITY FOUNDATION OF BR				2477112	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited	Financial State	men		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		10,729	
2	Total expenses (Form 990, Part IX, column (A), line 25)		. 2		6,951	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		3,777	<u>,136.</u>
4	Net unrealized gains (losses) on investments		4		-4,712	<u>,730.</u>
5	Donated services and use of facilities .		5		<u> </u>	
6	Investment expenses		6			
7	Prior period adjustments .		7			
8	Other (Describe in Part XIV.)		8		-2 , 773	663.
9	Total adjustments (net). Add lines 4 through 8		9		-7,486	,393.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar	nd 9	10		-3,709	,257.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With	Revenue per R	leturr		
1	Total revenue, gains, and other support per audited financial statements			1	2,585	<u>,249.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a -	4,712,730.			
b	Donated services and use of facilities	2b				
C	Recoveries of prior year grants	2c] !		
d	Other (Describe in Part XIV.)	2d]		
е	Add lines 2a through 2d			2e	-4,712	,730.
3	Subtract line 2e from line 1			3	-4,712 7,297	979.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			77777		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	315,690.	.		
b	Other (Describe in Part XIV)	4ь	3,115,412.	.1 '		
С	Add lines 4a and 4b		····	4c	3,431	,102.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	10,729	,081.
Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per	Retu		
1	Total expenses and losses per audited financial statements		•	1	6,278	,538.
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		1 '		
c	Other losses	2c	· ·	┪ '		
ď	Other (Describe in Part XIV.)	2d	8,490.	1		
	Add lines 2a through 2d			2e	8	.490.
3	Subtract line 2e from line 1			3	6,270	.048.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				0,2,0	, 0 10 0
•	Investment expenses not included on Form 990, Part VIII, line 7b	40	315,690.			
a	,	4a 4b	366,207.			
0	Other (Describe in Part XIV.)	4D	300/201	7	681	,897.
	Add lines 4a and 4b Total superson Add lines 2 and 4a (This must asked Favor 900, Part I line 18.)			4c 5	6,951	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) TXIV Supplemental Information				0,001	, , , , , ,
		III linos 1s si	ad 4: Part IV Juneo 1	b and	Oh: Port V June	4: Port
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also com					4, Pan
Λ, ΙΙΙΙ	e 2, Part AI, line 6, Part AII, lines 20 and 40, and Part AIII, lines 20 and 40. Also com	piete this pa	rt to provide any ad	ultiona	ii iniormation.	
PAF	RT XI, LINE 8 - OTHER ADJUSTMENTS:					
	· · · · · · · · · · · · · · · · · · ·					
AGI	ENCY TRANSACTIONS				-2,757	,695.
					·	·
CHA	ANGE IN SPLIT-INTEREST AGREEMENTS				-15	,968.
TOT	TAL TO SCHEDULE D, PART XI, LINE 8				-2,773	<u>,663.</u>
		· · · · · · · · · · · · · · · · · · ·				
pΔī	RT XII, LINE 4B - OTHER ADJUSTMENTS:					
<u>r M</u>	CI AIL, DIND 4D - OTHER ADDUCTMENTS.					
<u>AG</u> I	ENCY TRANSACTIONS				3,123	<u>,902.</u>
13205	4			Sche	dule D (Form 9	90) 2011
01 00	10					

Schedule D (Form 990) 2011 COMMUNITY FOUNDATION OF BROWARD, INC. Part XIV Supplemental Information (continued)	59-2477112 Page 5
Part XIV Supplemental Information (continued)	
LOSS ON EQUIPMENT DISPOSAL	-8,490.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	2 115 412
TOTAL TO SCHEDULE D, PART XII, LINE 45	3,115,412.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
PART ATTI, LINE 2D - OTHER ADDUSTMENTS:	
LOSS ON EQUIPMENT DISPOSAL	8,490.
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
	266 207
AGENCY TRANSACTIONS	366,207.
	,

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

2011
Comen to Public inspection

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

▶ Attach to Form 990.

Schedule I (Form 990) (2011) ê [**Employer identification number** 59-2477112 (h) Purpose of grant or assistance X Yes 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. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government assistance assistance or government assistance assistance other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection Ö Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 3,694,393, COMMUNITY FOUNDATION OF BROWARD, INC. Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization SEE ATTACHED SCHEDULE #1 Name of the organization Parti Partil

Page 2

59-2477112

COMMUNITY FOUNDATION OF BROWARD, INC.

Schedule I (Form 990) (2011)
Part III Grants and Other

ł

Schedule I (Form 990) (2011)

26

132102 01-27-12

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

2011

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

COMMUNITY FOUNDATION OF BROWARD, INC.

Employer identification number 59-2477112

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.	No
Part VII. Section A line 1a. Complete Part III to provide any relevant information regarding these items.	
Tall VII, Geotion A, line 1a. Complete 1 at in to provide any relevant internation regarding trees notice.	
First-class or charter travel Housing allowance or residence for personal use	
Travel for companions Payments for business use of personal residence	
Tax indemnification and gross-up payments Health or social club dues or initiation fees	
Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	
b If any of the boxes on 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. Explain in Part III.	
Compensation committee Written employment contract	
Independent compensation consultant X Compensation survey or study	
Form 990 of other organizations X 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?	X
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	X
c Participate in, or receive payment from, an equity-based compensation arrangement?	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	
Only section 501(c)(3) and 501(c)(4) organizations 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?	X
b Any related organization?	X
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?	Х
b Any related organization?	X
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	Х
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	Х
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	
Regulations section 53.4958-6(c)?	

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

Schedule J (Form 990) 2011

59-2477112

Schedule J (Form 990) 2011 COMMUNITY FOUNDATION OF BROWARD, INC. 59–2477112

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.

		(B) Breakdown of W-2		and/or 1099-MISC compensation	(C)	Q	(9)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990
	9	174,108.	0	0	5,223.	.090,6	188,391.	0
1 LINDA B. CARTER	<u>(ii)</u>	0	0	0	0	0	0	
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SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	COMMUNITY FO	UNDATI	ON OF BRO	WARD,	INC.	59-2	477	112	
Par	Types of Property								
		(a) Check if applicable	(b) Number of contributions or tems contributed	Noncash amounts	(c) contribution reported on lart VIII, line 1g	Method of d noncash contrib	etermın		s
1	Art · Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications	L							
5	Clothing and household goods								
6	Cars and other vehicles .								
7	Boats and planes								
8	Intellectual property							_	
9	Securities - Publicly traded	X	8	3	72 , 065.	FAIR MARKET	' VA	LUE	
10	Securities - Closely held stock								
11	Securities · Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures				_				
14	Qualified conservation contribution - Other								
15	Real estate - Residential			_					
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory				 				
20	Drugs and medical supplies				<u>.</u>				
21	Taxidermy		4 -						
22	Historical artifacts								
23	Scientific specimens					ļ			
24	Archeological artifacts		ļ						
25	Other ()								
26	Other ()								
27	Other ()		·	·					
28	Other (l <u></u>	1						
29	Number of Forms 8283 received by the organi								
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29		•		T
								Yes	No
30a	During the year, did the organization receive b								
	at least three years from the date of the initial	contribution	i, and which is not	required to b	e used for exer	npt purposes for			v
	the entire holding period?						30a		X
_	If "Yes," describe the arrangement in Part II.						1		v
31	Does the organization have a gift acceptance						31		X
32a	Does the organization hire or use third parties	or related o	rganizations to soli	cit, process,	or sell noncash	1		v	
	contributions?						32a	X	
	If "Yes," describe in Part II.								
33	If the organization did not report an amount in	column (c)	tor a type of prope	rty for which	column (a) is c	necked,			
	describe in Part II.				·		<u></u>	000	L
LHA	For Paperwork Reduction Act Notice, see	the instruc	ctions for Form 99	0.		Schedule M	(Form	990)	(2011)

Schedu								OF BROWAL		NC.		2477112	Page 2
Part	the	organ	nization is r	reporting ir	tion. Comp Part I, colu y additional I	mn (b), the	edmun e	ovide the informat r of contributions,	ion require the numb	ed by Part I, Ii er of items re	nes 30b ceived, d	, 32b, and 33, and or a combination o	whether footh.
SCH	DULE	Μ,	LINE	32B:	SECUR	ITIES	ARE	RECEIVED	INTO	BROKER	AGE	ACCOUNTS	
AND	SOLD	IM	MEDIA	TELY.					_				
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF BROWARD, INC.

Employer identification number 59-2477112

FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION HAS ESTABLISHED AN AUDIT COMMITTEE CONSISTING OF BOARD MEMBERS AND INDIVIDUALS FROM THE COMMUNITY WITH FINANCIAL AND TAX EXPERTISE. ONE OF THE FUNCTIONS AND RESPONSIBILITIES OF THIS COMMITTEE IS TO ENSURE A REVIEW OF THE FORM 990 AND RELATED SCHEDULES PRIOR TO FILING. A COPY OF FORM 990 AND ACCOMPANYING SCHEDULES IS DELIVERED TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD AND STAFF MEMBERS ARE
REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY ANNUALLY. BOARD MEMBERS ARE
ALSO REQUIRED TO DISCLOSE CONFLICTS ON ALL ITEMS SUBJECT TO APPROVAL AT
EACH BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF CEO IS DETERMINED

BY THE BOARD AFTER A REVIEW OF CEO'S PERFORMANCE AND ACCOMPLISHMENTS,

REVIEW OF COMPARABLE COMPENSATION DATA OBTAINED FROM INDEPENDENT RESOURCES

AND BUDGET LIMITATIONS. COMPENSATION OF KEY EMPLOYEES IS DETERMINED BY THE

CEO AFTER A REVIEW OF THEIR PERFORMANCE AND ACCOMPLISHMENTS, REVIEW OF

COMPARABLE COMPENSATION DATA OBTAINED FROM INDEPENDENT RESOURCEES AND

BUDGET LIMITATIONS.

FORM 990, PART VI, SECTION C, LINE 19: THE COMMUNITY FOUNDATION OF BROWARD ISSUES AN ANNUAL REPORT PROVIDING FINANCIAL INFORMATION TO THE PUBLIC AND DOCUMENTATION OF THE ORGANIZATION'S SIGNIFICANT ACTIVITIES. THE ANNUAL REPORT IS MAILED TO THE ORGANIZATION'S CONTACTS AND POSTED TO ITS WEBSITE.

AUDITED FINANCIAL STATEMENTS AND FORM 990 (INCLUDING RELATED SCHEDULES) ARE AVAILABLE AT THE ORGANIZATION'S OFFICE UPON REQUEST AND CAN BE DOWNLOADED LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 132211 01-23-12

Name of the organization COMMUNITY FOUNDATION OF BROWARD, INC.	Employer identification number 59-2477112
FROM THE ORGANIZATION'S WEBSITE.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-4,712,730.
AGENCY TRANSACTIONS	-2,757,695.
CHANGE IN SPLIT-INTEREST AGREEMENTS	-15,968.
TOTAL TO FORM 990, PART XI, LINE 5	-7,486,393.

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Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Yeaz 2011 For Year Ended June 30, 2012 Region All Regions Eli S9-2477112							Page 1
Name, address, and zip	EN	IRC Code	Cash Grant	Non-Cash Grant	Non-Cash Grant Valuation Method	Descr Non-Cash Assistance	Purpose of Grant or Assistance
211 Broward 250 NE 33rd Street Oakland Park, FL 33334	65-0589294	501(C)3	8,880				Annual distribution
211 Broward 250 NE 33rd Street Oakland Park, FL 33334	65-0589294	S01(C)3	8,000				Touchline Program & Helpline Program for Seniors
Achievement & Rehabilitation Centers, Inc 10250 NW 53rd St Sunrise, FL 33351	59 0809623	501(C)3	5,281				Achievement & Rehabilitation
American Red Cross Broward County Chapter 6710 West Sunrise Blvd Sulte 111 Plantation, Fl. 33313	53-0196605	501(C)3	000's				Disaster Assistance for the
American Red Cross Broward County Chapter 6710 West Sunrise Blvd Suite 111 Plantation, Fl. 33313	53-0196605	501(C)3	3,417				Annual distribution
American Red Cross Broward County Chapter 6710 West Suntse Blvd Suite 111 Plantation, Fl 33313	53-0196605	501(C)3	4,613				Annual distribution
Ann Storck Center, Inc 1790 SW 43rd Way Fort Lauderdale, Fl 33317	59-2171081	501(C)3	5,281				Preschool Early Intervention Program for Toddlers with Disabilities
Anti-Defamation League 605 Third Avenue New York, NY 10158	13-1818723	501(C)3	11,190				The No Place For Hate Initiative
Ashanti Cuftural Arts & Enrichment, Inc PO Box 100646 Fort Lauderdale, FL 33310	65-0209351	501(C)3	000'1				Ashanti Cultural Arts Peer Power Summer Program for At-risk Youth
Boston College Office University Advancement 140 Commonwealth Ave More Hall Chestnut Hill, MA 02467-3819	04-2103545	501(C)3	10,000				To support the Lynch School of Education
Boys & Girls Clubs of Broward County 877 NW 61st Street Fort Lauderdale, FL 33309 & 12/03/2012	59-1108790	501(C)3	2,000	0			Ari With A Heart

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Page 2	Purpose of Grant or Assistance	Annual distribution	Annual distribution	To provide general operating support	Annual distribution	Annual distribution	For the WINGS Program to provide scholarships in memory of Debra Levy Neimark	To prowde scholarships to students in the pilot training and music program	To support the Elaine P Krupnick Fund	To provide general operating support	Annual Distribution for the Broward Community College WINGS program	To provide scholarhsip support for the WINGS students at Broward College	Scholarships for the Elderly at Broward College	Board Forum System
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	76	297	8	28	24	651	8	8	00	1,062	3,293	4,000	000
	Cash Grant	2,497	7	10,000	5,684	10,724	1,259	14,000	10,000	12,000	1,0	3,2	9,0	10,000
	IRC Code	S01(C)3	S01(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3						
	EIN	59-1108790	59-1108790	59-0879227	59-1378244	23-7181959	23-7181959	23-7181959	23-7181959	23 7181959	23-7181959	23-7181959	23 7181959	59-2701676
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Boys & Girls Clubs of Broward County 877 NW 61st Street Fort Lauderdale, FL 33309	Boys & Girls Clubs of Broward County 877 NW 61st Street Fort Lauderdale, FL 33309	Boys & Giris Clubs of Miami-Dade 2805 SW 32 Avenue Coral Gables, FL 33133	Broward Children's Center, Inc 200 SE 19th Avenue Pompano Beach, Fl 33060	Broward College Foundation 110 East Broward BMd , Ste 750 Fort Lauderdale, FL 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, FL 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, FL 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, Ft 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, Ft 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, Ft 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, Ft 33301	Broward College Foundation 110 East Broward Blvd , Ste 750 Fort Lauderdale, Fl 33301	Broward County Film Society Fort Lauderdale Film Festival 1314 E. Las Olas Blvd., Suite #007 Ft Lauderdale, FL 33301 © 12/03/2012

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Page 3	Purpose of Grant or Assistance	To support the SEAS/ ARTS for the future	To support the Arts for the Future Scholarship Fund	Annual distribution	Board Development	Mpowerment - Minority Focus	Annual distribution	To provide general operating support	Emergency Shelter	Emergency Shelter	To support the Workforce Development Center	Young Professionals Performing Arts Camp Scholarships	Reading Readiness Through the Theater
	Descr Non-cash Assistance												
	Non-Cash Grant Valuation Method												
	Non-Cash Grant	8	0	<u></u>	88	8	780	381	8	242	8	00	8
	Cash Grant	40,000	2,000	10,613	866'6	30,000	37	¥	1,000	¥	2,500	2,000	1,000
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	S01(C)3
	EIN	59-2359433	59-2359433	59-6012065	65-0316363	59-2913416	65-0777033	65-0777033	65-0777033	65-0777033	65-0777033	59.2657043	59.2657043
Community Foundation of Broward, Inc Tax form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions Elin 59 2477112	Name, address, and 21p	Broward Education Foundation, Inc 600 SE 3rd Avenue, 1st Floor Ft Lauderdale, Ft 33301	Broward Education Foundation, Inc 600 SE 3rd Avenue, 1st Floor Ft Lauderdale, Ft 33301	Broward Health 303 SE 17th Street Fort Lauderdale, FL 33316-2591	Broward Healthy Start Coallton, Inc 65SS Powerline Road Suite 304 Ft Lauderdale, Ft 33309	Broward House, Inc 1726 SE 3rd Avenue Fort Lauderdale, FL 33316	Broward Partnership for the Homeless, Inc 920 NW 7th Avenue Fort Lauderdale, Ft 33311-7229	Broward Partnership for the Homeless, Inc 920 NW 7th Avenue Fort Lauderdale, Fl. 33311-7229	Broward Partnership for the Homeless, Inc 920 NW 7th Avenue Fort Lauderdale, Fl 33311-7229	Broward Partnership for the Homeless, Inc 920 NW 7th Avenue Fort Lauderdale, FL 33311-7229	Broward Partnership for the Homeless, inc Inc 920 NW 7th Avenue Fort Lauderdale, Ft 33311-7229	Broward Performing Arts Foundation 201 SW Fifth Avenue Fort Lauderdale, FL 33312	Broward Performing Arts Foundation 201 SW Fifth Avenue Fort Lauderdale, Fl 33312 © 12/03/2012

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Page 4	ance Purpose of Grant or Assistance	To support the Patron's Circle	Community Lead Agency for HIV/AIDS impact	To provide general operating support	2012 Music Techniques and Technology Summer Camp	Pediatric & Adolescent Primary Care Clinic	PROMISE PLUS Project	Children's Diagnostic and Treatment Center PROMISE PLUS Project	Annual distribution for Children's AIDS Program	Distribution to cover cost of obtaining Silver LEED certification for the new building	For the Youth Summit	Rocket town and general fund
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant	•	9	9	Q	sy.	8	g	779	12	0	0
	Cash Grant	1,500	300,000	000'01	6,600	1,965	1,000	46,480	2	9,021	22,950	5,000
	IRC Code	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	E	59-2657043	59-2274772	59-1279497	14-1912494	65-1026739	65-1026739	65-1026739	65-1026739	65-1104179	65-1104179	59-0931259
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions Eli \$9-247112	Name, address, and 2ip	Broward Performing Arts Foundation 201 SW Fifth Avenue Fort Lauderdale, FL 33312	Broward Regional Health Planning Council, Inc 200 Oakwood Lane Suite 100 Hollywood, FL 33020	Catholic Charities of the Archdiocese of Miam, inc. 1505 NE 26th Street Wilton Manors, FL 33305	Changing Directions 4 Youth & Families 901 NW 10th Street Pompano Beach, Fl 33060	Children's Diagnostic & Treatment Center, Inc 1401 S Federal Hwy Fort Lauderdale, Fl 33316	Children's Diagnostic & Treatment Center, Inc 1401 S Federal Hwy Fort Lauderdale, Fl 33316	Children's Diagnostic & Treatment Center, inc 1401 S Federal Hwy Fort Lauderdale, Fl 33316	Children's Diagnostic & Treatment Center, Inc 1401 S Federal Hwy Fort Lauderdale, Fl 33316	Children's Services Council of Broward County 6600 W Commercial Bhd Lauderhill, FL 33319	Children's Services Council of Broward County 6600 W Commercial Bhd Lauderhill, FL 33319	Christ Church United Methodist 4845 NE 25sh Avenue Fort Lauderdale, FL 33308 © 12/03/2012

Page 5	Purpose of Grant or Assistance	Annual distribution	Annual distribution	To support Rocket town and the general fund	Bike Path Use and Safety Promotion	Reimbursement for expenses incurred for the July 4, 2011 celebration	Reimbursement for expenses incurred for the July 4, 2011 celebration	M O S T Summer Camp Scholarships	Production of exhibition on GLBT classical music composers	To support the station's grant match program in Fall 2011	To support the Executive Health Program	Bridging Education and Attitudes with Teens (B E A T)	Annual distribution	To provide general operating support
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	6	4	0	v	0	0	0	Q	8	8	00	8	8
	Cash Grant	30,990	3	2,000	7,356	25,000	900'5	10,000	1,500	000'5	9,000	21,520	5,260	3,000
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	S01(C)3
	EIN	59-0931259	59-0931259	59-0931259	59-1227491	59-6000319	59-6000319	59-6000338	26-1417978	26-1417978	65 0003177	65-0857105	59 2323607	59 2323607
Community Foundation of Broward, inc Tax form 990 - Parl 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions	Name, address, and zip	Christ Church United Methodist 4845 NE 25th Avenue Fort Lauderdale, FL 33308	Christ Church United Methodist 4845 NE 25th Avenue Fort Lauderdale, FL 33308	Christ Church United Methodist 4845 NE 25th Avenue Fort Lauderdale, FL 33308	City of Coconut Creek 4800 W Copans Rd Coconut Creek, Fl 33063	City of Fort Lauderdale 100 N Andrews Avenue Fort Lauderdale, FL 33301	City of Fort Lauderdale 100 N Andrews Avenue Fort Lauderdale, FL 33301	City of Hollywood 2600 Hollywood Blvd Room 419 Hollywood, Fl 33019	Classical South Florida 330 SW 2nd Street Suite 207 Fort Lauderdale, FL 33312	Classical South Florida 330 SW 2nd Street Suite 207 Fort Lauderdale, FL 33312	Cleveland Clinic Flonda 2950 Cleveland Clinic Blvd Weston, Ft 33331	ComServ, Inc 3511 Inverrary Dr. Apt 110 Ft Lauderdale, Ft 33319-5953	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Covenant House Florida, Inc 733 Breakers Avenue LFort Lauderdale, FL 33304

Page 6	Purpose of Grant or Assistance	For general operating support	Annual distribution	General operating support	To support the \$500,000 Matching Gift Challenge	General operating support	summer program for youth	Leadership Summer Reading Camp and Afterschool Program	For general operating support	For general operating support	Annual distribution	To provide general operating support	Annual distribution
	Descr Non-cash Assistance												
	Non-Cash Grant Valuation Method												
	Non-Cash Grant	0	m	9	0	9	<u>e</u>	Q	8	8	8	8	2 0
	Cash Grant	1,000	743	2,500	1,000	10,000	1,000	7,000	3,000	2,000	000'\$	4,000	12,848
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	\$01(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-2323607	59-2323607	59-2323607	59-2323607	59-2323607	20-2689974	20-2689974	59-1361955	59-1361955	13-1623995	59-2097520	59-2097520
Community Foundation of Broward, Inc. Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zıp	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Covenant House Florida, Inc 733 Breakers Avenue Fort Lauderdale, FL 33304	Crockett Foundation PO Box 3774 Hallandale, Ft 33008	Crockett Foundation PO Box 3774 Hallandale, FL 33008	Diabetes Research Institute Foundation, Inc 200 South Park Road, Ste 100 Hollywood, FL 33021	Diabetes Research institute Foundation, inc 200 South Park Road, Ste 100 Hollywood, FL 33021	English Speaking Union of the United States National Headquarters 144 E 39th St New York, NY 10016	Feeding South Florida 2501 SW 32nd Terrace Hollywood, FL 33023-7707	Feeding South Florida 2501 SW 32nd Terrace Hollywood, FL 33023-7707 © 12/03/2012

Page 7	e Purpose of Grant or Assistance	To provide general operating support	Annual distribution	For The Murru Family Fund	Annual distribution to support	General operating support	For general operating support, Ministry	All general purposes but as a Jack Glenn	To support the ATH-283-	To provide a scholarship for	Boards in Action	Annual distribution
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant	8	g.	9	89	8	8	8	00	8	8	43
	Cash Grant	10,000	1,099	11,519	4,358	2,500	2,000	1,000	8,000	1,500	8,500	25,143
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3
	EIN	59-2097520	59-2097520	11-3033001	59-0725544	59-0725544	59-0725544	59 0725544	59-0917284	59-0917284	lat 01 0694045	65-0496477
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 55-2477112	Name, address, and 2lp	Feeding South Florida 2501 SW 32nd Terrace Hollywood, FL 33023-7707	Feeding South Florida 2501 SW 32nd Terrace Hollywood, FL 33023-7707	Fidelity Investments Charitable Gift Fund P O Box 770001 Cincinati, OH 45277-0053	First Presbyterian Church of Fort Lauderdale 401 SE 15th Avenue Fort Lauderdale, FL 33301	First Presbyterian Church of Fort Lauderdale 401 SE 15th Avenue Fort Lauderdale, Fl 33301	First Presbyterian Church of Fort Lauderdale 401 SE 15th Avenue Fort Lauderdale, FL 33301	First Presbyterian Church of Fort Lauderdale 401 SE 15th Avenue Fort Lauderdale, FL 33301	Florida Atlantic University Foundation, inc 777 Glades Road Boca Raton, Fl 33431-0991	Florida Atlantic University Foundation, inc 777 Glades Road Boca Raton, Fl. 33431-0991	Florida Breast Cancer Coalition Research Foundat 01 0699045 11900 Biscayne Boulevard Suite 806 North Miami, FL 33181	Florida Grand Opera, Inc 8390 NW 25th Street Mami, Ft 33122 B12/03/2012

Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More

Tax Year 2011 For Year Ended June 30, 2012

Region All Regions

Purpose of Grant or Assistance To provide general operating support To provide general operating Jelly Bean Summer Camp Board Recruitment and Programs underwriting Programs underwriting **FYO Musical Program** Annual distribution Annual distribution Annual distribution Annual distribution Annual distribution Strategic Planning poddns Cash Grant Non-Cash Grant Valuation Method Descr Non-cash Assistance 8,700 10,045 1,000 3,000 12,000 2,000 33,234 12,070 1,204 4,590 1,500 139 IRC Code 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 501(C)3 65-0063799 87-0743538 65-0063799 Fort Lauderdale Beach Rotary Foundation Fund, It 51-0166689 Fort Lauderdale Children's Theatre Galleria Mall 59-0756789 25428 East Sunrise Blvd 23-1657857 23 7365001 23-7365001 23-7365001 65-0063799 65-0063799 23-7365001 N. Florida Introduces Physical Activity and Freedoms Foundation at Valley Forge/Broward County Chapter 6600 W Commercial Blvd Lauderhill, FL 33319 Fort Lauderdale, FL 33308 Fort Lauderdale, FL 33304 Fort Lauderdale, FL 33338 Friends of WLRN, Inc 169 E Flagler St., #1400 Miami, FL 33131-1213 Florida Youth Orchestra 1708 N 40th Avenue Hollywood, FL 33021 Florida Youth Orchestra 1708 N 40th Avenue Hollywood, FL 33021 Florida Youth Orchestra 1708 N 40th Avenue Hollywood, FL 33021 Florida Youth Orchestra 1708 N 40th Avenue Hollywood, FL 33021 Friends of WLRN, Inc 169 E Flagler St , #1400 Miami, FL 33131-1213 Friends of WLRN, Inc 169 E Flagler St , #1400 Miami, FL 33131-1213 Friends of WURN, Inc 169 E Flagler St., #1400 Miami, FL 33131-1213 © 12/03/2012 Name, address, and zip 4710 NE 26th Avenue **Nutrition to Youth** EIN 59 2477112 P O Box 4116

Page 9	Purpose of Grant or Assistance	Programs underwriting	Programs underwriting	Programs underwriting	Programs underwriting	Programs underwriting	Programs underwriting	To provide general operating support	Annual distribution	Annual distribution to support programs that promote bridging the gap between the young and elderly	To support the activities and children of Broward County	Annual distribution	Annual distribution	For Good Award
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	09	50	00	02	09	05	8	147	18	8	807	73	8
	Cash Grant	12,750	12,920	1,870	3,570	2,550	2,550	3,000	71	5,681	3,000	ž	6,673	2,000
	IRC Code	\$01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	23-7365001	23-7365001	23-7365001	23-7365001	23-7365001	23-7365001	23-7365001	59-0657327	59-0657327	59 0657327	65-0335986	65-0335986	65-0335986
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantess Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN \$9-2477112	Name, address, and zip	Friends of WIRN, inc 169 E Flagler St. #1400 Miami, Fl. 33131-1213	Friends of WIRN, Inc 169 E Flagler St. #1400 Miamt, Fl. 33131-1213	Friends of WLRN, Inc 169 E Flagler St, #1400 Mlami, FL 33131-1213	Friends of WIRN, inc 169 E Flagler St., #1400 Miami, Fl. 33131-1213	Friends of WIRN, Inc 169 E Flagler St , #1400 Miami, Fl 33131-1213	Friends of WIRN, Inc 169 E Flagler St. #1400 Miami, Fl. 33131-1213	Friends of WURN, Inc 169 E Flagler St., #1400 Miami, FL 33131-1213	Girl Scouts of Southeast Florida, Inc 1224 W Indiantown Road Jupiter, FL 33458	Girl Scouts of Southeast Florida, Inc 1224 W Indiantown Road Jupiter, FL 334S8	Girl Scouts of Southeast Florida, Inc 1224 W Indiantown Road Juplier, Fl. 33458	Gold Coast lazz Society, Inc 1350 East Sunnse BMd , #115 Fort Lauderdale, FL 33304	Gold Coast lazz Society, Inc 1350 East Sunrse BMd , #115 Fort Lauderdale, Ft 33304	Gold Coast 1822 Society, Inc 13SO East Sunrise Bivd , #115 Fort Lauderdale, Ft 33304 © 12/03/2012

Page 10	Purpose of Grant or Assistance	To provide general operating support	Housing for single moms & their children	Habitat for Humanity Home Ownership for Single Mothers	To provide general operating support	Broward Corporate Volunteer Council (BCVC)	To provide general operating support	Annual distribution	Annual distribution	Annual Distribution	To support the Unity for Kids early childhood program	To support the Unity for Kids early childhood program	To support the Unity for Kids early childhood program	To support the Unity for Kids early childhood program
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	8	8	8	9	00	8	87	152	8	8	800	750	5,350
	Cash Grant	8,000	3,000	1,000	1,000	40,000	10,000	1,287	Ħ	8,566	1,000	v	,	s,s
	IRC Code	S01(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3
	EIN	59-0624404	59-2320573	59-2320573	59-2320573	59-1506570	59-2507617	59-2507617	59-0711167	59-0711167	59-2230272	59-2230272	59-2230272	59 2230272
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Greater Miami Jewish Federation, Inc Stanley C Myers Building 4200 Biscayne Blvd Miami, FL 33137-3210	Habitat for Humanity of Broward 3564 N Ocean Boulevard Fort Lauderdale, Fl 33308	Habitat for Humanity of Broward 3564 N Ocean Boulevard Fort Lauderdale, FL 33308	Habitat for Humanity of Broward 3564 N Ocean Boulevard Fort Lauderdale, FL 33308	Hands On Broward 6600 West Commercial Blvd Lauderhill, FL 33319	HANDY, Inc SO1 NE 8th Street Fort Lauderdale, FL 33304 2728	HANDY, Inc SOJ NE 8th Street Fort Lauderdale, FL 33304-2728	Henderson Behavioral Health 4740 N. State Road 7, #201 Fort Lauderdale, Fl. 33319	Henderson Behavioral Health 4740 N. State Road 7, #201 Fort Lauderdale, Fl. 33319	Hispanic Unity of Florida S840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida S840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida S840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida 5840 Johnson Street Hollywood, FL 33021 © 12/03/2012

Page 11	nce Purpose of Grant or Assistance	To support the Unity for Kids early childhood program	To support the Unity for Kids early childhood program	To support the Unity for Kids Early Childhood Program	Annual distribution	To support the Unity for Kids early childhood program	Cancer Research Program Expanding Phase 2 and 3 Trials	For the institute for Nursing Excellence to be used for continuing education for nurses	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Annual distribution	General operating support
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	250	8	00	156	250	4	0	"	83	*	26	38	005
	Cash Grant	Ñ	1,000	1,500	Ħ	č.	24,744	9,000	6,877	8,329	16,477	3,326	11,038	s
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	\$01(C)3	501(C)3	S01(C)3	S01(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-2230272	59-2230272	59-2230272	59-2230272	59-2230272	59-0791028	59-0791028	59 0791028	59-0791028	59-6002321	59-6002321	59-6002321	59 6002321
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Hispanic Unity of Florida 5840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida 5840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida 5840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida S840 Johnson Street Hollywood, FL 33021	Hispanic Unity of Florida S840 Johnson Street Hollywood, FL 33021	Holy Cross Hospital 4725 N Federal Hwy Fort Lauderdale, FL 33308	Holy Cross Hospital 4725 N Federal Hwy Fort Lauderdale, Fl 33308	Hofy Cross Hospital 4725 N Federal Hwy Fort Lauderdale, FL 33308	Holy Cross Hospital 4725 N Federal Hwy Fort Lauderdale, FL 33308	Humane Society of Broward County 2070 Griffin Road Fort Lauderdale, FL 33312	Humane Society of Broward County 2070 Grifin Road Fort Lauderdale, FL 33312	Humane Society of Broward County 2070 Griffin Road Fort Lauderdale, FL 33312	Humane Society of Broward County 2070 Griffin Road Fort Lauderdale, FL 33312 © 12/03/2012

Page 12	Purpose of Grant or Assistance	Encore Connect	To provide general operating support	Silver Sponsor - Flip Flops on the Rooftop	To provide general operating support	Scholarship for an infant ın The Cuddiy Bears room	To support the operating campagn	Annual distribution to benefit students with medical attention	Light-Up Downtown	To support the Stiles Scholarship Fund	Annual distribution	Annuai distribution	Fran Payne Society	Annual distribution
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
		8	000's	1,000	1,000	2,000	3,000	349	1,000	1,000	157	1,788	2,000	4,644
	Cash Grant	46,000	8,0	1,0	1,0	2,0	3,0	m	1,0	0,1	26,457	1,7	5,0	4
	IRC Code	501(C)3	S01(C)3	S01(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3	501(C)3
	EIN	59-1297932	59-0637870	59 0637870	59-0637870	59 0637870	59-0637870	59-0637870	59-0637870	59 0637870	59 0637870	59 0637870	59-0637870	59-0637870
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Impact Broward, Inc 4701 NW 33 Ave Fort Lauderdale, Fl 33309	Jack & Jill Children's Center 1315 West Broward Bhd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Bhd Ft Lauderdale, Ft 3331.2	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 3331.2	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 3333.2	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Bhd Ft Lauderdale, Ft 33312	Jack & Jill Children's Center 1315 West Broward Bhd Ft Lauderdale, Ft 3331.2	Jack & Jill Children's Center 1315 West Broward Blvd Ft Lauderdale, Fl. 33312 © 12/03/2012

Page 13	e Purpose of Grant or Assistance	To provide general operating support	Етпегдепсу Shelter	General operating support	To provide general operating support	JAFCO Senior Caregiver Program	General operating support	General operating support	General operating support	Summer Intensive Dance Camp All Levels	General Operating Support	To provide general operating	Annual distribution	To provide general operating
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	8	8	8	100	8	8	33	0	8	00	8	30	8
	Cash Grant	7,500	4,200	000'6	11	1,000	1,800	12,003	2,000	6,000	2,000	1,000	11,680	3,000
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	20 0898587	20 0898587	20-0898587	20-0898587	20 0898587	20-0898587	13-1659627	13-1659627	30-0209372	59-0871446	59-0871446	59-0871446	59.0871446
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish Adoption and Foster Care Options 4200 North University Drive Sunrise, FL 33351	Jewish National Fund 42 East 89th Street New York, NY 10021-5016	Jewish National Fund 42 East 89th Street New York, NY 10021-5016	Jubilee Dance Theatre, Inc P O Box 120115 Ft Lauderdale, Ft 33312	Junior Achievement of South Florida, Inc 1130 Coconut Creek Boulevard Pompano Beach, Fl 33065-1647	Junior Achievement of South Florida, Inc 1130 Coconut Creek Boulevard Pompano Beach, Fl 33066-1647	Junor Achievement of South Florida, Inc 1130 Coconut Creek Boulevard Pompano Beach, Fl 33066-1647	Jumor Achievement of South Florida, Inc B1130 Coconut Greek Boulevard Pompano Beach, FL 33066-1647

Page 14	Purpose of Grant or Assistance	Annual distribution	Organizational Capacity Development	Junior League FUTE Center-FLITE Attendant	KIDS Summer Camp for At-risk Youth	General operating support	Annual distribution	Annual distribution	To provide general operating support	Annual distribution	Annual distribution	Annual distribution
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant	ç	8	Q	st.	8	3.	9	8	297	571	210
	Cash Grant	3,882	75,000	8,000	7,004	2,500	434	156	2,000	×	H	N
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-0932711	59-0932711	59-0932711	59-1927289	59-1927289	59-1927289	59-1927289	59-1927289	59-1927289	65-0387636	65-0387636
Community Foundation of Broward, Inc. Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Junior League of Greater Fort Lauderdale 704 SE First Street Fort Lauderdale, FL 33301	Junior League of Greater Fort Lauderdale 704 SE First Street Fort Lauderdale, FL 33301	Junior League of Greater Fort Lauderdale 704 SE First Street Fort Lauderdale, FL 33301	Kids in Distress, inc 819 North East 26th Street Second floor Fort Lauderdale, FL 33305 1239	Kids in Distress, Inc 819 North East 26th Street Second floor Fort Lauderdale, Ft 33305-1239	Kids in Distress, inc 819 North East 26th Street Second floor Fort Lauderdale, FL 33305-1239	Kids in Distress, Inc 819 North East 26th Street Second floor Fort Lauderdale, FL 33305-1239	Kids in Distress, inc 819 North East 26th Street Second floor Fort Lauderdale, FL 33305-1239	Kids in Distress, Inc 819 North East 26th Street Second floor Fort Lauderdale, FL 33305-1239	Leadership Broward Foundation, Inc 1640 W Oakland Park Boulevard Suite 400 Fort Lauderdale, FL 33311	Leadership Broward Foundation, Inc 1640 W Oakland Park Boulevard Suite 400 Fort Lauderdale, FL 33311

Page 15	Purpose of Grant or Assistance	Encorel Leadership Broward	To provide general operating support	To support the Jon E Krupnick Fund	To support the Jon E Krupnick Fund	LifeNet 4 families Hope Delivered Feeding Elderly and Disabled Shut-Ins	General operating support	To provide general operating support	To provide general operating support	Annual distribution	Annual distribution	Annual distribution
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant	0	0	•	0	0	9	0	Q	3	œ	y o.
	Cash Grant	30,000	000's	000's	\$,000	1,000	1,000	3,000	1,000	8,573	4,358	3,326
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3
	EIS	65-0387636	59-1547191	24-0795445	24-0795445	59 2696451	59-2696451	59-2696451	59-2696451	59-2696451	59 2696451	59-1650909
Community foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Leadership Broward Foundation, Inc 1640 W Oakland Park Boulevard Suite 400 Fort Lauderdale, FL 33311	Legal Aid Service of Broward County, Inc 491 N State Road 7 Plantation, FL 33317	Lehigh University Office of Advancement 27 Memorial Drhe West Bethleham, PA 18015	Lehigh University Office of Advancement 27 Memorial Drive West Bethleham, PA 1801.5	LifeNetdFamilies/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 333.1.1	LifeNet4Families/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 3333.1	LifeNetdFamilies/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 33311	LifeNet4Familles/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 33311	LifeNetdFamilies/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 3333.1	LifeNetdFamilies/The Cooperative Feeding Program One NW 33rd Terrace Fort Lauderdale, FL 33311	Lighthouse of Broward County 650 North Andrews Avenue Fort Lauderdale, FL 33311

Page 16	Purpose of Grant or Assistance	General operating support	Vital LivingIndependent Living with Vision Loss	Annual distribution	EM Vasquez Medical Center	Annual distribution	General operating support	To provide general operating	To provide general operating	Annual distribution	For the Sun-Sentinel Children's Fund to be match by the McCormick Foundation	To support the Orlando Sentinel Family Fund
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant	0	0	c.	9	4	9	Ħ		v.		9
	Cash Grant	1,970	1,500	6,867	12,000	17,044	200	381	10,000	10,045	0 0ε	005
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-1650909	59-1650909	59-2198911	65-0266070	ce Court 36-6038248	orida, Inc 59-2620322	orida, Inc 59-2620322	orida, Inc 59-2620322	74-3096907	36-3689171	36 3689171
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59 2477112	Name, address, and zip	Lighthouse of Broward County 650 North Andrews Avenue Fort Lauderdale, ft 33311	Lighthouse of Broward County 650 North Andrews Avenue Fort Lauderdale, FL 33311	Lutheran Services Florida, Inc 3627 A West Waters Avenue Tampa, FL 33614	Luz Del Mundo - Light of the World Clinic 806 East Prospect Road Oakland Park, FL 33334	Madison Community Foundation 2 Science Court 36-6038248 P O Box 5010 Madison, WI 53705-0010	Make-A-Wish Foundation of Southern Florida, Inc 59-2620322 4491 S State Road 7 Suite 201 Davie, FL 33314	Make-A-Wish Foundation of Southern Florida, Inc 59-2620322 4491 S State Road 7 Suite 201 Davie, FL 33314	Make-A-Wish Foundation of Southern Florida, Inc 59-2620322 4491.5 State Road 7 Suite 201 Davie, F. 133314	Master Chorale of South Florida 6278 N Federal Hwy , #351 Fort Lauderdale, Ft 33308-1916	McCormick Foundation 205 N Michigan Avenue Suite 4300 Chicago, IL 60601-4041	McCormick Foundation 205 N Michigan Avenue Suite 4300 Chicago, II, 60601-4041

Page 17	Descr Non-cash Assistance Purpose of Grant or Assistance	For the Sun-Sentinel Children's Fund to be matched by the McCormick	Board Strategic Planning	Annual distribution	Annual distribution	Annual distribution	To provide general operating support	Annual distribution	Annual distribution	The Studio School Scholarships for Youth from Low-income Homes	To provide general operating support	Annual distribution	To support program with PACE Center for Girls
	Non-Cash Grant Valuation Method Descr P												
	Srant	8,000	8,500	714	2,179	4,613	10,000	5,273	4,358	5,000	1,000	3,434	10,000
	IRC Code Cash (501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	36-3689171	59-0816448	59.0816448	59-2578534	59 2578534	59-1743865	53-0196617	59-1083502	59-1083502	59-1083502	59-1709542	59-1709542
Community Foundation of Broward, Inc. Tax Form 950 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and 21p	McCormick Foundation 205 N. Michigan Avenue Suite 4300 Chicago, IL 60601-4041	Mental Health Assoc 7145 W Oakland Pk Blwd Lauderhill, Fl 33313	Mental Health Assoc 7145 W Oakland Pk Blvd Lauderhill, FL 33313	Miami City Ballet 2200 Liberty Avenue Miami Beach, FL 33138	Miami City Ballet 2200 Liberty Avenue Miami Beach, FL 33138	Miami Rescue Mission, Inc. d/b/a Broward Outreach P O Box 220490 Hollywood, FL 33022	Missionaries of Charity 335 East 145th Street Bronx, NY 1045.1	Museum of Art Fort Lauderdale, Nova Southeastern University One East Las Olas Blvd Fort Lauderdale, Ft 33301	Museum of Art Fort Lauderdale, Nova Southeastern University One East Las Olas Blvd Fort Lauderdale, Ft 33301	Museum of Art Fort Lauderdale, Nova Southeastern University One East Las Olas BMd Fort Lauderdale, Ft 33301	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, FL 33312	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, Fl 33312

Page 18	ce Purpose of Grant or Assistance	Annual distribution	Annual distribution	Annual distribution	Annual distribution	To provide general operating support	Annual distribution	Annual distribution	Annual distribution to support the Sea Cadet Program	Annual distribution	Annual distribution	Summer Skills and Academic Center for At-Risk Youth
	Descr Non-cash Assistance											
	Non-Cash Grant Valuation Method											
	Non-Cash Grant		_	_	_	g.	us.	w	~	ø.	d	0
	Cash Grant	4,184	61,041	201	124,741	2,500	8,646	3,326	1,132	449	3,654	4,000
	IRC Code	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	E	59-1709542	59-1709542	59-1709542	59-1709542	59-0954683	59-0954683	59-1412425	59-1412425	59 1412425	59-1412425	31 1583031
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, FL 33312	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, FL 33312	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, FL 33312	Museum of Discovery and Science 401 SW 2nd Street Fort Lauderdale, FL 33312	National Multiple Sclerosis Society, South Florida Chapter 3201 West Commercial Boulevard Suite 127 Fort Lauderdale, Fl 33309-3452	National Multiple Sciensis Society, South Florida Chapter 3201 West Commercial Boulevard Suite 127 Fort Lauderdale, Fl 33309-3452	Navy League of the United States Ft Lauderdale Council, Inc PO Box 4385 Fort Lauderdale, Ft 33338	Navy League of the United States Ft Lauderdale Council, Inc PO Box 4385 Fort Lauderdale, Ft 33338	Navy League of the United States Ft Lauderdale Council, Inc PO Box 4385 Fort Lauderdale, FL 33338	Navy League of the United States Ft Lauderdale Council, Inc PO Box 4385 Fort Lauderdale, Ft 33338	New Horizon Community Development Corporation 1518 N W 17th Avenue Pompano Beath, FL 33069

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Page 19	Purpose of Grant or Assistance	To support summer youth program	For the Health Professions Division Foundation to support the NSU Entry Level Nursing Student Scholarship Program	Annual distribution	Teen Time Program	To support programs in Broward County only	To provide students with scholarships	To support the 2012 Golf Invitational	To provide general operating support	To provide general operating support	To provide general operating support	Annual distribution	To provide general operating support
	Descr Non-Cash Assistance												
	Non-Cash Grant Valuation Method												
	Non-Cash Grant	9	9	w	6	٥	Φ	0	0	0	٥	0	0
	Cash Grant	3,000	1,500	100,045	34,320	3,000	20,000	2,000	1,000	15,000	1,500	250,000	3,000
	IRC Code	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3
	EIN	31-1583031	59-1083502	59-1083502	59-1391115	59 1391115	59-1293631	59-1258384	65-0080301	65-0080301	65-0080301	65-0080301	65-0080301
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and 21p	New Horizon Community Development Corporation 1518 N W 17th Avenue Pompano Beach, Fl 33069	Nova Southeastern University 3301 College Avenue Ft Lauderdale, FL 33314-7796	Nova Southeastern University 3301 College Avenue Ft Lauderdale, FL 33314-7796	Planned Parenthood of South Florida and the Treasure Coast, Inc 2300 North Florida Mango Road West Palm Beach, Fl. 33409	Planned Parenthood of South Florida and the Treasure Coast, Inc 2300 North Florida Mango Road West Palm Beach, FL 33409	Saint Anthony School 820 NE 3rd Street Fort Lauderdale, Fl 33301	Sherdan House, Inc 1700 South Flamingo Road Davle, FL 33325	SOS Chidren's Villages-Florida, Inc 3681 NW 59th Place Coconut Creek, Fl 33073	SOS Children's Villages-Florida, inc 3681 NW 59th Place Coconut Creek, Fl 33073	SOS Children's Villages-Florida, Inc 3681 NW 59th Place Coconut Creek, Fl 33073	SOS Children's Villages-Florida, Inc 3681 NW 59th Place Coconut Creek, Fl 33073	SOS Children's Villages-Florida, Inc 3681 NW 59th Place Coconut Creek, Fl 33073

Page 20	Purpose of Grant or Assistance	Strategic Planning and Board Engagement	To provide general operating support	Annual distribution	Annual distribution	Stop the Cycle Rehab for Substance Addicted Women and their Children	Symphonic Outreach to Life-Long Learners	Annual distribution	Annual distribution	Retirees as Mentors Give Back to Meet Students? Needs	To support the Mentor Management Program	Annual distribution	Annuai distribution
	Descr Non-cash Assistance												
	Non-Cash Grant Valuation Method												
	Non-Cash Grant	٩	Q	S.	7	5 1	P	2	s	0	0	0	S
	Cash Grant	10,000	1,500	882	9,837	6,479	1,000	23,017	8,715	2,000	2,000	25,240	51,668
	IRC Code	501(C)3	S01(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3
	EIN	65-0846695	59-2164225	59-2164225	59-2164225	65-0583089	65-0157441	65-0157441	65-0157441	59-3331584	59 3331584	13 0434195	59-3012889
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions Ein 59-2477112	Name, address, and 2:p	South Florida Symphony Orchestra Leiser Opera Center 221 SW 3rd Avenue Ft Lauderdale, Ft 33312	Stranahan House 335 S E Gih Avenue Fort Lauderdale, FL 33301	Stranahan House 335 S E Gih Avenue Fort Lauderdale, FL 33301	Stranahan House 335 S E Gih Avenue Fort Lauderdale, FL 33301	Susan B Anthony Center, Inc 1633 Poinclana Drive Pembroke Pines, FL 33025	Symphony of the Americas 2435 E. Commercial BNd Suite 405 Ft. Lauderdale, Ft. 33308	Symphony of the Americas 2425 E. Commercial Blvd Suite 405 Ft. Lauderdale, Ft. 33308	Symphony of the Americas 2425 F. Commercial Blvd Suite 405 Ft. Lauderdale, Ft. 33308	Take Stock in Children, inc 600 S E 3rd Avenue, 14th Floor Fort Lauderdale, Ft 33301	Take Stock in Children, Inc 600 S E 3rd Avenue, 14th Floor Fort Lauderdale, FL 33301	The American Society for Technion-Israel institute of Technology, 55 E 59th Street, 14th Floor New York, NY 10022	The Boggy Creek Gang, Inc 30500 Brantley Branch Road Eustis, FL 32736

Page 21	Purpose of Grant or Assistance	Chamber Connect	To provide general operating support	To provide general operating support	Healthy Connections	For Good Award	Board Engagement, Community Outreach and Strategic Planning	Couples Speak (a HIV prevention workshop for couples)	Founders Circle	Annual distribution	Annual distribution	Annual distribution	General operating support	To provide general operating support
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	8	8	8	8	8	8	8	8	90	16	E1	009	8
	Cash Grant	45,000	000'01	10,000	1,000	30,000	10,000	52,000	1,200	16,456	3,991	4,613	ቖ	4,000
	IRC Code	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3
	EIN	65-0003313	59-0967823	59-0624458	74-3215234	74-3215234	74-3215234	65-0431045	65-0431045	65-0431045	65-0431045	58-0660607	58-0660607	58 0660607
Community Foundation of Broward, inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EliN \$9-2477112	Name, address, and 21p	The Greater fort Lauderdale Chamber of Commerce, Inc 512 NE 3rd Ave Fort Lauderdale, FL 33301	The Jewish Federation of Broward County, Inc 5890 S Pine Island Rd Davie, Ft. 33328	The Miami Project to Cure Paralysis at the University of Miami P O Box 016960 (R48) Miami, Fl. 33101	The Pantry of Broward, Inc 610 NW 3rd Ave Fort Lauderdale, Ft 33311	The Pantry of Broward, Inc 610 NW 3rd Ave Fort Lauderdale, FL 33311	The Pantry of Broward, Inc 610 NW 3rd Ave Fort Lauderdale, FL 33311	The Pride Center at Equality Park 2040 N Dixe Highway Wilton Manors, FL 33316	The Pride Center at Equality Park 2040 N Dixue Highway Wilton Manors, FL 33316	The Pride Center at Equality Park 2040 N Dixle Highway Wilton Manors, FL 33316	The Pride Center at Equality Park 2040 N Dixe Highway Wilton Manors, FL 33316	The Salvation Army 1445 W Broward Boulevard Ft Lauderdale, Ft 33312	The Sahation Army 1445 W Broward Boulevard Ft Lauderdale, FL 33312	The Salvation Army 1445 W Broward Boulevard LFL Lauderdale, FL 33312

Page 22	Purpose of Grant or Assistance	To provide general operating support	To provide general operating support	Boyd Anderson Jamie Nabozny "Bullied" Presentation	Cresthaven Elementary -"Koala-ty" Kids of Character	Norecrest Elementary - Showcasing Academic Achievement	Tedder - Tedder Stores	McNab Elementary - Reading Alive!!!	Cross Creek - Instant SMART Classroom Just Add Students	Cresthaven Elementary -Let Your Fingers do the Walking	Palmview Elementarry - Teaching People and Places	McNab Elementary - Learning Through Literature	Annual distribution	After School Behavioral Intervention Program
	Descr Non-cash Assistance													
	Valuation Method													
	Non-Cash Grant	Q	8	92	8	g	R	9	89	02	8	8	0	8
	Cash Grant	10,000	10,000	496	1,000	1,500	1,500	1,040	1,498	1,270	1,500	908	5,030	1,000
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	E	58-0660607	13-2923701	59 6000530	29-6000530	59-6000530	59-6000530	59 6000530	29-6000530	59-6000530	29-6000530	59-6000530	23-7047895	23 7047895
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	The Salvation Army 1445 W Broward Boulevard Ft Lauderdale, Ft 33312	The Salvation Army of Miami Dade County 1907 NW 38th Street Miami, Fl 33142	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, FL 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, FL 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, Ft. 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, FL 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, Ft 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, Ft. 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, FL 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, Ft 33301	The School Board of Broward County 600 Southeast 3rd Ave Fort Lauderdale, FL 33301	The Starting Place, Inc 351 N State Road 7, #200 Plantation, El 33317-2859	The Starting Place, Inc 351 N State Road 7, #200 Plantation, FL 33317-2859

Page 23	Purpose of Grant or Assistance	Board Governance	Trinity Fund	Gift to endowment restricted for faculty salaries, as discussed	For Good Award	For the Alexis de Tocqueville Society	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Research & Treatment of Arthrits Related Diseases
	Descr Non-cash Assistance													
	Non-Cash Grant Valuation Method													
	Non-Cash Grant	0	0	0	Q	Q	e	6:	4	E1	76	=	1 0	2
	Cash Grant	8,250	25,000	200,000	10,000	10,000	19,211	22,129	24	4,613	2,597	2,511	2,101	13,022
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501 (C)3
	EIN	23-7047895	06-0646927	06-0646927	65-0409104	59-0624402	59-0624402	59-0624402	59-0624402	59-0624402	59-0624402	59-0624402	59-0624402	59-0624458
Community Foundation of Broward, Inc Tax form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	The Starting Place, Inc 351 N. State Road 7, #200 Plantation, FL 33317-2859	Trinity College 300 Summi Street Harrford, CT 06106	Trinity College 300 Summit Street Hartford, CT 06106	Tuesday's Angels 1994 East Sunrise Blvd PMB 139 Fort Lauderdale, FL 33304	United Way of Broward County 1300 S Andrews Avenue Fort Lauderdale, Ft 33316	United Way of Broward County 1300 S Andrews Avenue Fort Lauderdale, FL 33316	United Way of Broward County 1300 S. Andrews Avenue Fort Lauderdale, Ft. 33316	United Way of Broward County 1300 S. Andrews Avenue Fort Lauderdale, FL 33316	United Way of Broward County 1300 S Andrews Avenue Fort Lauderdale, FL 33316	United Way of Broward County 1300 S Andrews Avenue Fort Lauderdale, Ft 33316	United Way of Broward County 1300 S. Andrews Avenue Fort Lauderdale, FL 33316	United Way of Broward County 1300 S Andrews Avenue Fort Lauderdale, FL 33316	University of Miami Miller School of Medicine-Div of Rheumatology 1120 NW 14th Street Locator Code DA-10 @Miami, FL 33136

Page 24	ssistance Purpose of Grant or Assistance	To support The John K Robinson Fund	To support the Jon E. Krupnick Fund	Annual distribution	Annual distribution	Annual distribution to support the Westminster Academy Indigent Students Scholarship Fund	Headmaster Council	Annual distribution	Annual distribution	Annual distribution	Annual distribution to support	Annual distribution
	Descr Non-cash Assistance											
	Valuation Method											
	Non-Cash Grant	9	Q.	0	7	2	Φ	4	80	x	2	0
	Cash Grant	1,000	5,000	24,610	5,597	5,052	2,000	1,204	17,728	868	7,072	47,310
	IRC Code	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3	S01(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-0624458	35-0868188	59 1564384	59-1564384	65-0750530	65-0750530	59-1592524	59-1592524	59-1592524	59-1592524	59-1592524
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving 55,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN 59-2477112	Name, address, and zip	University of Miami Miller School of Medicine-Div of Rheumatology 1120 NW 14th Street Locator Code D4-10 Miam, F. 33136	University of Notre Dame Department of Development 1100 Grace Hall Notre Dame, IN 46556	Urban League of Broward County S60 NW 27th Avenue Fort Lauderdale, FL 33311-8330	Urban League of Broward County 560 NW 27th Avenue Fort Lauderdale, FL 33311-8330	Westminster Academy 5601 N. Federal Highway Fort Lauderdale, FL 33308	Westminster Academy 5601 N Federal Highway Fort Lauderdale, FL 33308	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, FL 33074	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, FL 33074	Women in Distress of Broward County, Inc P.O. Box 50187 Pompano Beach, Fl. 33074	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, FL 33074	Women in Distress of Broward County, Inc P.O. Box 50187 Pompano Beach, FL 33074

Page 25	nce Purpose of Grant or Assistance	Project SAFE Place	General operating support	Services for Women Affected by	To provide general operating support	General operating support	Annual distribution	Annual distribution	Annual distribution	Annual distribution	Annual distribution to support the Multicultural Achievers Club, which takes place at the Lee YMCA	Annual distribution for adults aquatice Programs	Annual distribution
	Descr Non-cash Assistance												
	Non-Cash Grant Valuation Method												
	Non-Cash Grant	1 5	99	4 1	8	005	2	8	24	21	9	0	905
	Cash Grant	16,667	8	2,114	8,000	35	8,715	1,204	J.	35,512	1,946	4,240	σ
	IRC Code	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3	501(C)3
	EIN	59-1592524	59-1592524	59-1592524	59-2141826	59-2141826	59-2141826	59 2141826	59-0624463	59-0624463	59-0624463	59-0624463	59-0624463
Community Foundation of Broward, Inc Tax Form 990 - Part 2 Organizations Grantees Receiving \$5,000 or More Tax Year 2011 For Year Ended June 30, 2012 Region All Regions EIN \$9 2477112	Name, address, and zip	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, Fl. 33074	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, FL 33074	Women in Distress of Broward County, Inc P O Box 50187 Pompano Beach, Fl 33074	WPBT Communications Foundation 14901 NE 20th Avenue North Miami, FL 33181	WPBT Communications Foundation 14901 NE 20th Avenue North Miami, FL 33181	WPBT Communications Foundation 14901 NE 20th Avenue North Miam, FL 33181	WPBT Communications Foundation 14901 NE 20th Avenue North Miaml, FL 33181	YMCA of Broward County, Fl. 900 SE 3rd Avenue, 3rd Floor Fort Lauderdale, Fl. 33316	YMCA of Broward County, Fl. 900 SE 3rd Avenue, 3rd Floor Fort Lauderdale, Fl. 33316	YMCA of Broward County, FL 900 SE 3rd Avenue, 3rd Floor Fort Lauderdale, FL 33316	YMCA of Broward County, Fl. 900 SE 3rd Avenue, 3rd Floor Fort Lauderdale, Fl. 33316	YMCA of Broward County, FL 900 SE 3rd Avenue, 3rd Floor Fort Lauderdale, FL 33316

Name, address, and 2:p	E	IRC Code	Cash Grant	Non-Cash Grant	Valuation Method	Cash Grant Non-Cash Grant Valuation Method Descr Non-Cash Assistance	Purpose of Grant or Assistance
Young At Art of Broward, Inc 751 SW 121st Ave #1 Davle, Ft 33325	59-2832971	501(C)3	571				Annual distribution
Young At Art of Broward, Inc 751 SW 121st Ave #1 Davie, FL 33325	59-2832971	501(C)3	6,422	8			Annual distribution
Youth Automotive Training Center 399 S W 3rd Avenue Deerfield Beach, FL 33441	59-2432681	501(C)3	33,403				Annual distribution
Youth Automotive Training Center 399 S W 3rd Avenue Deerfleld Beach, Ft. 33441	59-2432681	501(C)3	10,155	10			Annual distribution
Youth Automotive Training Center 399 S. W. 3rd Avenue Deerfield Beach, FL 33441	59-2432681	501(C)3	120,287				Annual distribution
Totals			3,694,393	mil			

Form **8868**

(Rev. January 2012)
Department of the Treasury
Internal revenue-Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

ightharpoons If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file) You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filling of this form, visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Type or Employer identification number (EIN) or print COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) filing your 910 EAST LAS OLAS BLVD, NO. 200 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions 33301 FORT LAUDERDALE, FL 0 1 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return is For Code Is For Code Form 990 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 990-EZ 01 Form 4720 09 Form 990-PF Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 THE ORGANIZATION -910 EAST LAS OLAS BLVD. The books are in the care of FORT LAUDERDALE, FL 33301 Telephone No. ► (954)761-9503 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box > and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year _ ► X tax year beginning JUL 1, 2011 JUN 30, 2012 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3а If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3ь Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, 0. by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2012)

STATEMENT #1

The Community Foundation of Broward, Inc. Mission and Most Significant Activities EIN 59-2477112, Form 990 – Part I Line 1

The mission of the Community Foundation of Broward is to:

To provide leadership on community solutions and foster philanthropy that connects people who care with causes that matter.

The Community Foundation's purpose is to enhance and improve the quality of life for all who live in Broward County. We combine professional investment management with expert guidance on the science of giving to help our Fundholders achieve their philanthropic goals in perpetuity.

To accomplish this, the Community Foundation links donors' charitable dollars with results-oriented programs. We pool contributions of all donors, invest those assets, and direct a portion of the investment return into the community through an effective grantmaking process. This service is fundamental to the Foundation's purpose and role to create a permanent endowment to support our community For **Good**. For **Ever**.

The Foundation also undertakes a community leadership role by identifying emerging challenges in our region and investing in innovative programs that address them. We do this through research, grantmaking, academic scholarships and our ability to bring together different community and business sectors to collectively address problems.

Through the Foundation's Leadership Institute we also provide training programs, workshops and data to help nonprofit leaders operate their organizations efficiently and effectively in line with best business practices.

The Foundation's leadership in identifying and solving critical community issues is demonstrated in the summary of grants enclosed with this tax filing.

STATEMENT 2 COMMUNITY FOUNDATION OF BROWARD, INC. DESCRIPTION OF GRANTMAKING ACTIVITIES FYE JUNE 30, 2012 EIN # 59-2477112

Form 990 Part III Line 4a

Grantmaking Philosophy:

Applying the shared dreams of our fundholders, the Community Foundation of Broward tackles issues and provides solutions through grantmaking. All grantmaking of the Community Foundation of Broward (CFB) is brought to the Board of Directors for their approval after a recommendation has been provided by the appropriate Committee(s) i.e. Educations, Arts. All grantmaking is conducted with the intent of making an impact in the lives of those served, and the Broward community as a whole. Grantmaking is based upon community needs, assessments and statistics. Grantmaking priority is then given to programs that make a clear difference in the community through such strategies that:

- Address unmet community needs in target populations
- Use collaboration to enhance/expand services and/or reduce duplication
- Strengthen an existing program allowing it to reach new level of service
- Use creative and innovative approaches to achieve positive outcomes
- Focus on prevention and elimination of root causes
- Fill gaps in services
- Incorporate accountability and evaluation measures to improve outcomes
- Leverage support to implement the program to its fullest potential

Types of Grantmaking:

- Animal Welfare
- Art & Culture
- Capacity Building
- Civic Engagement
- Education
- Enrichment Activities
- Foster Care for youth who age out at 18
- Health
- Human Services
- Scholarships

Grantmaking Process:

As a "community" foundation, it is important to involve the community in the grant awards. Every grant is reviewed by Foundation's staff to ensure the request is in compliance with established guidelines and all information has been submitted. The Foundation staff committee will give the proposal a thorough review and may conduct research, schedule a site visit, interview grantee staff and board and talk to

STATEMENT 2 COMMUNITY FOUNDATION OF BROWARD, INC. DESCRIPTION OF GRANTMAKING ACTIVITIES FYE JUNE 30, 2012 EIN # 59-2477112 Form 990 Part III Line 4a

experts in the field. In the areas of support for Gay and Lesbian and scholarships, additional committees comprise of members familiar with the issue; work with staff in reviewing proposals and making recommendations.

Recommendations are submitted to the appropriate Committee. Each Committee is comprised of 3 to 5 Board members. Because community impact is the heart of the Foundation, most Board members serve on committees during their tenure on the Board as it broadens their understanding of the community and the need for expanded assets. The Committee reviews recommendations, declares any conflict of interest, engages in its own discussion, and matches requests with the dollars available. Final recommendations are brought to the Board of Directors for approval.

"Requests for Proposals" are announced through newsletters, mailings, press releases and on our website. Grant workshops are conducted to review guidelines and applications, to provide education on measurable outcomes, and answer questions.

When grant has been awarded, a contract is created that outlines the project specifics as described in the proposal. Grantees submit mid-year and year-end reports that includes a financial accounting report. The Foundation has a good working relationship with its' grantees. It is the goal of the Community Foundation to help grantees reach their stated outcomes to address community change.

Process to determine that scholarship recipients qualify to receive payments:

The Community Foundation of Broward (CFB) holds and administers a number of scholarship funds established by donors to provide educational grants to individuals for travel, study, or other similar purposes. CFB Scholarship Policies ensure that the educational grants meet the requirements of paragraphs (1), (2), or (3) of section 4945(g) of the Internal Revenue Code and the Pension Protection Act 2006-HR4 and are awarded on an objective and nondiscriminatory basis.

Scholarships that are based on financial need require a copy of the parent or adult student's tax return and a formula is used to determine financial need and unmet need based on Adjusted Gross Income, number of dependent family members attending college at the same time, and other financial resources dedicated for post-secondary education.

Some scholarships have additional specific criteria: course of study, college attending, GPA, US Citizen, County resident, etc. In some cases, an applicant is required to provide a copy of their parents and the student's driver's license, original school transcript and letters of reference as well as any other information needed to demonstrate they meet the criteria.

STATEMENT 2 COMMUNITY FOUNDATION OF BROWARD, INC. DESCRIPTION OF GRANTMAKING ACTIVITIES FYE JUNE 30, 2012 EIN # 59-2477112

Form 990 Part III Line 4a

Once a student is selected, they are sent an award letter that lists all the required stipulations of receiving the scholarship. They must sign and return acceptance of the award. The scholarship payment is sent directly to the college and the college is instructed as to how the fund may be used and that any unused portion must be returned to the foundation. For multi year awards, students are required to have an official transcript sent to the Foundation before additional funds are sent to the college.

All applications are reviewed initially by Foundation staff or an appointed committee. Using the above criteria, qualified recipients are selected. The committees then make their final recommendation and present to the Board of Directors for final approval.

A number of our scholarships are administered through a selection committee in partnership with the Broward Education Foundation who utilizes guidance counselors that focus on college bound students (BRACE advisors). They abide by the selection criteria for each CFB Fund, conduct due diligence in assessing the unmet financial need, make recommendations of recipients, disburse scholarship Funds to the colleges and universities of each recipient, and handle the annual follow-up verification of enrollment for students with multi-year scholarships. All verification documentation is then provided to the Foundation to release additional years' payments on multi-year scholarships.