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Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

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Fo	or ca	alen	dar year 2013 or tax year beginning		, and ending		
2	Nam	e of	foundation	A Employer identification	n number		
ų.			TRAL FLORIDA HOTEL & LO				
J —	_		NDATION, INC.			26-4207486	5
,			nd street (or P O box number if mail is not delivered to street	address)	Room/suite 210	B Telephone number	
<u> </u>			5 WESTWOOD BLVD.	407-313-50			
			own, state or province, country, and ZIP or foreign p ANDO,FL 32821	C If exemption application is i	pending, check here		
_			all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
2			Final return	Amended return	,		
_			Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
Н	Ct	1eck	type of organization X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	atus was terminated
<u> </u>				Other taxable private founda		under section 507(b)(1)(A), check here
			rket value of all assets at end of year J Accounti	-	X Accrual	F If the foundation is in a	
				her (specify)	h 1	under section 507(b)(1)(B), check here
Б	▶ Pai	`	333,876. (Part I, colu.) Analysis of Revenue and Expenses				(d) Datuments
	ra	rt i	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	ĺ	1	Contributions, gifts, grants, etc , received	233,419.		N/A	
		2	Check If the foundation is not required to attach Sch. B				
	-	3	Interest on savings and temporary cash investments				
	-	4	Dividends and interest from securities				
			Gross rents				
			Net rental income or (loss)				
	ĕ	0a h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
	Revenue	7	assets on line 6a Capital gain net income (from Part IV, line 2)		0.		
-	يە	8	Net short-term capital gain				
		g	Income modifications				
		10a	Gross sales less returns and allowances				
			Less Cost of goods sold				
	- }	C	Gross profit or (loss)				
	ŀ	11	Other income	83,710.	0.		STATEMENT 1
		12	Total. Add lines 1 through 11	317,129.	0.		
	- 1	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
69 (S)	- 1	14	Other employee salaries and wages				
≫ 0	Ω	15 182	Pension plans, employee benefits Legal fees RECEIVSIMT 2	2,700.	0.		0.
<u> </u>	eus	iva h	Accounting from	2,7000			
AUG	Expense	C	Other propessional fees 1 5 2014				
		17	Interest 1 5 2014				
	rati	18	Other professional fees 1 5 2014 Interest				
ξξ.	nist	19	Depreciation and another EN. UT				
3	Ē	20	Occupancy	1,521.	0.		0.
S	اځ	21	Travel, conferences, and meetings				<u> </u>
	aŭ	22	Printing and publications	01 700			ļ
	ing	23	Other expenses STMT 3	91,708.	0.		0.
	era	24	Total operating and administrative	05 020	0.		
SCANNIED	ð	25	expenses. Add lines 13 through 23	95,929. 90,000.	U •		90,000.
	- 1		Contributions, gifts, grants paid Total expenses and disbursements.	30,000.			70,000.
		-0	Add lines 24 and 25	185,929.	0.		90,000.
-	7	27	Subtract line 26 from line 12		<u> </u>		
			Excess of revenue over expenses and disbursements	131,200.			
			Net investment income (if negative, enter -0-)		0.		
_		C	Adjusted net income (if negative, enter -0-)			N/A	
32	2350	1	I HA For Panerwork Reduction Act Notice see	instructions			Form 990-PF (2013)

'CENTRAL FLORIDA HOTEL & LODGING ASSOC.

For	m 99	0-PF (2013) FOUNDATION, INC.	· · · · · · · · · · · · · · · · · · ·	26-4	1207486 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<u> </u>
	ar t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	168,537.	333,276.	333,276.
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 600.			
		Less allowance for doubtful accounts	500.	600.	600.
	4	Pledges receivable ►			· · · · · · · · · · · · · · · · · · ·
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	'	Less allowance for doubtful accounts		ſ	
(A	8	Inventories for sale or use			
Assets	٥	Prepaid expenses and deferred charges	-		
Aŝ	10-	- · · · · · · · · · · · · · · · · · · ·			
	1	Investments - U S and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		[
		Less. accumulated depreciation			
	1	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis		į	
		Less: accumulated depreciation			
	15	Other assets (describe ► STATEMENT 4)	47,238.	0.	0.
	16	Total assets (to be completed by all filers - see the			
_	<u> </u>	instructions. Also, see page 1, item 1)	216,275.	333,876.	333,876.
	17	Accounts payable and accrued expenses	9,522.		
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe STATEMENT 5)	25,906.	21,829.	
		,	·		
	23	Total liabilities (add lines 17 through 22)	35,428.	21,829.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
es	24	Unrestricted	180,847.	312,047.	
Net Assets or Fund Balances	25	Temporarily restricted			
Bal	26	Permanently restricted			
힏	20	Foundations that do not follow SFAS 117, check here			
Ξ		and complete lines 27 through 31.		ĺ	
ō	27	· · · · · · · · · · · · · · · · · · ·			
ets	27	Capital stock, trust principal, or current funds			
\ss	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
, t	29	Retained earnings, accumulated income, endowment, or other funds	100 047	212 047	
ž	30	Total net assets or fund balances	180,847.	312,047.	
			216 275	222 076	
	31	Total liabilities and net assets/fund balances	216,275.	333,876.	
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
•		st agree with end-of-year figure reported on prior year's return)	-	1	180,847.
2		r amount from Part I, line 27a		2	131,200.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	312,047.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	umn (h) line 30	6	312,047.
<u></u>	ivid	net assets of fund palatices at end of year time 4 fillings line 5) - Part II, Con	מנוונו (מ), וווופ אַט		314 031 0

323511 10-10-13

26-4207486 Page 3

Part IV Capital Gains a	nd Losses for Tax	on Investment	Income					
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)						(c) (n	Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a			-					
b NON	IE					—		
<u>C</u>						╁		
<u>d</u>						+		
<u>e</u>	(f) Depreciation allow	ed (a) Cos	st or other basis	$\overline{}$			(h) Gain or (loss)	
(e) Gross sales price	(or allowable)		xpense of sale	\perp) plus (f) minus (
b b				-				
C				_	-			
d								
8								
Complete only for assets showing	gain in column (h) and o	wned by the foundation	on 12/31/69				ıns (Col (h) gaın	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (J), If any				, but not less than esses (from col. (
a								
b								
C				_				
d								
8				_				
2 Capital gain net income or (net cap		ilso enter in Part I, line , enter -0- in Part I, line		}	2			
3 Net short-term capital gain or (loss	a) as defined in sections 12	222(5) and (6)						
If gain, also enter in Part I, line 8, c	olumn (c)				_			
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940	(a) for Reduced	Tay on Net	Inve	stment l	ncon	30	
(For optional use by domestic private if section 4940(d)(2) applies, leave this		section 4940(a) tax on	net investment ind	come)				
Was the foundation liable for the secti				od?				Yes X No
If "Yes," the foundation does not qualif				*****				
1 Enter the appropriate amount in ea	den column for each year,		iore making any en					(d)
Base period years Calendar year (or tax year beginnin	Adjusted quali	(b) fying distributions	Net value of non	(c) icharita	ble-use ass	ets	Distrib	ùtión ratio ided by col (c))
2012	9 111/	78,410.			190,81	15.	(00) (0) (1)	.410922
2011		12,000.			98,54	45.		.121772
2010		5,000.	•		103,47			.048323
2009		121.				0.		.000000
2008								
2 Total of line 1, column (d)							2	.581017
3 Average distribution ratio for the 5- the foundation has been in existence		the total on line 2 by 5,	or by the number (of year:	3		3	.145254
								289,512.
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5							4	
5 Multiply line 4 by line 3						-	5	42,053.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					-	6	0.
7 Add lines 5 and 6						-	7	42,053.
8 Enter qualifying distributions from							8	90,000.
If line 8 is equal to or greater than I See the Part VI instructions	line 7, check the box in Pa	rt VI, line 1b, and comp	lete that part using	a 1% ————	tax rate		<u> </u>	

CENTRAL FLORIDA HOTEL & LODGING ASSOC. FOUNDATION, INC. 26-4207486 Form 990-PF (2013) Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 0. of Part I, line 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-5 6 Credits/Payments a 2013 estimated tax payments and 2012 overpayment credited to 2013 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 0. 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed g 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be Credited to 2014 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b If the answer is "Yes" to 18 or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities Х c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0 • (2) On foundation managers ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions)

Form **990-PF** (2013)

X

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b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

'CENTRAL FLORIDA HOTEL & LODGING ASSOC. FOUNDATION, INC.

.0111	1990-PF (2013) 1 CONDATION, INC. 20-420	400		Page 5
P	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u>L</u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.CFHLA.ORG			
14	The books are in care of ► LEE JOHNSON, DIRECTOR OF FINANCE Telephone no ► 407-31			
	Located at ► 6675 WESTWOOD BLVD., SUITE 210, ORLANDO, FL ZIP+4 ►32	821		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		, >	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	<u> </u>	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign			
	country >	<u> </u>		<u> </u>
۲έ	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	E		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
t	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ļ		.,
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2013?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)) At the end of tay year 2013, did the foundation have any undertributed income (lines 6d and 6e, Part XIII) for tay year(e) beginning			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? Lagrange Yes X No			
	If "Yes," list the years \blacktriangleright ,,,			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	Į.		
4	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
,	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		 	
v				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Ja	during the year?			
h	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			
ų	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2013.) N/A	3b	1	1
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74		
	had not been removed from leopardy before the first day of the tax year beginning in 2013?	4h		x

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CENTRAL FLORIDA HOTEL & FOUNDATION, INC.		<u> </u>	26-420748	36 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
 5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section) 	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), of any voter registration drive?	or to carry on, directly or indire	Ye	ıs X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	ıs X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or f		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check h	nere		▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai	ined		
expenditure responsibility for the grant?	N	// A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y6	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribi			N/A 7	b
Part VIII Information About Officers, Directors, Trust	***	nagers, Highly		
Paid Employees, and Contractors	,		•	
List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THE CHAMEMENT 6				•
SEE STATEMENT 6		0.	0.	0.
				
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(.) 5
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	1			
	1			
Catal number of other ampleuses and over \$50,000			<u> </u>	

Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	Form 990-PF (2013) FOUNDATION, INC.		207486 Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundations four largest function and other beneficianes served, conferences convened, research papers produced, etc. N/A Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions All other program-related investments. See instructions All other program-related investments. See instructions All other program-related investments. See instructions		undation Managers, Highly	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable actives during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1	3 Five highest-paid independent contractors for professional services. If none	, enter "NONE."	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	NONE		
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Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1			
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Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	Total number of others receiving over \$50,000 for professional services		▶ 0
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	Part IX-A Summary of Direct Charitable Activities		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions All other program-related investments See instructions	List the foundation's four largest direct charitable activities during the tax year. Include relevan	t statistical information such as the	Evanage
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount N/A All other program-related investments See instructions 3		rs produced, etc.	cxhauses
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 All other program-related investments See instructions All other program-related investments See instructions	1 <u>N/A</u>		
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount Amount All other program-related investments See instructions 3	0.480		
1 N/A 2 All other program-related investments See instructions 3	Part IX-B Summary of Program-Related Investments		Amount
All other program-related investments. See instructions 3	37/3	rear on lines 1 and 2	Amount
All other program-related investments. See instructions 3	1N/ A		
All other program-related investments. See instructions 3			
All other program-related investments. See instructions 3			
3	2		
3			
3	All other program related investments. Can instructions		
	_		
Total. Add lines 1 through 3	ა		
Total. Add lines 1 through 3			
	Total. Add lines 1 through 3	>	0.

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Total. Add lines 1 through 3

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$\overline{}$	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	O.
b	Average of monthly cash balances	1b	293,921.
C	Fair market value of all other assets	10	0.
d	Total (add lines 1a, b, and c)	1d	293,921.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	293,921.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,409.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	289,512.
6	Minimum investment return. Enter 5% of line 5	6	14,476.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	14,476.
2 a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	14,476.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,476.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,476.
P	Qualifying Distributions (see instructions)	, ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	90,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	90,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	Income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	90,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for th	

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Part XIII Undistributed Income (see instructions)

(a) Corpus (2012 2013 2013 2013 2013 2013 2013 2013					
Ina 1					
2. Unagotivation income, 4 my, us of ne and of 2013 a. Enter amount for 2012 only b. Total for prior years 3. Excess distributions carryover, if any, to 2013 a. From 2008 b. From 2010 6. From 2011 4. 7.65. e. From 2012 1. Total of times 31 through a 4. Chalifying distributions for 2013 from Part XII, time 4. P. S. 90, 0.00. a. Applied to 2012, but not more than the 2a b. Applied to 2012, but not more than the 2a b. Applied to 2012, but not more than the 2a b. Applied to 2013 distributions around of prior years (Election required -see instructions) c. Treated as distributions out of corpus Celection required -see instructions) d. Applied to 2013 distributions around as a mid-listed to distributions around distribution around a seminal control of the corpus b. Exercise distributions comprise golded to 2013 file an amount distribution of the corpus b. Enter the activated research comments as mid-listed below. 5. Exercise distributions around as a color of the seminal comment of prior years' undistributed income Subtract innex 4b from the 2b c. Effect the amount of prior years' undistributed income Subtract innex 4b from the 2b d. Subtract thes 6c from the 6b Taxable amount - see instructions d. Applied to 2013 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2012 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time d. 4a from the 2 three amount - see that Undistributed income for 2015 Subtract time 5 days of the comment of 2015 Subtract	· · · · · · · · · · · · · · · · · · ·				14 476
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\$ Excess distributions carryover, if any, to 2013 a From 2008 b From 2009 c From 2010 d 4, 765 c e From 2010 d 4, 765 c e From 2011 d 4, 765 c e From 2012 d 58 g 869 c e F				0 -	
S - Sciess distributions carryover, if any, to 2013 a From 2008	•				
3 Excess distributions carryover, if any, to 2013 a From 2008 b From 2010 c From 2010 d From 2011 d From 2012 d 68, 869 . 1 Triatal of times 3a through e 4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 90,000 . a Applied to 2012, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) 0 . d Treated as distributions out of corpus (Election required - see instructions) 0 . d Treated as distributions out of corpus (Election required - see instructions) 0 . d Treated as distributed out of corpus (Election required - see instructions) 0 . d Treated as distributed out of corpus (Election required - see instructions) 0 . d Treated as distributed out of corpus for a majorial applied of the seems amount for the seems and the seems amount a indicated before 3 Corpus Adal see 31, 45, and 46 subract line 5 b Prior yeas' undistributed income for year's undistributed income for which a notice of deficiency has been sisted, or on which the section 4942(8) tax has been previously assessed 0 . d Subtract line 6 from line 6 b Taxable amount - see instructions 0 . d Subtract line 6 from line 1 This amount must be distributed income for 2012 Subtract line 4 strom line 2 a Taxable amount - see instr Undistributed moome for 2013 Subtract lines 44 and 5 from line 1 This amount must be distributed in 2014 0 . 7 Amounts treated as distributions carryover trom 2008 ont applied on line 5 or line 7 0 . 9 Excess distributions carryover trom 2008 ont applied on line 5 or line 7 0 . 9 Excess from 2010 Excess from 2011 Excess from 2012 Excess from 2012	g rotal to prior yours		0.		
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7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 149,158. 10 Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	lines 4d and 5 from line 1. This amount must				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 149,158. 10 Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	be distributed in 2014				0.
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section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 not applied on line 5 or line 7 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 149,158. 10 Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	I I				
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 149,158. O Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	· · · · · · · · · · · · · · · · · · ·	0.			
not applied on line 5 or line 7 9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a 149,158. 10 Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	F				
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Analysis of line 9 a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	·	149,158.			
a Excess from 2009 b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	ļ.	= ,			
b Excess from 2010 c Excess from 2011 d Excess from 2012 68,869.	· • • • • • • • • • • • • • • • • • • •				
d Excess from 2011 4,765. d Excess from 2012 68,869.					
d Excess from 2012 68,869.		1			
	1 55 504 1	1			

SEE STATEMENT 7

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form **990-PF** (2013)

Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year UCF - ROSEN SCHOOL OF HOSPITALITY NONE 509(A)(1) SCHOLARSHIPS FOR 19 MANAGEMENT STUDENTS 4000 CENTRAL FLORIDA BLVD. MILICAN HALL ROOM 120 ORLANO, FL 32816 23,000. CENTRAL FLORIDA COUNCIL BOY SCOUTS OF NONE 509(A)(1) GOLDEN EAGLE DINNER AMERICA SPONSOR 1951 S. ORANGE BLOSSOM TRAIL, SUITE 102 APOPKA, FL 32703 1,000. NONE CENTRAL FLORIDA HOTEL & LODGING 509(A)(2) UCF AND VALENCIA ASSOCIATION INTERNSHIPS 6675 WESTWOOD BLVD, SUITE 210 ORLANDO, FL 32821 7,000. COLONIAL HIGH SCHOOL NONE 509(A)(1) PROPERTY MANAGEMENT 6100 OLEANDER DRIVE SYSTEM (INN TIME) FOR ORLANDO, FL 32807 AOHT STUDENTS 2,000. VALENCIA COLLEGE NONE 509(A)(1) SCHOLARSHIP FOR 3 190 S. ORANGE AVENUE STUDENTS ORLANO, FL 32801 5,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 90,000. **b** Approved for future payment NONE Total 0. **▶** 3b

26-4207486 Page 12

iter gross amounts unless otherwise indicated	<u>Unrelated t</u>	usiness income		y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exemp
TEACHERS' ACADEMY	Code	.	01	510.	
	— 			310.	
					<u> </u>
		·· · · · · · · · · · · · · · · · · · ·		· · · · · ·	
					·
	- -				
Fees and contracts from government agencies		·			
Fees and contracts from government agencies		 -			
lembership dues and assessments					
iterest on savings and temporary cash					
vestments					
ividends and interest from securities					
et rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal					
roperty					<u>-</u>
Ither investment income					
Gain or (loss) from sales of assets other					
han inventory					
Net income or (loss) from special events			01	11,894.	
Gross profit or (loss) from sales of inventory					
Other revenue					
1					
b					·
				ľ	-
C	1 !				•
d					
d		().	12,404.	
Subtotal Add columns (b), (d), and (e)		().	12,404.	12,4
s Subtotal Add columns (b), (d), and (e) Fotal, Add line 12, columns (b), (d), and (e)		().		12,4
d B Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) B worksheet in line 13 instructions to verify calculation	is)			13	12,4
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	is)			13	12,4
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activition	es to the Accom	nplishment of	Exempt P	13	
industrial Add columns (b), (d), and (e) iotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation int XVI-B Relationship of Activition	es to the Accom	nplishment of	Exempt P	13	
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ubtotal Add columns (b), (d), and (e) otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation irt XVI-B Relationship of Activition B No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
institution and columns (b), (d), and (e) iotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation int XVI-B Relationship of Activition e No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activition e No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
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Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activition e No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
Subtotal Add columns (b), (d), and (e) fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activition e No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
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Subtotal Add columns (b), (d), and (e) fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation IFT XVI-B Relationship of Activition 8 No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activition e No. Explain below how each activity for which	es to the Accom	nplishment of	Exempt P	13	
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Part	XVII	Information Re Exempt Organi		insfers To a	and Trans	actions a	and Relations	hips With Nonc	haritable	9	
1 Dic	the or	ganization directly or indir		ny of the following	ng with any oth	er organizatio	on described in sect	ion 501(c) of		Yes	No
		other than section 501(c)			-	-					
		from the reporting founda			-	·					İ
(1) Cash									1a(1)	Х	ĺ
(2) Other assets									1a(2)		X
b Oti	ier tran	sactions									
(1)	Sales	of assets to a noncharitat	ble exempt organi	zation					1b(1)		_X_
(2) Purchases of assets from a noncharitable exempt organization									1b(2)		X
(3) Rental of facilities, equipment, or other assets									1b(3)		X
(4) Reimbursement arrangements									1b(4)		X
(5)	Loans	s or loan guarantees							16(5)		X
(6)	Perfo	rmance of services or mei	mbership or fund	raising solicitation	ons				1b(6)		X
	-	f facilities, equipment, mai	-						10	X	
		ver to any of the above is '								ets,	
		s given by the reporting fo			red less than fa	ır market valı	ie in any transaction	n or sharing arrangeme	nt, show in		
) the value of the goods, o					(4) -				
(a) Line r	<u> </u>	(b) Amount involved		of noncharitable				of transfers, transactions,	and sharing ar	rangeme	nts
<u>С</u>	-		CENTRAL LODGING			α	SEE STA	ATEMENT 8			
			CENTRAL			&					
A1	-		LODGING			α	+				
<u> </u>		7,000.	HODGING	ADDUCTA	111011		+				
	1										
	1										
				·			<u> </u>				
	1					·				-	
									•		
IN:	section	ndation directly or indirect 501(c) of the Code (other amplete the following sche	than section 501		tion 527?			(a) Decorption of relation	X Yes		□ No
CENT	RAT	(a) Name of org		DGING	(b) Type of o	nyamzativii		(c) Description of relate PEMENT 9	אווופווטו		
		TION	<u> </u>	DGING	501(C)	(6)	OLL SIK	COMBINI 7			
11000	C 121	.11014			DUITE	(0)					
				-	 				 		
							-				
Sign Here	and be	penalties of penjury, I declare to elief, it is true, correct, and com ature of officer or trustee	nplete Declaration o				nation of which prepare		May the IRS return with the shown below X Yes	(see ins	rer
	19,	Print/Type preparer's na	me	Preparer's s			Date	Check If P	ΓIN		
							m/m/u	self- employed			
Paid TERRY WALKER P00381214											
Prep	arer	Firm's name ► VES'		LEK CPA	S			Firm's EIN ► 59-			
Use											
		Firm's address ▶ 20	1 E. PIN	E ST.,	STE. 8	01		1			
			LANDO, F					Phone no (40	7) 843	<u>-44</u>	33
							· · · · · · · · · · · · · · · · · · ·		Form 99 6	0-PF	(2013)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

CENTRAL FLORIDA HOTEL & LODGING ASSOC.

OMB No 1545-0047

Employer identification number

2013

F	OUNDATION, INC.	26-4207486					
Organization type (check	one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
• •	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.					
X For an organization	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	noney or property) from any one					
Special Rules							
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
contributions for If this box is chec purpose. Do not a	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contruse exclusively for religious, charitable, etc., purposes, but these contributions did not to ked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because the, etc., contributions of \$5,000 or more during the year	etal to more than \$1,000. Ely religious, charitable, etc.,					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F at the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•					

Name of organization
CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.
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Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional actions are copies of Part I if additional actions are copies of	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	COCA COLA BOTTLING COMPANY 2900 MERCY DRIVE		Person X Payroll Noncash (Complete Part II for
	ORLANDO, FL 32808	_	noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	COMMUNITY FOUNDATION OF CENTRAL FLORIDA, INC. 1411 EDGEWATER DRIVE, SUITE 203 ORLANDO, FL 32804	\$11,702.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CFHLA EDUCATIONAL TRUST FUND, INC. 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	\$19,690. 	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CFHLA ASSOCIATION, INC. 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32808	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

CENTRAL FLORIDA HOTEL & LODGING ASSOC.

FOUNDATION, INC.

Employer identification number

rattu	Noticasi Property (see instructions). Ose duplicate copies of Part I	ii ii additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			200 000 EZ ez 000 BE) (2012)

Name of org	anization AL FLORIDA HOTEL & LODG	ING ASSOC		Employer identification number
	ATION, INC.	ing Abboc.		26-4207486
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry. For organizat , contributions of \$1,000 or less fo	ions completing Part III, enter	ons that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-	Transferee's name, address, an	(e) Transfer of g		ansferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	ift	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	ift	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	Insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held
		(e) Transfer of g	ift	
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	Insferor to transferee

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
DR. PHILLIPS ROTARY	NONE	509(A)(2)	TASTE OF DR. PHILLIPS	
P.O. BOX 1381 WINDERMERE, FL 34786			SPONSORSHIP	500
VALENCIA COLLEGE	NONE	509(A)(1)	SCHOLARSHIPS	
L90 S. ORANGE AVENUE				
DRLANDO, FL 32801				1,000
· ·				
MID FLORIDA TECH 2900 WEST OAK RIDGE ROAD	NONE	509(A)(1)	SCHOLARSHIPS	
ORLANDO, FL 32809				2,000
DRANGE COUNTY PUBLIC SCHOOLS	NONE	509(A)(1)	HOSPITALITY & CULINARY	
445 W. AMELIA STREET, SUITE 901 ORLANDO, FL 32801			COMPETITION COSTS	2 500
3.2201				2,500
AMERICAN HOTEL & LODGING EDUCATIONAL	NONE	509(A)(2)	EI / LMP INTERNATIONAL	
800 N. MAGNOLIA AVE. SUITE 300			COMPETITION SPONSOR	
ORLANDO, FL 32803			-	1,500
GRAND TOUR GALA	NONE	509(A)(2)	TRAILBLAZER	
P.O. BOX 2261 WINTER PARK, FL 32790-2261			SPONSORSHIP	10,000
JCF FOUNDATION, INC.	NONE	509(A)(1)	PAYMENT 2 OF 10 YEAR	
12424 RESEARCH PARKWAY, SUITE 250			COMMITMENT FOR THE	
DRLANDO, FL 32826			STUDENT LOUNGE	10,000
PLORIDA TECHNICAL COLLEGE	NONE	509(A)(1)	SCHOLARSHIPS FOR 5 STUDENTS	
DRLANDO, FL 32826				7,000
/ALENCIA COLLEGE	NONE	509(A)(1)	INN TIME SOFTWARE	
190 S. ORANGE AVENUE ORLANDO, FL 32801			UPDATE	2 500
	1			2,500
√EBBER INTERNATIONAL UNIVERSITY	NONE	509(A)(1)	SCHOLARSHIPS FOR TWO	
P.O. BOX 96			STUDENTS	
BABSON PARK, FL 33827	<u> </u>			2,000
Total from continuation sheets				52,000

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
DAK RIDGE HIGH SCHOOL	NONE	509(A)(1)	HOTEL MANAGEMENT	
700 WEST OAK RIDGE ORLANDO, FL 32809			MAGNET PROGRAM LAB	4,000
OKUARBO, FH 32003	-			4,000
DR. PHILLIPS HIGH SCHOOL	NONE	509(A)(1)	START - UP COSTS FOR	
6500 TURKEY LAKE RD	[(1, (2,	LODGING OPERATIONS	
ORLANDO, FL 32819		<u> </u>	PROGRAM	1,000
UNIVERSITY OF FLORIDA	NONE	509(A)(1)	FAMILY MEMBER	
PO BOX 114050, S-113 CRISER HALL			SCHOLARSHIPS (4)	4 000
GAINESVILLE, FL 32611				4,000
UNIVERSITY OF CENTRAL FLORIDA	NONE	509(A)(1)	FAMILY MEMBER	
4000 CENTRAL FLORIDA BLVD.			SCHOLARSHIPS (2)	
ORLANDO, FL 32816		 		2,000
THE OHIO STATE UNIVERSITY	NONE	509(A)(1)	FAMILY MEMBER	
281 WEST LANE AVE.			SCHOLARSHIP	1 000
COLUMBUS, OH 43210	-			1,000
ROLLINS COLLEGE	NONE		SCHOLARSHIP	
1000 HOLT AVE				
WINTER PARK, FL 32789				1,000
		 		
Total from continuation sheets	<u> </u>	1		_

FORM 990-PF	OTHER	INCOME		STATEMENT	1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
TEACHERS' ACADEMY	_	510.	0.		
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS		83,200.	0.		
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	83,710.	0.		
FORM 990-PF	LEGA	L FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAE PURPOSE	
LEGAL FEES	2,700	0	•		0.
TO FM 990-PF, PG 1, LN 16A	2,700	0			0.
FORM 990-PF	OTHER	EXPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
OTHER EXPENSES	17,782				0.
SUPPLIES POSTAGE	160 8	. 0			0.
BANK CHARGES FUNDRAISING EXPENSE	2,452 71,306				0.
			-		
TO FORM 990-PF, PG 1, LN 23	91,708	. 0	•		0.

FORM 990-PF	OTHER ASSETS		STATEMENT 4
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DUE FROM ASSOCIATION	47,238.	0.	0.
TO FORM 990-PF, PART II, LINE 15	47,238.	0.	0.
FORM 990-PF OT	HER LIABILITIES	<u></u>	STATEMENT 5
DESCRIPTION	-	BOY AMOUNT	EOY AMOUNT
DESCRIPTION STUDENT SCHOLARSHIPS ACCRUED EXPENSES NON CURRENT LIABILITIES DEFERRED BB/SPONSORSHIPS		8,000. 9,406. 6,000. 2,500.	EOY AMOUNT 10,000. 0. 3,000. 8,829.

		r of officers, c foundation mana		STATI	EMENT 6
NAME AND ADDRESS		TITLE AND AVRG HRS/WK			
RICHARD MALADECKI 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	PRESIDENT/CEO/ 1.00	STAFF LIASON 0.		0.
JEFF PLUTZ 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
RICK ALLEN 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
JIM BURNS 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
ROSS MARVIN 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
PAT ENGFER 6675 WESTWOOD BLVD., SUIS ORLANDO, FL 32821	ГЕ 210	HISTORIAN 1.00	0.	0.	0.
NICK ROMEO 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
LOUIS ROBBINS 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	VICE-CHAIR 1.00	0.	0.	0.
GERALD URQUILOA 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ГЕ 210	MEMBER 1.00	0.	0.	0.
DOUG GEHRET 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	TE 210	SECRETARY 1.00	0.	0.	0.
SCOTT TRIPOLI 6675 WESTWOOD BLVD., SUIT ORLANDO, FL 32821	ΓE 210	CHAIRPERSON 1.00	0.	0.	0.

CENTRAL FLORIDA HOTEL	b 1 1	26-43	207486		
DOUG RIDGE	TREASURER 1.00	0. 0.		0.	
TOTALS INCLUDED ON 990-P		0.	0.	0.	

4 1, Y

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RICHARD MALADECKI 6675 WESTWOOD BLVD, SUITE 210 ORLANDO, FL 32821

TELEPHONE NUMBER

407-313-5000

FORM AND CONTENT OF APPLICATIONS

GRANT REQUEST LETTER

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE ORGANIZATION WILL MAKE GRANTS TO OTHER 501(C)(3) ORGANIZATIONS THAT ARE PUBLIC CHARITIES AND TO GOVERNMENTAL UNITS TO FURTHER CHARITABLE, SCIENTIFIC, LITERARY AND EDUCATIONAL PROGRAMS TO BENEFIT THE CENTRAL FLORIDA COMMUNITY.

990-PF

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS PART XVII, LINE 1, COLUMN (D)

STATEMENT

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

THE ORGANIZATION USES THE OFFICE FACILITIES AND EMPLOYEES OF CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION, WHICH IS A 501(C)(6) ORGANIZATION AND THE FOUNDATION'S SOLE CONTRIBUTOR.

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

CONTRIBUTION FOR SCHOLARSHIPS.

990-PF

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS PART XVII, LINE 2, COLUMN (C)

STATEMENT

9

NAME OF AFFILIATED OR RELATED ORGANIZATION

CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION HAS A CONTROLLING FINANCIAL INTEREST IN THE ORGANIZATION THROUGH VOTING INTEREST ON THE ORGANIZATION'S BOARD OF DIRECTORS.

Form **8868** (Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

Internal Revenue Service

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

■ If you a	re tiling for an Automatic 3-Month Extension, comple	te only Pa	irt I and check this box			
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
Do not co	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.	
	c filing (e-file). You can electronically file Form 8868 if y					corporation
	o file Form 990-T), or an additional (not automatic) 3-mo			-		=
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap					
			(see instructions). For more details	on the elec	stronic illing or	illo lotti,
Part I	irs.gov/efile and click on e-file for Chanties & Nonprofits Automatic 3-Month Extension of Time		submit original (no copies ne	odod)		
			•			-
•	tion required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete		~ \Box
Part I only						
	orporations (including 1120-C filers), partnerships, REM me tax returns.	IICs, and ti	rusts must use Form /UU4 to reque			
			·		er's identifying	
Type or	Name of exempt organization or other filer, see instru		2000	Employe	r identification i	number (EIN) or
print	CENTRAL FLORIDA HOTEL & LOI	JGING	ASSOC.		06 400	7.406
File by the	FOUNDATION, INC.				26-420	/486
due date for	Number, street, and room or suite no. If a P.O. box, s		tions.	Social se	curity number (SSN)
filing your return See	6675 WESTWOOD BLVD., NO. 2	10				
natructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			
	ORLANDO, FL 32821					
Enter the I	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Application	on	Return	Application			Return
Is For Code Is For			Code			
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-	BL	02	Form 1041-A			08
Form 4720) (Individual)	03	Form 4720 (other than individual)			09
Form 990-	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
	LEE JOHNSON, D					
• The bo	oks are in the care of ▶ 6675 WESTWOOD I			NDO.	FL 3282	Ĺ
	one No. ► 407-313-5000		Fax No. ▶			
	rganization does not have an office or place of business	s in the Lin				▶ □
	s for a Group Return, enter the organization's four digit			lf this is fo	r the whole are	up check this
	. If it is for part of the group, check this box	1				
box ▶ L			ch a list with the names and EINs of		ers the extensi	on is ior.
	quest an automatic 3-month (6 months for a corporation ${ m AUGUST}$ 15 , 2014 , to file the exemp	•	tion return for the organization nam		The subseque	
	 ·· · · · · · · · · · · · · · · · · ·	t Organiza	tion return for the organization ham	eu above.	THE EXTENSION	
	r the organization's return for:					
	$\frac{\mathbf{X}}{\mathbf{X}}$ calendar year $\frac{2013}{\mathbf{X}}$ or					
	tax year beginning	, an	d ending		_·	
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: L Initial return	Final retur	n	
	Change in accounting period					.
	s application is for Forms 990-BL, 990-PF, 990-T, 4720,	, or 6069, o	enter the tentative tax, less any			^
	refundable credits. See instructions			3a	\$	0.
	is application is for Forms 990-PF, 990-T, 4720, or 6069			_		^
-	mated tax payments made. Include any prior year overp			Зь	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa	-				^
	sing EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution. I	f you are going to make an electronic funds withdrawal	(direct del	bit) with this Form 8868, see Form 8	3453-EO a	nd Form 8879-E	O for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2014)