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Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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

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

OMB No 1545-0047 2012 Open to Public Inspection

<u>A</u>	For the 20	2 calendar year, or tax year beginning , and ending			
	Check if applicat	e C Name of organization Community Foundation of North		D Employ	yer identification number
X	Address change	Central Florida, Inc.		j	
X	Name change	Doing Business As		59-	3532330
$\equiv$	-	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	one number
$\sqcup$	Initial return	5745 SW 75th Street	480	352	2-367-0060
$\sqcup$	Terminated	City, town or post office, state, and ZIP code			
$\Box$	Amended return	Gainesville FL 32608 RECENTER		G Gross rece	eipts\$ 1,322,791
H			77	O 01033 1600	
Ш	Application pend	"9   Barralla Barra	H(a) Isthisag	roup return for a	affiliates? Yes X No
		5745 SW 75th Street, #480	H(b) Are all at	fibates include	d? Yes No
		Gainesville RL 3260,8	371		(see instructions)
_	<b>-</b>		4	-,	(,
<u>+</u>	Tax-exempt sta	www.cfncf.org ( ) ◀ (insert no ) 4947(a)(1) for l \	┥		_
<u>-</u>	Website >		H(c) Group ex	222	
	Form of organiz	<del></del>	Year of formation 1	.998	M State of legal domicile <b>FL</b>
	art I	Summary			
		describe the organization's mission or most significant activities			_
93	To	promote and sustain philanthropy among the citizens	of North	Centra	al
Пaп	Fl	orida.			
19		<b></b>			
9	2 Chec	this box 🕨 🔛 if the organization discontinued its operations or disposed of more than 2	5% of its net as	sets.	
Activities & Governance	3 Numl	er of voting members of the governing body (Part VI, line 1a)		3	26
98	4 Numi	er of independent voting members of the governing body (Part VI, line 1b)		4	26
<u>₹</u>	5 Total	number of individuals employed in calendar year 2012 (Part V, line 2a)		5	6
Ç	6 Total	number of volunteers (estimate if necessary)		6	35
•		unrelated business revenue from Part VIII, column (C), line 12		7a_	0
	b Net u	nrelated business taxable income from Form 990-T, line 34		7b	0
			Prior Ye		Current Year
Φ	8 Conti	butions and grants (Part VIII, line 1h)		3,515	543,496
an.	9 Prog	am service revenue (Part VIII, line 2g)		9,707	65,442
Revenue	10 Inves	ment income (Part VIII, column (A), lines 3, 4, and 7d)		9,586	<u>75,720</u>
U.	11 Othe	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		8,704	638,133
	12 Total	revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,512	1,322,791
	13 Gran	s and similar amounts paid (Part IX, column (A), lines 1–3)	1,40	7,519	723,553
	14 Bene	its paid to or for members (Part IX, column (A), line 4)		0	0
ΘS	15 Salar	es, other compensation, employee benefits (Part IX, column (A), lines 5–10)	15	0,610	150,226
kpenses	16a Profe	ssional fundraising fees (Part IX, column (A), line 11e)		0	0
×	<b>b</b> Total	fundraising expenses (Part IX, column (D), line 25) ▶ 110, 163			
Ű	17 Othe	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		0,775	189,831
	18 Total	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		8,904	1,063,610
	19 Reve	nue less expenses. Subtract line 18 from line 12		2,608	259,181
Net Assets or			Beginning of Cu		End of Year
Set	<b>20</b> Total	assets (Part X, line 16)	10,37		11,276,761
A E	21 Total	liabilities (Part X, line 26)		9,068	1,820,333
_		ssets or fund balances. Subtract line 21 from line 20	8,74	4,190	9,456,428
	Part II	Signature Block			
		of perjury, I declars that I have examined this return, including accompanying schedules and statem id complete. Declaration of preparer (other than officer) is based on all information of which preparer			owledge and belief, it is
		/ yang/la		8/	23/2013
Sig	gn 🖊	Signature of officer		Date	_
He	ere 📗	Bazzella Papa Presi	.dent		
_		Type of print name and title			
		Type preparer's name Preparer's signature	Date	Check	If PTIN
Pai	id Ste	phen H. Kattell, CPA	08/16	/13 self-em	ployed P01278226
		sname > Kattell & Company, V.L.	1	Firm's EIN	
Use	e Only	808B NW 16th Ave			
	Firm	saddress > Gainesville, FL 32601	],	Phone no	352-395-6565
Ma		cuss this return with the preparer shown above? (see instructions)			X Yes No
		leduction Act Notice, see the separate instructions.			Form 990 (2012)
DAA	١				$\Delta \Delta $

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u>x</u> _	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<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 during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	<u> </u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
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	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	l	7.	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_X_	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	١ ا		3,5
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	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	7.7	X
8	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		7.7	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		77	
	Schedule D, Parts XI and XII	12a	X	_
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	<b> </b>		
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			<b> </b> ₩
47	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			v
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		<b>.</b>
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	,,		<sub>~</sub>
20-	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-	<del>  ^</del>
_ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	l	Ц

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization	١,	4.	
••	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			v
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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			v
04-	employees? If "Yes," complete Schedule J	23		<u>X</u>
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	04-		v
_	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	ا م	į į	
	to defease any tax-exempt bonds?	24c		
25a	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	25a		x
<b>.</b>	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<del></del>	
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 Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or	230		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1	<del>                                     </del>	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u></u> -		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		<u> </u>	
	Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		ł	
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ	<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	<u> </u>	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	ļ	X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<del> </del>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<del>  -</del>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		]	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
00	Part VI	37	├	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		<b>.</b>	
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	) (2012)
		FΛ	- <b></b>	. /2012\

F	Chock if Schoolule Cooptains a response to any question in this Bort	. \ /				
	Check if Schedule O contains a response to any question in this Part	l V			Yes	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8	<u> </u>	res	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	$\dashv$		
c	Did the organization comply with backup withholding rules for reportable payments to vendors a			$\dashv$		
·	reportable gaming (gambling) winnings to prize winners?	2110		1c	f !	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	1	1.0		
2.0	Statements, filed for the calendar year ending with or within the year covered by this return	2a	6			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax				x	ĺ
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instru					$\vdash$
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	f I	x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		<del></del>
4a		other authori	itv	100		
	over, a financial account in a foreign country (such as a bank account, securities account, or other		•			
	account)?			4a		х
b						
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Final	ancial Accou	nts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye			5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ransaction?		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	did the				
	organization solicit any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such cont	tributions or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	ly for goods				
	and services provided to the payor?			7a	igsquare	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	h it was				
	required to file Form 8282?	1 1	İ	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		<b>-</b>   _	ŧ !	
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ber		!?	7e	┝──┤	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit			7f	-	<u> </u>
g	If the organization received a contribution of qualified intellectual property, did the organization of			7g	-	<del></del>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, did the organiz	•	e a Form 1098-C?	7h		$\vdash$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support	_				
	<b>organizations.</b> Did the supporting organization, or a donor advised fund maintained by a spons organization, have excess business holdings at any time during the year?	sonng		8	†	х
9	Sponsoring organizations maintaining donor advised funds.			-		<u> </u>
а	Did the organization make any taxable distributions under section 4966?			9a	ŧ !	<u>x</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter:			"		<del></del>
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter	<u></u>				
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources			$\neg$		
	against amounts due or received from them )	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	f Form 1041	?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note. See the instructions for additional information the organization must report on Schedule C	٥.				
b	Enter the amount of reserves the organization is required to maintain by the states in which		•		•	
	the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c			<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	<b> </b>	X
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sci	hedule O	·	14b	<u> </u>	<u>L</u>
DAA				Fo	m <b>99</b> (	0 (2012)

Form 990 (2012) Community Foundation of North 59-3532330 Page 6 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  $|\mathbf{X}|$ Section A. Governing Body and Management Yes No 26 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 1b 26 Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members. X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes." provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 5745 SW 75th Street #480 organization: > Barzella Papa 352-367-0060 Gainesville FL 32608

• •	-									
Form 990 (2012) Community	y Foundat	tic	n	of	N	or	th	59-353	2330	Page <b>7</b>
								Key Employees, Hig	hest Compensated	
Independent C										
· · · · · · · · · · · · · · · · · · ·								uestion in this Part VI		
-								t Compensated Employed		
1a Complete this table for all person organization's tax year				•				•	-	
<ul> <li>List all of the organization's cu compensation. Enter -0- in columns</li> </ul>	(D), (E), and (F)	ıf no	cor	npen	sati	on w	as p	aid		
List all of the organization's cu		-		•					• •	
<ul> <li>List the organization's five cur who received reportable compensate organization and any related organization.</li> </ul>	ion (Box 5 of For									
<ul> <li>List all of the organization's fo</li> <li>\$100,000 of reportable compensation</li> </ul>	on from the orga	nizat	tion a	and a	any r	elate	ed or	ganizations.		
<ul> <li>List all of the organization's forganization, more than \$10,000 of List persons in the following order: if compensated employees, and formed</li> </ul>	reportable compo ndividual trustees	ensa	tion	from	the	orga	ınıza	tion and any related organ	izations	
Check this box if neither the org	anization nor any	y rela	ated	orga	nıza	tions	соп	npensated any current offic	er, director, or trustee	
(A) Name and Title	(B) Average hours per week (list any	bo	x, unle		rson ı	s both	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)Dink Henderson						一				
Board Member	1.00	x						o	o	o
(2) Eric Godet					l				<del></del>	
	1.00									
Vice Chair	0.00	X		X				0	0	0
(3) Ester Tibbs							ŀ			
	1.00									_
Board Member	0.00	X	_			_	_	0	. 0	0
(4) Howard Patrick	1.00									
Immediate Past Chair	0.00	x						0	o	o
(5) Linda Kallman	0.00	┢		_	$\vdash$	_	-	<u>                                       </u>	0	<u> </u>
(5) Eliaa Kalimaii	1.00									
Board Member	0.00	x			l			0	О	o
(6) Luis Diaz	1	Ħ		1	<del>                                     </del>	<u> </u>	$\vdash$	<u> </u>		<u> </u>
•	1.00									
Board Member	0.00	x	L	L	L	L	L	0	0	0
(7) Marilyn Tubb										

0

Board Member
(11) Perry McGriff

Board Chair

DAA

1.00 X X

Form **990** (2012)

0

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Part VII · Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)				
. (A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson ı	than o s both r/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations (W-2/1099-MISC)	i	(F) Estimate amount o other empensa from the	of tion	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-21055-MISC)	а	rganizati	ion ed	
(12) Phil Emmer								-					
	1.00		1										_
Board Member	0.00	X	├	-		-	$\vdash$	0	0				
(13) Richard White	1.00							}					
Board Member	0.00	x	 	l			<u> </u>	o	0				C
(14) Stuart Wegener									-				
. ,	1.00												
Board Member	0.00	X						0	0				C
(15) Susannah Peddie													
Daniel Warker	1.00	Ļ											C
Board Member (16) Terry Van Nortw	0.00	X	$\vdash$	┢	$\vdash$	╁		0	0				
(10) Telly van Norch	1.00												
Board Member	0.00	x						o	O				C
(17) Tony Kendzior			Π										
	1.00												_
Secretary	0.00	X	├	X	├	<b>├</b> —	<u> </u>	0	0				
(18)Wes Marston	1 00					1							
Board Member	1.00	x		ļ				o	0				C
(19) Mitch Glaeser	0.00	┢	H	┢		├				-			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.00	1			1								
Treasurer	0.00	x		х				0	0	<u> </u>			
1b Sub-total							<b>&gt;</b>						
c Total from continuation she	ets to Part VII,	Sect	ion /	A				74,289		<u> </u>		0,:	
d Total (add lines 1b and 1c)	aluding but not	lımite	od to	thos	e lie	tod c	bov	74,289	****	<u> </u>		0,:	124
2 Total number of individuals (in reportable compensation from				uios	e 115	ieu a	IDUV	e) who received more than	\$100,000 III				
								<u>-</u>			1	Yes	No
3 Did the organization list any for employee on line 1a? If "Yes,"								loyee, or highest compensa	ited		3		х
4 For any individual listed on line								on and other compensation	from the				
organization and related organ	nizations greatei	r thai	n \$15	50,00	00? I	f "Ye	s," c	complete Schedule J for su	ch		4		x
individual  5 Did any person listed on line 1	la receive or acc	crue	com	pens	atio	n froi	n an	ny unrelated organization or	· ındıvıdual	F	-		<u> </u>
for services rendered to the or											5		X
Section B. Independent Contracto													
<ol> <li>Complete this table for your five compensation from the organic</li> </ol>										ear.			
	(A) business address								(B) tion of services		Con	(C) npensal	tion
- Name and	Duginess Budress	-					T		udi di del video			протос	0011
												_	
										1			
	<u> </u>						-		<del></del>	$\longrightarrow$			
										l			
			-				╁		<del></del>	+			
												_	
		•											
2 Total number of independent received more than \$100,000	contractors (incl	udin	g but	not	limit	ed to	tho	se listed above) who	0				

Part VII · Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
. (A) Name and title	(B) Average hours per week (list any	bo	x, unl	Pos check ess pe	rson ı	than o s both r/truste	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(12)Clark Hodge	1.00									
Board Member	0.00	X	_			_		1 0	0	0
(13)Carrie Lee										
	1.00	,,				ļ				
Board Member (14)Mark Avera	0.00	X	$\vdash$			-	<u> </u>	0	0	0
(14)Mark Avera	1.00					ļ				
Board Member	0.00	x				l		l	0	O
(15) Stan Given	1	-	-	<del> </del>						-
(10) 20 444	1.00									
Board Member	0.00	x						0	0	0
(16) Cathy Jenkins									-	
	1.00									
Board Member	0.00	X	_		_			0	0	0
(17)Peter Maren										
	1.00	l	ĺ		1					_
Board Member	0.00	X	<b> </b>	<u> </u>	_	<u> </u>	_	0	0	0
(18)W. J. Rossi	1.00			ļ		l				
Board Member	0.00	$\mathbf{x}$						0	0	0
(19)Barzella Papa		T								
	40.00								_	
President	0.00			X				74,289	0	10,124
1b Sub-total								74,289		10,124
c Total from continuation she	ets to Part VII,	Sect	ion	A						
d Total (add lines 1b and 1c)  2 Total number of individuals (ir	actuding but not	limite	ad to	thos	o lie	tod s	boy	e) who received more than	\$100,000 in	<u> </u>
2 Total number of individuals (ir reportable compensation from			eu lo	0108	e 115	ileu a	IDOV	e) who received more than	\$ 100,000 III	
								<del></del>		Yes No
3 Did the organization list any fo								loyee, or highest compensa	nted	3
employee on line 1a? If "Yes," 4 For any individual listed on lin								on and other compensation	from the	
organization and related organ										
individual									P 1 1	4
5 Did any person listed on line for services rendered to the o									ringividual	5
Section B. Independent Contracto		100,	0011	pict		11000		ior oddir person		
1 Complete this table for your fi	ve highest comp									
compensation from the organ		omp	ensa	ition	for t	he c	aleno T			
Name and	(A) d business address						ــــ	Descrip	(B) stion of services	(C) Compensation
<del></del>							$\vdash$			
							$\vdash$		<del> </del>	
										1
							$\vdash$			
2 Total number of independent								se listed above) who		
received more than \$110 (10)	or compensatio	n mo	יוו ווו	$\sim \alpha rc$	เสกเร	MILL				l l

**Part VIII** Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII. (A) Total revenue (B) Related or (C) Unrelated (D) Revenue exempt function business excluded from tax under sections 512, 513, or 514 revenue revenue 1a Federated campaigns 1a 1b b Membership dues 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f 543,496 g Noncash contributions included in lines 1a-1f 543,496 h Total. Add lines 1a-1f Program Service Revenue Busn Code 2a 43,110 43,110 Interest on program loan 17,982 17,982 b Administrative Fees Other 4,350 4,350 f All other program service revenue g Total. Add lines 2a-2f 65,442 3 Investment income (including dividends, interest, and other similar amounts) 75,720 75,720 Income from investment of tax-exempt bond proceeds Royalties 638,133 638,133 (i) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from (i) Secunties (II) Other sales of assets other than inventory **b** Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from garning activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold ь c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue Total. Add lines 11a-11d Total revenue. See instructions. 1,322,791 22,332 0 756,963

Part IX Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a respon			biete column (A).	
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	714,163	714,163		
2	Grants and other assistance to individuals in				<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				······································
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	9,390	9,390		
4	Benefits paid to or for members				***************************************
5	Compensation of current officers, directors.				
	trustees, and key employees	84,413	8,441	16,883	59,089
6	Compensation not included above, to disqualified			-	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	53,249	21,574	27,630	4,045
8	Pension plan accruals and contributions (include	,	,	=:,,,,,	-,
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,390	1,017	2,034	339
10	Payroll taxes	9,174	2,018	3,027	4,129
11	Fees for services (non-employees)			-,	-,
а	Management				
b	Legal		-		
c	Accounting	29,803		29,803	
ď	Lobbying				
е	Professional fundraising services See Part IV, line 17				· <del></del>
f	Investment management fees	12,331		12,331	
g	Other (If line 11g amount exceeds 10% of line 25, column				***
•	(A) amount, list line 11g expenses on Schedule O)	2,675	2,675		
12	Advertising and promotion	8,122	1,787	2,680	3,655
13	Office expenses	28,036	5,649	8,477	13,910
14	Information technology	15,914	3,501	5,252	7,161
15	Royalties				. , . ,
16	Occupancy	17,635	3,880	5,819	7,936
17	Travel	3,830	843	1,264	1,723
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization	2,843	626	938	1,279
23	Insurance	2,149	473	709	967
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column		1		
	(A) amount, list line 24e expenses on Schedule O)				,
а	Program expenses	59,507	59,507		
b	Special Events	6,986	1,056	<del>-  -</del>	5,930
c	- <u>-</u>			<del>                                     </del>	2,230
ď	· · · · · ·			·	
8	All other expenses		·		_
25	Total functional expenses. Add lines 1 through 24e	1,063,610	836,600	116,847	110,163
26	Joint costs. Complete this line only if the	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	200,000		
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if				
	following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 18,591 623,487 Cash-non-interest bearing 311,404 141,525 2 Savings and temporary cash investments 105,260 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoning organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 1,650 6,650 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 19,577 other basis Complete Part VI of Schedule D 10a 13,514 5,778 6,063 10b 10c b Less: accumulated depreciation 5,563,291 6,017,907 11 Investments—publicly traded securities 11 3,854,000 3,736,974 12 12 Investments—other securities See Part IV, line 11 540,310 537,129 13 Investments---program-related See Part IV, line 11 13 14 Intangible assets 14 90,000 90,000 15 15 Other assets. See Part IV, line 11 10,373,258 11,276,761 16\_ Total assets. Add lines 1 through 15 (must equal line 34) 16 4,293 5,997 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 1,624,775 1,814,336 of Schedule D 1,629,068 1,820,333 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ or Fund Balances complete lines 27 through 29, and lines 33 and 34. 893,306 898,155 27 Unrestricted net assets 466,401 808,772 28 Temporarily restricted net assets 7,384,483 7,749,501 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 8,744,190 9,456,428 33 33 Total net assets or fund balances 10,373,258 11,276,761 Total liabilities and net assets/fund balances

orm	990 (2012) Community Foundation of North 59-3532330				P <u>ag</u>	<u>je 12</u>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			22,	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,06	3,6	<u> 610</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		25	9,:	181
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8	,74	4,:	190
5	Net unrealized gains (losses) on investments	5		33	6,0	031
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9		11	7,0	026
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	9	, 45	66,4	<u>428</u>
Pa	rt 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			ı		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			I		
	Schedule O.			1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			ı		
	reviewed on a separate basis, consolidated basis, or both:			I		
	Separate basis Consolidated basis Both consolidated and separate basis			- 1		
b	Were the organization's financial statements audited by an independent accountant?		1	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			I		
	separate basis, consolidated basis, or both:			I		
	Separate basis Consolidated basis Both consolidated and separate basis			1		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		<u> </u> _	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			I		
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		Į			
	the Single Audit Act and OMB Circular A-133?		Ĺ	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		İ			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3h		l

Form **990** (2012)

### SCHEDULE A (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.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Community Foundation of North Central Florida, Inc.

Employer identification number 59 - 3532330

ne	orgai	nization is not	a private foundation because	e it is: (For lines 1 through 11, c	песк опіу	one box.	.)						
1	Ш	A church, cor	ivention of churches, or asso	ociation of churches described i	n section	170(b)(1	)(A)(i).						
2	Ш	A school desc	cnbed in <b>section 170(b)(1)(</b>	A)(ii). (Attach Schedule E.)									
3	$\Box$	A hospital or	a cooperative hospital service	e organization described in sec	tion 170	(b)(1)(A)(i	ii).						
4				I in conjunction with a hospital o				(1)(A)(ii	i). Ente	r the ho	ospital's name	,	
		city, and state		•									
5		•		f a college or university owned	or operate	ed by a go	yemme	ntal unit	describ	ed in			
•		=	b)(1)(A)(iv). (Complete Part			, ,							
6		-		overnmental unit described in se	ection 17	0/h)/1\/A	1/v1						
7	X			substantial part of its support fro				rom the	genera	Loublic			
•	4	•	<u>-</u>	• • • • • • • • • • • • • • • • • • • •	in a gove	mmema	unit or 1	ioni aic	genera	Public			
•			section 170(b)(1)(A)(vi). (Co		11.3								
0	H	-		70(b)(1)(A)(vi). (Complete Part									
9	Ш	•		) more than 33 1/3% of its supp							188		
				pt functions—subject to certain									
				d unrelated business taxable in				) from b	usiness	es			
			-	0, 1975. See section <b>509(a)(2)</b> .									
10	Щ	•	•	exclusively to test for public safe	-								
11				exclusively for the benefit of, to p									
				ed organizations described in se						section	1		
		<b>509(a)(3)</b> . Ch	eck the box that describes the	ne type of supporting organization			nes 11e <sub>.</sub>	through	11h				
		a Type	I b Type II	c Type III–Functions	ally integra	ated	d [	Тур	e III–No	n-funct	ionally integra	ted	
е				anization is not controlled direct									
		other than for	undation managers and othe	r than one or more publicly sup	ported org	ganizatıor	is descri	bed in s	ection 5	509(a)(1	1)		
		or section 50											
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II, o	or Type I	II suppo	rtıng				
		organization,	check this box										
g		Since August	t 17, 2006, has the organizat	tion accepted any gift or contrib	ution from	any of th	ie						
		following per	sons?										
		(i) A persor	who directly or indirectly co	entrols, either alone or together	with perso	ons descr	ibed ın (	ıı) and				Yes	No
		(III) belov	w, the governing body of the	supported organization?							11g(i)		
		(ii) A family	member of a person describ	ed in (i) above?							11g(ii)		
		(iii) A 35% c	ontrolled entity of a person of	described in (i) or (ii) above?							11g(iii)		
h		Provide the f	following information about the	he supported organization(s)									
	i) Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) is the d	organization	(v) Did y	ou notify	(vi) I	s the	(vii) Amount	of moneta	ary
•		ganization	`,	(described on lines 1-9	ın col (i) lı	sted in your		ization in	organizati		supp	ort	
				above or IRC section	governing	document?	col (i)	or your xort?	(i) organii U S	zea in ine S?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
(A)													
., .,										1			
(B)					<u> </u>								
ν-,							j						
(C)					<u> </u>					-			
(0)													
(D)					<del>                                     </del>	<u> </u>		-					
(0)					1				]				
(E)					<del>                                      </del>	<del>                                     </del>			<del>                                     </del>				
( <b>-</b> /													
Tota	a i					1							
					. <del> </del>	<b>T</b>	T						

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	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	560,353	1,050,736	1,506,772	1,413,515	543,496	5,074,872
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	560,353	1,050,736	1,506,772	1,413,515	543,496	5,074,872
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						2,748,598
6	Public support. Subtract line 5 from line 4	<u></u>	1	<u></u>			2,326,274
	tion B. Total Support  ndar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
		<del>``</del>	- ' '				<del>                                     </del>
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	560,353 100,446	1,050,736 570,466	1,506,772 614,357	1,413,515 698,290	543,496 713,853	
9	Net income from unrelated business activities, whether or not the business is regularly carned on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	41,842	43,786	43,582	43,353	43,110	215,673
11	Total support. Add lines 7 through 10						7,987,957
12	Gross receipts from related activities, etc.	(see instructions)				12	43,550
13	First five years. If the Form 990 is for the	organization's first	, second, third, for	urth, or fifth tax yea	ir as a section 501	(c)(3)	
	organization, check this box and stop her						<b>•</b>
Sec	tion C. Computation of Public Su	upport Percent	age				
14	Public support percentage for 2012 (line 6	• • •	-	n (f))		14	29.12%
15	Public support percentage from 2011 Sch					15	30.19%
16a	33 1/3% support test—2012. If the organ	ization did not ched	k the box on line	13, and line 14 is 3	3 1/3% or more, c	heck this	
	box and stop here. The organization qual	•	*				▶ ∐
b	33 1/3% support test—2011. If the organ				5 is 33 1/3% or mo	ore,	▶ □
	check this box and stop here. The organization					4.4	
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meet						
	Part IV how the organization meets the "fa organization						<b>▶ X</b>
b	10%-facts-and-circumstances test—201	=					
	15 is 10% or more, and if the organization						
	Explain in Part IV how the organization me	eets the "tacts-and-	circumstances" te	st The organization	in quaimes as a pu	IDIICIY	▶ □
40	supported organization	d not shook a bess	n line 12 15c 15	h 17a or 17h aba	ack this have and as	20	
18	Private foundation. If the organization de instructions	u not check a box (	ліше із, іба, іб	ט, ווא, טר ווט, CNE			. •

## 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.)

Sec	tion A. Public Support	quality under t	ile lesis listed i	Jeiow, piease C	onipiete Part I	1.)	
	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(a) 2000	(6) 2003	(6) 2010	(u) 2011	(6) 2012	(I) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5		<u> </u>				
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	• • •					
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6					_	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax yea	ar as a section 50	1(c)(3)	
	organization, check this box and stop her						<u>▶                                    </u>
	tion C. Computation of Public Su					,	
15	Public support percentage for 2012 (line 8			nn (f))		15	%
16	Public support percentage from 2011 Sch	edule A, Part III, III	ne 15			16	%_
	tion D. Computation of Investme				<u> </u>	1 1	
17	Investment income percentage for 2012 (I	-	•	3, column (f))		17	%
18	Investment income percentage from 2011					<u> 18  </u>	%
19a	33 1/3% support tests—2012. If the orga						<u> </u>
b	17 is not more than 33 1/3%, check this be 33 1/3% support tests—2011. If the orga						▶ _
J	line 18 is not more than 33 1/3%, check th						▶ □
20	Private foundation. If the organization de						

Part II, Line 10 - Other Income Detail

Interest from Mortgage Receivable \$ 215,673

Part II, Line 17a - 10% Facts and Circumstance Test - 2012

#### FACTS AND CIRCUMSTANCES

The Community Foundation of North Central Florida (formerly known as the Gainesville Community Foundation) was established to create a permanent charitable endowment for Gainesville and the surrounding communities. Its purpose is to allow local citizens to make contributions to satisfy a broad range of changing charitable needs in our community.

There are now more than 700 such community foundations in the country. The mission of all community foundations is essentially the same: to promote philanthropy among individuals, organizations, and businesses and create a permanent endowment fund for the community in which they live. Community foundations are locally administered. They support health, social services, civic affairs, community development, historic preservation, art, conservation and the environment.

#### Public Support Test

The Community Foundation of North Central Florida, Inc. (CFNCF) does not meet the one-third public support test. However, due to the nature of CFNCF we believe it is responsive to the general public rather than to a limited number of donors.

Treas. Reg. §1.170A-9(e)(10) recognizes that community foundations, also referred to as community trusts, are established to attract large

contributions of a capital or endowment nature for the benefit of a particular community or area, and that such contributions come initially from a small number of donors. That being so, if the community foundation cannot meet the 33 1/3 percent-of-support test, it can still qualify as a public charity if it is organized and operated so as to attract new and additional public or governmental support on a continuous basis sufficient to meet the facts and circumstances test of paragraph (e)(3) of Treas. Reg. §1.170A-9.

In addition, Treas. Reg. §1.509(a)-3(a)(4) provides that the purpose of the one-third support test is to insure that an organization ... "is responsive to the general public, rather than to the private interests of a limited number of donors or other persons.''

Treasury Regulation § 1.170A-9(e)

Treas. Reg. §1.170A-9(e)(3) provides that even if an organization fails to meet the 33 1/3 percent-of-support test, it will be treated as a "publicly supported" organization if it normally receives a substantial part of its support from governmental units, from direct or indirect contributions from the general public, or from a combination of these sources, and meets other requirements.

We believe CFNCF meets these other requirements as outlined below.

Ten Percent-of-Support Limitation

Treas. Reg. §1.170A-9(e)(3)(i) provides that the percentage of support received from the general public be "substantial." "Substantial" is defined as a total amount of public support which equals at least 10 percent of the total support ''normally'' received.

For the period at Form 990, Schedule A, Part IV-A, the amount of public

support is 29 percent; therefore, a ''substantial'' amount.

Attraction of Public Support

Treas. Reg. §1.170A-9(c)(3)(ii) provides that an organization must be so organized and operated as to attract new and additional public or governmental support on a continuous basis.

One of the difficulties for CFNCF in meeting the public support test is the fact that our Board took great care to lay the groundwork for its perpetual existence. The initial Board consisted of 12 unrelated individuals from the community. The organization's seed capital consisted of small donations from Board members. From that we managed to create a website (www.gnvcf.org) to publicize the Community Foundation.

Because one of the missions of community foundations is to assist other charitable organizations in the community, we were careful not to be seen as competing with other charitable organizations in our community, particularly with respect to fund raising. To that end we made a conscious choice not to hold, for example, public fundraisers that would compete with public fundraisers held by other charitable organizations in our community. Instead, Board members, who for the most part also serve on Boards of other charitable organizations, began a program to educate other charitable organizations as to our existence and our willingness to work with these other organizations. To that end, we made it clear that we were not trying to replace other charities. If a donor has a charitable intent that could be fulfilled through another organization, we would encourage the individual to support that organization. The Community Foundation of North Central Florida would instead provide for philanthropy supporting charitable projects and areas of interest not covered by already existing charities.

Treas. Reg. §1.170A-9(e)(10) provides that a community foundation is not required to engage in periodic, community-wide, fund-raising campaigns directed toward attracting a large number of small contributions in a manner similar to campaigns conducted by a community chest or united fund. So our primary focus was (and still is) to educate the community about the benefits of a community foundation. We did this through our Board members in other ways. Primarily, individual Board members met with influential people in the community to explain the mission of the Community Foundation. This was and is done on a methodical basis. First, a list of all potential donors was created. It was then divided into individuals and companies. Next, Board members who were familiar with the individuals or companies were assigned, usually in teams of two, to have lunch or breakfast with them. We realized that one lunch or breakfast would not necessarily produce a check. We did not want to solicit small donations, as we felt this might be seen as competing with local fundraising, such as United Way. So we speak with potential donors about major gifts benefiting Gainesville and the surrounding communities. This is a long-term educational process, which we believe will result in a far stronger and more resilient community foundation for the future,

We also assist other nonprofit agencies. By doing so, we will create goodwill in the community, which in turn should bring broad public support for the Community Foundation. Some examples are provided below:

The Women's Giving Circle. The Women's Giving Circle an initiative of the Community Foundation of North Central Florida which begun in 2007 was established to promote charitable giving to programs which support women and girls in Alachua County. Each member contributes \$1,000 annually. The Circle has generated more than \$500,000 in grants since inception. The

recipients of these grants include Girl Scouts of Gateway Council, Girls Club of Alachua County, Catholic Charities Bureau, Peaceful Paths, Take Stock in Children, Displaced Homemakers Program and Pace Center for Girls. Kincaid Loop Neighborhood Fund. The purpose of this Fund is to pay for the construction, operation, or maintenance of capital facilities and to support activities to improve the community in the area of the Kincaid Loop which is affected by operation of the Florence Landfill. Currently the Kincaid Loop Committee is researching methods to help manage the increasing problem of invasive exotic (non-native) plants in the neighborhood. Invasive exotics are altering native plant communities by displacing native species, changing community structures or ecological functions, or hybridizing with natives.

Friends of Tacachale Fund. Tacachale is a Florida State Agency for Persons with Disabilities residential center. More than 470 adult men and women, with varying developmental disabilities live in homes on the 550-acre campus in east Gainesville.

The Friends of Tacachale Fund, which was established in 2007, benefits the quality of life for all who live at Tacachale. The fund distributions may be used for items such as holiday gifts, new athletic equipment, or participation in the Special Olympics

The Friends of the Alachua County Public Schools Elementary Arts & Music Programs. In 2008, local elementary schools faced budget cuts that reduced their art and music programs by 50 percent. This fund was created by a group of retired teachers in response to the cuts in an effort to support and enhance local elementary art and music programs not covered by tax dollars. More than \$80,000 was raised by many local citizens and in the first year, each of the 25 elementary schools in Alachua County received

\$2,000 to benefit their arts and music programs.

Philip Clark Memorial Fund. The Community Foundation also worked to receive a small fund known as the Philip Clark Memorial Fund. Through this Fund, we will provide scholarships to ROTC students who graduate from Buchholz High School.

So our slow, methodical approach has worked. Due to our efforts at publicity, and especially due to many meetings by Board members with potential donors, CFNCF received two substantial gifts in the past two years, which have prevented us from meeting the 33 1/3 percent support test. These donations are listed below:

#### Peaceful Paths

In October 2011, the Community Foundation received a gift of \$967,500 to establish the Peaceful Paths Advancement Fund. The purpose of the fund was to purchase land for the domestic violence program in order to expand their current facility and build transitional housing for their participants.

#### Matheson Museum Fund

In December 2010, upon the referral from a local advisor, an anonymous donor established an endowed fund to benefit the Matheson Museum. The donor gifted \$500,000 at the time of the fund creation and pledged an additional \$500,000 to follow in 2011, bringing the total fund to \$1 million. The pledge was recorded as a receivable at the close of 2010 and the pledge was fulfilled in 2011.

Treas. Reg. §1.170A-9(e)(3)(10) provides that the requirement for attraction of public support for a community foundation will be generally satisfied if the community foundation seeks gifts and bequests from a wide range of potential donors in the community, through banks or trust

companies, through attorneys or other professional persons, or in other appropriate ways which call attention to the community foundation as a potential recipient of gifts and bequests made for the benefit of the community or area served.

In this respect, the Community Foundation has established the Professional Advisor Council, whose mission is to promote philanthropy among citizens of This council consists of professionals with Gainesville, Florida. expertise in tax law, estate planning, accounting, investment, financial planning, wealth management, insurance and family foundations. the council will share the common objectives of promoting philanthropy in our area and helping taxpayers achieve their philanthropic goals. In addition, several board members are also members of the Gainesville Estate Planning Council. Part of the initial impetus to form the Community Foundation came from the Estate Planning Council, which recognized the need for such a foundation in our community. Current Board members -Kendzior, Wes Marston, W.J. Rossi and Richard White - are attorneys or professionals who regularly call the attention of clients and members of the Gainesville Estate Planning Council to the work of the Community Foundation.

Given the above, we feel we maintain a continuous and bona fide program for solicitation of public funds from the general public or community, and that the scope of our fundraising activities is reasonable in light of our charitable activities pursuant to Treas. Reg. §1.170A-9(e)(3)(ii).

Factors in Considering Public Support

Treas. Reg. § 1.170A-9(e)(3)(ii) provides that factors relevant to each case and the weight accorded to any of them may differ depending upon the nature and purpose of the organization and the length of time it has been

in existence.

Percentage of Financial Support

Treas. Reg. § 1.170A-9(e)(3)(iii) states that the higher the percentage of support above the 10 percent requirement, the lesser the burden of establishing the publicly supported nature of the organization through other factors. We believe it relevant that in the first three years of the Community Foundation, it would have met the 33 1/3 public support test, and that only a few large gifts in years 4, 5 and 8 caused the Community Foundation to have less than 33 1/3 percent public support. We would also like to point out that even though our public support percentage dropped slightly this year, it has been rising as follows:

2001-2004 12% 2004-2007 21% 2002-2005 13% 2004-2008 28% 2003-2006 19% 2005-2009 30% 2007-2011 2006-2010 30% 30%

#### Sources of Support

Treas. Reg. §1.170A-9(e)(3)(iv) provides for taking into account that support is from a representative number of persons rather than from the members of a single family. In fact, all of the large gifts discussed above were received are from unrelated donors whose contributions were solicited by members of the Board of the Community Foundation of North Central Florida.

Other Funds received by the Organization

In addition to helping individuals reach their personal goals for charitable giving, the foundation also strives to help other not-for-profits reach philanthropic objectives. Beginning in 2007, the Corporation

entered into agreements to hold and invest funds for specified organizations. Amounts provided by the specified organizations and held by the Corporation are accounted for as agency funds payable and are not reflected in the numerator or denominator of the public support calculation. The Agencies and their account balances at December 31, 2011 and 2012 are listed below. If these amounts were included in the numerator and denominator, the public support percentage would be in excess of 33.3%

	2011	2012
Alachua Conservation Trust	502,122	558,232
Alachua County Public Schools Foundation	272,908	286,224
Guardian Foundation Fund	70,168	77,526
Historic Melrose Fund	46,580	34,754
Historic Trust Matheson Museum	217,587	284,240
Meridian Behavioral Healthcare	90,883	97,840
Meridian-Haynie Trust	383,748	429,712
Reichert House	40,779	40,805
Totals	1,624,775	1,809,336

### Representative Governing Body

Treas. Reg. §1.170A-9(e)(3)(v) provides for taking into account that the governing body represents the broad interests of the public, rather than the personal or private interests of a limited number of donors. The current directors of the Community Foundation are listed on the Form 990, Part V-A. The bios of the following board members illustrate the type of individuals involved in CFNCF.

Ester Tibbs, District 3 Administrator (Retired) - Florida Department of Children and Families

Ester has worked for with the Fl. Dept. of Children & Families for over 30 years and served as the District 3 Administrator since 1995. Ester's life as a community leader is full and productive as well. For more than 12 years she has served on both the boards of the Alachua County Girls Club and the United Way of North Central Florida. She also serves on the boards of Shands Hospital, the Alachua County Healthy Communities Initiative, the Altrusa Club, and Oak Hammock (the University of Florida's retirement community).

Marilyn Tubb, Vice President for Community Relations -- Santa Fe College (a public college of the State of Florida)

Known throughout the Southeast and nationally as a champion for health and wellness, Marilyn has spearheaded dozens of acclaimed community initiatives and helped lead a multitude of civic and not-for-profit organizations.

Marilyn is past chair of the Community Foundation and the Gainesville Area Chamber of Commerce and is a current member and former chair of the Gainesville-Alachua County Regional Airport Authority. She chairs the Alachua County Economic Development Advisory. Marilyn was founder and coordinator for the Alachua County Healthy Community Initiative, a citizens 'think tank' for addressing community issues and promoting a strong economy, social justice, environmental issues and education. She was one of 40 people nationwide to receive a fellowship to study national programs on community health and consequently served as co-chair of the Gainesville Well City USA Campaign.

The remaining members represent a broad cross-section of the views and interests of the community or have special knowledge or expertise helpful to the Gainesville Community Foundation.

Availability of Public Services

Treas. Reg. §1.170A-9(e)(3)(vi) provides for taking into account that the organization maintains a definitive program to accomplish its charitable work in the community. The following examples illustrate how CFNCF provides public services.

Elementary Arts & Music Education. It will continue to fund various art and music programs at public elementary schools in Alachua County.

Sponsorship of Events. CFNCF serves as a convener of other charitable agencies. For example, the Community Foundation, in partnership with our local United Way, recently sponsored a educational symposium for local nonprofit staffs and boards. CFNCF also hosted a continuing education course for local advisors on upcoming changes in estate planning.

Additional Factors: Appealing to Persons Having Common Interest Treas. Reg. §1.170A-9(e)(3)(vii), subsections (a) and (b), provide that the following should be considered:

"solicitation for dues-paying members is designed to enroll a substantial number of persons in the community.

"dues for individual members have been fixed at rates designed to make membership available to a broad cross-section of the interested public. In this regard, the Women's Giving Circle (discussed above and repeated here), an initiative of the Community Foundation, was established in 2007 to promote charitable giving to programs which support women and girls in Alachua County. Each member contributes \$1,000. Since inception, the Giving Circle has awarded more than \$500,00 in grants to local programs benefiting women and girls. The recipients of these grants include the following 501 (c) (3) organizations: Girls Scouts of Gateway Council, Girls Club of

Alachua County, Catholic Charities Bureau, Peaceful Paths, Take Stock in Children, Displaced Homemakers Program and Pace Center for Girls.

Another of these factors is whether the activities of the organization will be likely to appeal to persons having some broad common interest or purpose. CFNCF qualifies in this respect. The broad common interest is the desire to improve the quality of life through philanthropy in our community. The Community Foundation of North Central Florida appeals either to those who have been life-long residents of the community, or who have adopted the community for their own, and have commitment to its nurturing.

# 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.

2012 Open to Public

OMB No 1545-0047

Inspection Name of the organization Employer identification number Community Foundation of North Central Florida, Inc. 59-3532330 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 315,255 316,657 Aggregate grants from (during year) 7,083,847 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

	dule D (Form 990) 2012 Communit				9-3532330 Other Similar A		(continu		ge <b>2</b>
3	Using the organization's acquisition, access						00111111	<u> </u>	
	collection items (check all that apply):								
a	Public exhibition		Loan or exchange prog	grams					
b	Scholarly research	е 📙	Other						
C	Preservation for future generations		. b db db db						
4	Provide a description of the organization's of XIII.	collections and explain	now they further the d	organization's exe	empt purpose in Pa	π			
5	During the year, did the organization solicit	or receive donations of	of art historical treasur	res or other simil	ar				
•	assets to be sold to raise funds rather than				u.		Ye	s	No
Pa	rt IV Escrow and Custodial Ar	rangements. Co	mplete if the organ		red "Yes" to Fo	rm 990			
	line 9, or reported an amou			=					
1a	Is the organization an agent, trustee, custoo	dian or other intermed	iary for contributions o	r other assets no	t				ı
_	included on Form 990, Part X?						∐ Ye	s	No
ь	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing table						
						├──	Amount		
	Beginning balance				1 <u>c</u>	┼			
	d Additions during the year  e Distributions during the year  1e								
_	f Ending balance								—
	Par Did the organization include an amount on Form 990, Part X, line 21?								
	b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII								
	rt V Endowment Funds. Com					= 10			
		(a) Current year	(b) Prior year	(c) Two years bad			(e) Four	vears b	ack
1a	Beginning of year balance	7,429,349	7,127,773	6,000,		3,124		42,	
	Contributions	204,004	163,727	1,225,	<del></del>	0,000		37,	
С	c Net investment earnings, gains, and								
	losses 507,098 371,487 -2,146 280,754 -1,252,3							303	
d								23,	681
e	Other expenditures for facilities and								
	programs								
f	Administrative expenses	,							
9	End of year balance	7,958,950			773 6,00	0,713	5,4	03,	124
2	2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:								
	a Board designated or quasi-endowment ▶ %								
	Permanent endowment ▶ 96.00 %	4.00%	-						
C	Temporarily restricted endowment								
32	The percentages in lines 2a, 2b, and 2c sho Are there endowment funds not in the poss	•	ition that are hold and	administered for	tha				
Ja	organization by	ession of the organiza	iuon mat are neio ano	auministered for	uie		ſ	Yes	No
	(i) unrelated organizations						3a(i)	165	X
	(ii) related organizations						3a(ii)		$\frac{x}{x}$
b	If "Yes" to 3a(ıı), are the related organization	ns listed as required o	n Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	=							
Pa	rt VI Land, Buildings, and Equ			10.					
	Description of property	(a) Cost or other b		T T	(c) Accumulated		(d) Book	value	
		(investment)	(othe	er)	depreciation				
1a	Land								
b	Buildings								
	Leasehold improvements			3,750	3,75				
	Equipment			15,827	9,76	4		6,0	<u>)63</u>
	Other	15 555 5			<del></del>				
otal	. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	x, column (B), line 10	(c).)		<u> </u>		<u> </u>	<u> 163</u>

liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

59-3532330

<u>Sche</u>	dule D (Form 990) 2012 Community Foundation of North		59-353233	U	Page 4
Pa	Reconciliation of Revenue per Audited Financial Statement	nts W	ith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	1,775,848
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.				
а	Net unrealized gains on investments	2a	336,031		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	117,026		
е	Add lines 2a through 2d			2e	453,057
3	Subtract line 2e from line 1			3	1,322,791
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	_		
С	Add lines 4a and 4b		·	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,322,791
Pa	art XII Reconciliation of Expenses per Audited Financial Statement	ents \	Nith Expenses per F	Retui	
1	Total expenses and losses per audited financial statements			1	1,063,610
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Pnor year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,063,610
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
þ	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,063,610

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

#### Part X - FIN 48 Footnote

Supplemental Information

The Corporation is tax exempt under Section 501(c)(3) of the Internal Revenue Code and does not earn any unrelated business taxable income. Therefore, no provision for income taxes is reflected in the accompanying financial statements. The Corporation holds no uncertain tax positions and, therefore, has no policy for evaluating them. The Corporation's Form 990, Return of Organization Exempt from Income Taxes, is subject to examination by the IRS, generally for three years after the date filed.

Part XI, Line 2d - Revenue Amounts Included in Financials - Other

Gain on Interest in Gatorade Trust \$ 117,026

SCHEDULEI (Form 990)

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

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

2012	Open to Public Inspection
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**≗** 

Employer identification number 59-3532330 ► Attach to Form 990. Community Foundation of North General Information on Grants and Assistance Central Florida, Inc Department of the Treasury Internal Revenue Service Name of the organization Parti

Does the organization maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and

the selection criteria used to award the grants or assistance?

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. X Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	received more t	nan \$5,0(	JO. Part II can be o	Juplicated if additi	onal space is n	eeded.	
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Alachua Conservation Trust					,		
12 West University Avenue							General Support
Gainesville FL 32601	59-2919630	3	10,000				
(2) Big Brothers/Big Sisters of Mid Flo	o.						
1155 NW 13th Street							General Support
Gainesville FL 32601	59-1643115	3	9,928				
(3) Boys & Girls Club of Alachua County	Ā:						
PO Box 358452							General Support
Gainesville FL 32635	59-6002181	3	57,500				
(4) Bread of the Mighty Food Bank							
325 NW 10th Avenue							General Support
Gainesville FL 32601	59-2805577	3	10,000				
(5) Cade Museum for Creativity and Inve	į.						
904 S. Main Street							<b>General Support</b>
Gainesville FL 32601	20-1884134	3	50,000				
(6) Caribbean Conservation Corporation	-						
4424 NW 13th Street							<b>General Support</b>
Gainesville FL 32609	59-6151069	3	10,000				
(7) Catholic Charities Bureau							
1717 NE 9th Street							General Support
Gainesville FL 32609	59-1785681	3	17,188				
(8) Catholic Extension							
150 South Wacker Drive							<b>General Support</b>
Chicago IL 60606		3	7,500				
(9) Florida Defenders of the Environmen	đ						
4424 NW 13th Street, C-8			-				General Support
Gainesville FL 32609	59-1297777	3	20,000				

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

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

Schedule I (Form 990) (2012)

SCHEDULEI (Form 990)

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

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

▶ Attach to Form 990.

Open to Public Inspection OMB No 1545-0047 2012

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☐ Yes

**Employer identification number** 59-3532330 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Community Foundation of North General Information on Grants and Assistance Central Florida, Department of the Treasury Internal Revenue Service Name of the organization

the selection criteria used to award the grants or assistance?

Part

cribe	nitoring the use of	grant funds	in the United States		;		
Part II Grants and Other Assistance to Governments an	vernments an	d Organi	zations in the Un	ited States. Com	plete if the orga	anization answ	d Organizations in the United States. Complete if the organization answered "Yes" to Form 990,
Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	received more t	han \$5,0	00. Part II can be o	duplicated if additi	onal space is n	eeded.	
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation (book, FMV, appraisal,	(g) Description of	(h) Purpose of grant
ם אספווווופווו		ır applicable	A.ca.ii	cash assistance	omer)	ווסובוססוו מספופומווסם	Solision IO
(1) Florida Museum of Natural History							
PO Box 112710		·					General Support
Gainesville FL 32611	59-0974739	œ.	10,000				
(2) Gainesville Fisher House Foundation	ū						
5106 NW 8th Avenue	_						General Support
Gainesville FL 32605	26-3806088	3	200,000				
(3) Little Sisters of the Poor							
2999 Schurz Avenue							General Support
Bronx NY 10465	53-0196617	3	10,150				
(4) Matheson Museum			-				
513 E University Avenue							General Support
Gainesville FL 32601	59-2885199	3	45,452				
(5) Peaceful Paths							
PO Box 5099							General Support
Gainesville FL 32627	59-1809014	3	97,313				
(6) Planned Parenthood of NC Florida							
914 NW 13th Street	_						General Support
Gainesville FL 32601	23-7400545	3	15,000				
(7) Southeastern Health Care Foundation	ā						
PO Box 103362							General Support
Gainesville FL 32610	59-2357609	3	10,000				
(8) The Wildlife Conservation Society							
3713 NW 40th Street							General Support
Gainesville FL 32606	13-1740011	3	10,000				
(9) Veterans Memorial Committee							
3415 NW 46th Place							General Support
Gainesville FL 32605	59-3078903	3	50,000				
2 Enter total number of section 501(c)(3) and government organizations listed	organizations listed	in the line 1 table	1 table				•

Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2012)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Schedule I (Form 990) (2012) Community Foundation of North Part III Grants and Other Assistance to Individuals in the United S

Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
_						
7						
m						
4						
, v						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	plete this part to provi	de the information re	equired in Part I, line	2, Part III, column (b), and	any other additional

Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds

The Organization insures that the grantee is a 501(c)(3) organization prior

The majority of the grants are in a single payment to disbursing funds.

and no further monitoring is done.

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Schedule I (Form 990) (2012)

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012 Open to Public

OMB No. 1545-0047

Internal Revenue Service
Name of the organization

Community Foundation of North Central Florida, Inc.

Employer identification number 59 - 3532330

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The Form 990 is reviewed and approved by the executive committee of the board of directors prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

At the January board meeting all members complete a new confidentiality

statement and provide disclosures of any possible conflicts of interest.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing Documents are made available upon request.

Form 990, Part XI, Line 9 - Reconciliation of Changes - Other

Gain on Interest in Gatorade Trust \$ 117,026



April 20, 2012

BARZELLA PAPA 5214 SW 91 DRIVE STE A GAINESVILLE, FL 32608

Re: Document Number N98000005188

The Articles of Amendment to the Articles of Incorporation for THE GAINESVILLE COMMUNITY FOUNDATION, INC. which changed its name to COMMUNITY FOUNDATION OF NORTH CENTRAL FLORIDA, INC., a Florida corporation, were filed on April 19, 2012.

The certification requested is enclosed.

Should you have any question regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Irene Albritton
Regulatory Specialist II
Division of Corporations

Letter Number: 812A00012277



Department of State

I certify from the records of this office that COMMUNITY FOUNDATION OF NORTH CENTRAL FLORIDA, INC. is a corporation organized under the laws of the State of Florida, filed on September 4, 1998.

The document number of this corporation is N98000005188.

I further certify that said corporation has paid all fees due this office through December 31, 2012, that its most recent annual report/uniform business report was filed on January 10, 2012, and its status is active.

I further certify that said corporation has not filed Articles of Dissolution

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of April, 2012

CR2EO22 (1-11)

Secretary of State



Bepartment of State

I certify the attached is a true and correct copy of the Articles of Amendment, filed on April 19, 2012, to Articles of Incorporation for THE GAINESVILLE COMMUNITY FOUNDATION, INC., which changed its name to COMMUNITY FOUNDATION OF NORTH CENTRAL FLORIDA, INC., a Florida corporation, as shown by the records of this office.

The document number of this corporation is N98000005188.

Given under my hand and the Great Seal of the State of Florida at-Tallahassee, the Capital, this the Twentieth day of April, 2012

CR2EO22 (1-11)

Ken Detzener Berretnry of State

#### Articles of Amendment to Articles of Incorporation of

The Gainesville Community Foundation, In	IC.	
(Name of Corporation as currently filed with the Florida Dept	of State)	<del></del>
N98000005188		
(Document Number of Corporation (if kn	own)	
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Flor</i> mendment(s) to its Articles of Incorporation:	rida Not For Profit Corporation adopts th	e following
A. If amending name, enter the new name of the corporation:		
Community Foundation of North Central Flo	rida, Inc.	The new
name must be distinguishable and contain the word "corporation" or "i "Company" or "Co." may not be used in the name.	ncorporated" or the abbreviation "Corp."	
3. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)		_
		- 📮
<u></u>		_ 72 VEE
. Enter new mailing address, if applicable:		12 APR 19 AH 8: 59
(Mailing address MAY BE A POST OFFICE BOX)		- 19 6
		ø.
	in Florida anton the name of the	_ 59
<ul> <li>If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:</li> </ul>	in Florida, enter the name of the	
Name of New Registered Agent:		
Hame of ther Acceptor on Agent.		
(Florida stree	et address)	
lew Registered Office Address:		
	, Florida	
(City)	(Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.	
Signature of New Registered Agent	t, if changing	

Page 1 of 4

'If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
<u>X</u> Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change Add Remove		_		
2) Change Add Remove		-		
Change Add Remove		_		
4) Change Add Remove		-		
Change Add Remove		-		
Change Add Remove		-		

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
1.		 
		<u>-</u>
		 <u> </u>

The	e date of each amendment(s) adoption: IVIAICH ZZ, ZUIZ
	ective date if applicable:
	(no more than 90 days after amendment file date)
Ado	option of Amendment(s) (CHECK ONE)
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 4-12-12
	Signature Perry McGriff Jr.
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  (Typed of printed take of person signing)
	Chairman
	(Title of person signing)

• If y	ou are	filing for an Additional (Not Automatic) 3-M	onth Exter	nsion, complete on	ly Part II and check this bo	Page <b>2</b>
Note	e. Only	complete Part II if you have already been gra	nted an au	tomatic 3-month ext	tension on a previously file	
• If y	ou are	filling for an Automatic 3-Month Extension,			<u> </u>	
Pai	rt II	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file	the original (no copies r	needed).
					Enter filer's identifying nur	
Туре	or	Name of exempt organization or other filer, see i	nstructions		Employer identification num	ber (EIN) or
print	t	Gainesville Community Foundation			59-35323	330
File by	y the	Number, street, and room or suite no. If a P.O b	ox, see instr	ructions.	Social security number (SSN	٧)
	ate for	5745 SW 75th Street Suite 480			L	<u></u>
filing y return		City, town or post office, state, and ZIP code Fo	r a foreign a	ddress, see instruction	is.	
instruc	ctions	Gainesville, FL 32608				
Ente	r the R	eturn code for the return that this application	is for (file a	separate application	n for each return)	0 1
App	licatio	n	Return	Application		Return
Is F	or		Code	Is For		Code
Forr	n 990 d	or Form 990-EZ	01		,	<del>}</del>
Forr	n 990-	BL	02	Form 1041-A		08
Forr	n 4720	(individual)	03	Form 4720		09
Form 990-PF 04 Form 5227 10						
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11						
Form 990-T (trust other than above) 06 Form 8870 12						
for the	e whole ith the I requ For c	r a Group Return, enter the organization's four ergroup, check this box	it is for part	November 15	, 20 <u>13</u> . , and ending	, 20
7		ange in accounting period In detail why you need the extension Additi	onal time is	needed to file a com	plete and accurate return.	
<del></del>						
8a	nonre	application is for Form 990-BL, 990-PF, 990 fundable credits. See instructions.			8a	\$
b	estim amou	s application is for Form 990-PF, 990-T, 4 ated tax payments made. Include any prior nt paid previously with Form 8868.	year over	payment allowed a	s a credit and any 8b	\$
С		ce due. Subtract line 8b from line 8a. Include yo onic Federal Tax Payment System). See instruction		with this form, if requ		\$
		Signature and Verificat	ion must	be completed fo	r Part II only.	
		es of perjury, I declare that I have examined this belief, it is true, correct, and complete, and that I				nd to the best of my
Signatur	re▶ Ç	Turken Stallets	Title ►	CPA	Date <b>▶</b>	8.13.13

Form **8868** (Rev 1-2013)