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Return of Private Foundation

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

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Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2014

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue Service

For calendar year 2014 or tax year beginning

, and ending

Name of foundation

CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.

A Employer identification number

26-4207486

Number and street (or P.O. box number if mail is not delivered to street address)

6675 WESTWOOD BLVD.

Room/suite

210

B Telephone number

407-313-5000

City or town, state or province, country, and ZIP or foreign postal code

ORLANDO, FL 32821

C If exemption application is pending, check here ☐

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeD 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationE If private foundation status was terminated under section 507(b)(1)(A), check here ☐I Fair market value of all assets at end of year
(from Part II, col. (c), line 16)J Accounting method ☐ Cash ☒ Accrual
☐ Other (specify)F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☒

\$ 359,104. (Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses

(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 charitable purposes (cash basis only)

1 Contributions, gifts, grants, etc., received

155,205.

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

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

b Gross sales price for all assets on line 6a

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less Cost of goods sold

c Gross profit or (loss)

11 Other income

89,861.

0.

STATEMENT 1

12 Total. Add lines 1 through 11

245,066.

0.

13 Compensation of officers, directors, trustees, etc.

0.

0.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

STMT 2

2,825.

0.

b Accounting fees

c Other professional fees

17 Interest

18 Taxes

19 Depreciation and depletion

20 Occupancy

1,521.

0.

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses

STMT 3

80,737.

0.

24 Total operating and administrative expenses. Add lines 13 through 23

85,083.

0.

25 Contributions, gifts, grants paid

141,342.

141,342.

26 Total expenses and disbursements. Add lines 24 and 25

226,425.

0.

141,342.

27 Subtract line 26 from line 12

18,641.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

0.

c Adjusted net income (if negative, enter -0-)

N/A

423501
11-24-14

LHA For Paperwork Reduction Act Notice, see instructions

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

	Beginning of year	End of year	
	(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets			
1 Cash - non-interest-bearing	333,276.	333,407.	333,407.
2 Savings and temporary cash investments			
3 Accounts receivable ▶			
Less allowance for doubtful accounts ▶	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 ▶			
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges		9.	9.
10a Investments - U S and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶			
15 Other assets (describe ▶ <u>DUE FROM CFHLA</u>)	0.	25,688.	25,688.
16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	333,876.	359,104.	359,104.
Liabilities			
17 Accounts payable and accrued expenses		9,469.	
18 Grants payable			
19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
22 Other liabilities (describe ▶ <u>STATEMENT 4</u>)	21,829.	18,947.	
23 Total liabilities (add lines 17 through 22)	21,829.	28,416.	
Net Assets or Fund Balances			
Foundations that follow SFAS 117, check here ☒ and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted	312,047.	330,688.	
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here ☐ and complete lines 27 through 31.			
27 Capital stock, trust principal, or current funds			
28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances	312,047.	330,688.	
31 Total liabilities and net assets/fund balances	333,876.	359,104.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	312,047.
2 Enter amount from Part I, line 27a	2	18,641.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	330,688.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	330,688.

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Part IV Capital Gains and 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.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b NONE					
c					
d					
e					

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { if gain, also enter in Part I, line 7
if (loss), enter -0- in Part I, line 7 }

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c)
If (loss), enter -0- in Part I, line 8

2

3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	90,000.	289,512.	.310868
2012	78,410.	190,815.	.410922
2011	12,000.	98,545.	.121772
2010	5,000.	103,471.	.048323
2009	121.	0.	.000000

2 Total of line 1, column (d)

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

2

3

4

5

6

7

8

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**CENTRAL FLORIDA HOTEL & LODGING ASSOC.
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Part VI 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 ☐ 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 ☒ and enter 1% of Part I, line 27b		1	0.
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-)		2	0.
3 Add lines 1 and 2		3	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	0.
6 Credits/Payments			
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		0.
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 2015 estimated tax ☐ Refunded ☐	11		

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a 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.			X
1c Did the foundation file Form 1120-POL for this year?			X
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 ☐ \$ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2		X
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	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		X
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?	6	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	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ FL			
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) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
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 year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

N/A

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Part 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		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? Website address ► <u>WWW.CFHLA.ORG</u>	13	X	
14 The books are in care of ► <u>LEE JOHNSON, DIRECTOR OF FINANCE</u> Telephone no ► <u>407-313-5000</u> Located at ► <u>6675 WESTWOOD BLVD., SUITE 210, ORLANDO, FL</u> ZIP+4 ► <u>32821</u>			
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	15	N/A	
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a 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?	☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☒ Yes ☐ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ No		
(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)?	☒ Yes ☐ No		
(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)	☐ Yes ☒ No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b		X
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 2014?	1c		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))			
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years ►	☐ Yes ☒ No		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect 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)	2b	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after 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 2014.)	3b	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

▶ ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

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 shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** 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
SEE STATEMENT 5		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

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

Total number of other employees paid over \$50,000

▶ 0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(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

0

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.

	Expenses
1 N/A	
2	
3	
4	

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
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.

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Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	349,319.
c	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	349,319.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	349,319.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,240.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	344,079.
6	Minimum investment return. Enter 5% of line 5	6	17,204.

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	17,204.
2a	Tax on investment income for 2014 from Part VI, line 5	2a	
b	Income tax for 2014 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,204.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,204.
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	17,204.

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	141,342.
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		
a	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	141,342.
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	141,342.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				17,204.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011	4,765.			
d From 2012	68,869.			
e From 2013	75,524.			
f Total of lines 3a through e	149,158.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 141,342.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2014 distributable amount				17,204.
e Remaining amount distributed out of corpus	124,138.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	273,296.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	273,296.			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011	4,765.			
c Excess from 2012	68,869.			
d Excess from 2013	75,524.			
e Excess from 2014	124,138.			

423581
11-24-14

Form **990-PF** (2014)

b. Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

b 85% of line 2a

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities
Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test - enter
(1) Value of all assets

(2) Value of assets qualifying under section 4942(i)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SEE STATEMENT 6

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

CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.**Part XV** Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN HOTEL & LODGING EDUCATIONAL INSTITUTE 800 N. MAGNOLIA AVE. SUITE 300 ORLANDO, FL 32803	NONE	509(A)(2)	EI / LMP INTERNATIONAL COMPETITION SPONSOR	1,500.
CENTRAL FLORIDA COUNCIL BOY SCOUTS OF AMERICA 1951 S. ORANGE BLOSSOM TRAIL, SUITE 102 APOPKA, FL 32703	NONE	509(A)(1)	GOLDEN EAGLE DINNER SPONSOR	1,500.
CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION 6675 WESTWOOD BLVD, SUITE 210 ORLANDO, FL 32821	NONE	509(A)(2)	UCF AND VALENCIA INTERNSHIPS	8,364.
JUNIOR ACHIEVEMENT 2121 CAMDEN ROAD ORLANDO, FL 32803	NONE	509(A)(3)	HALL OF FAME DINNER	2,500.
DR. PHILLIPS CENTER FOR THE PERFORMING ARTS P.O. BOX 692709 ORLANDO, FL 32869-2709	NONE	509(A)(1)	GRAND OPENING TABLE	8,000.
Total	SEE CONTINUATION SHEET(S)			141,342.
b Approved for future payment				
NONE				
Total				0.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

11550803 795203 CFHLA-FOUND 2014.04000 CENTRAL FLORIDA HOTEL & LOD CFHLA-F1

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions		
	(1) Sales of assets to a noncharitable exempt organization	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 or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☒ Yes ☐ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
CENTRAL FLORIDA HOTEL & LODGING ASSOCIATION	501 (C) (6)	SEE STATEMENT 8

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No	
	Signature of officer or trustee <u>T. Walker</u>		Date <u>12-1-15</u>		Title <u>PRESIDENT/CEO</u>	
Paid Preparer Use Only	Print/Type preparer's name <u>TERRY WALKER</u>		Preparer's signature 		Date <u>12/1/15</u>	
	Check ☐ if self-employed		PTIN <u>P00381214</u>		Firm's name ▶ <u>VESTAL & WILER CPAS</u>	
	Firm's EIN ▶ <u>59-3198021</u>		Firm's address ▶ <u>201 E. PINE ST., STE. 801</u> <u>ORLANDO, FL 32801</u>		Phone no. <u>(407) 843-4433</u>	

Form **990-PF** (2014)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**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

OMB No 1545-0047

2014**Name of the organization**CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.**Employer identification number**

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

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☒

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules☐

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)**

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

Employer identification number

26-4207486

Part I Contributors (see instructions) Use duplicate copies of Part I if additional 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 ORLANDO, FL 32808	\$ 10,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
2	CHARITY CHALLENGE, INC. 640 JASMINE RD. ALTAMONTE SPRINGS, FL 32701	\$ 5,980.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3	CFHLA ASSOCIATION, INC. 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32808	\$ 49,258.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
4	SERVICEMASTER 800 RIDGE LAKE BLVD. MEMPHIS, TN 38126	\$ 5,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.

Employer identification number

26-4207486

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

CENTRAL FLORIDA HOTEL & LODGING ASSOC.
FOUNDATION, INC.

Employer identification number

26-4207486

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DR. PHILLIPS ROTARY P.O. BOX 1381 WINDERMERE, FL 34786	NONE	509(A)(2)	TASTE OF DR. PHILLIPS SPONSORSHIP	1,000.
DR. PHILLIPS LITTLE LEAGUE 700 DR. PHILLIPS BLVD. ORLANDO, FL 32819	NONE	509(A)(1)	GRANT	1,000.
GRAND TOUR GALA P.O. BOX 2261 WINTER PARK, FL 32790-2261	NONE	509(A)(2)	TRAILBLAZER SPONSORSHIP	3,000.
MID FLORIDA TECH 2900 WEST OAK RIDGE ROAD ORLANDO, FL 32809	NONE	509(A)(1)	SCHOLARSHIPS	2,000.
SCHOOL DISTRICT OF OSCEOLA COUNTY 817 BILL BECK BLVD KISSIMMEE, FL 34744	NONE	509(A)(1)	DVD AND INSTRUCTIONAL/INDUSTRY CERTIFICATION EXAM MATERIALS	1,000.
ORANGE COUNTY PUBLIC SCHOOLS 445 W. AMELIA STREET, SUITE 901 ORLANDO, FL 32801	NONE	509(A)(1)	HOSPITALITY & CULINARY COMPETITION COSTS	3,200.
WINTER SPRINGS HIGH SCHOOL 130 TUSKAWILLA ROAD WINTER SPRINGS, FL 32708	NONE	509(A)(1)	HTMP INSTRUCTOR KIT AND SUPPLEMENTAL MATERIALS	1,000.
VALENCIA COLLEGE FOUNDATION 1768 PARK CENTER DRIVE ORLANDO, FL 32835	NONE	509(A)(1)	PAYMENT 1 OF 10 FOR HOSPITALITY CLASSROOM NAMING RIGHTS	5,000.
UCF - ROSEN SCHOOL OF HOSPITALITY MANAGEMENT 4000 CENTRAL FLORIDA BLVD., MILICAN HALL ROOM 120 ORLANDO, FL 32816	NONE	509(A)(1)	THE PINEAPPLE BALL	3,000.
UCF FOUNDATION, INC. 12424 RESEARCH PARKWAY, SUITE 250 ORLANDO, FL 32826	NONE	509(A)(1)	PAYMENT 3 OF 10 YEAR COMMITMENT FOR THE STUDENT LOUNGE	10,000.
Total from continuation sheets				119,478.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF CENTRAL FLORIDA 4000 CENTRAL FLORIDA BLVD. ORLANDO, FL 32816	NONE	509(A)(1)	FAMILY MEMBER SCHOLARSHIPS (5)	10,000.
UNIVERSITY OF FLORIDA PO BOX 114050, S-113 CRISER HALL GAINESVILLE, FL 32611	NONE	509(A)(1)	FAMILY MEMBER SCHOLARSHIPS (4)	8,000.
UCF - ROSEN SCHOOL OF HOSPITALITY MANAGEMENT 4000 CENTRAL FLORIDA BLVD., MILICAN HALL ROOM 120 ORLANDO, FL 32801	NONE	509(A)(1)	SCHOLARSHIPS FOR 15 STUDENTS	26,500.
VALENCIA COLLEGE 190 S. ORANGE AVENUE ORLANDO, FL 32801	NONE	509(A)(1)	SCHOLARSHIPS FOR 2 STUDENTS	4,000.
FLORIDA TECHNICAL COLLEGE 12900 CHALLENGER PARKWAY ORLANDO, FL 32826	NONE	509(A)(1)	SCHOLARSHIP FOR 3 STUDENTS	5,000.
PAST, INC 511 W. SOUTH STREET, SUITE 100 ORLANDO, FL 32805	NONE	509(A)(1)	TRAIL BLAZERS LEGACY BREAKFAST SPONSOR	500.
WOMEN'S RESIDENTIAL COUNSELING CENTER 107 HILLCREST STREET ORLANDO, FL 32801	NONE	509(A)(1)	REPLACE FLOORING IN CENTER; CLEANING SUPPLIES	22,330.
LOCKHART ELEMENTARY 7500 EDGEWATER DRIVE ORLANDO, FL 32810	NONE	509(A)(1)	SCHOOL UNIFORMS; OFFICE SUPPLIES; A/V EQUIPMENT;	10,448.
FLORIDA MISSING CHILDREN'S DAY FOUNDATION P.O. BOX 15822 TALLAHASSEE, FL 32317	NONE	509(A)(1)	GENERAL SUPPORT	1,000.
SIMON YOUTH FOUNDATION 730 SAND LAKE ROAD ORLANDO, FL 32809	NONE	509(A)(1)	SCHOLARSHIP FOR 1 STUDENT AT SIMON YOUTH ACADEMY	500.
Total from continuation sheets				

3 Grants and Contributions Paid During the Year (Continuation)**Total from continuation sheets**

FORM 990-PF

OTHER INCOME

STATEMENT

1

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
TEACHERS' ACADEMY	810.	0.	
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	89,051.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	89,861.	0.	

FORM 990-PF

LEGAL FEES

STATEMENT

2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	2,825.	0.		0.
TO FM 990-PF, PG 1, LN 16A	2,825.	0.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT

3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER EXPENSES	20,229.	0.		0.
POSTAGE	25.	0.		0.
BANK CHARGES	2,683.	0.		0.
FUNDRAISING EXPENSE	57,800.	0.		0.
TO FORM 990-PF, PG 1, LN 23	80,737.	0.		0.

FORM 990-PF	OTHER LIABILITIES	STATEMENT	4
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
STUDENT SCHOLARSHIPS	10,000.	4,000.	
NON CURRENT LIABILITIES	3,000.	2,000.	
DEFERRED BB/SPONSORSHIPS	8,829.	12,947.	
TOTAL TO FORM 990-PF, PART II, LINE 22	21,829.	18,947.	

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	5
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
RICHARD MALADECKI 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	PRESIDENT/CEO/STAFF LIASON 1.00	0.	0.	0.
SCOTT TRIPOLI 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
RICK ALLEN 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
RON CAIMANO 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
MIKE SMUKALL 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
JEFF BRINDA 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	HISTORIAN 1.00	0.	0.	0.
LAURA SHERMAN 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.

LOUIS ROBBINS 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	VICE-CHAIR 1.00	0.	0.	0.
DENNIS BEMENT 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
JOE MAHONEY 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
JIM BURNS 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	CHAIRPERSON 1.00	0.	0.	0.
JETSE POTTINGA 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	TREASURER 1.00	0.	0.	0.
GREG HAUENSTEIN 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
GERALD URQUIOLA 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
PETER KACHERIS 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
DUANE WINJUM 6675 WESTWOOD BLVD., SUITE 210 ORLANDO, FL 32821	MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF	GRANT APPLICATION SUBMISSION INFORMATION	STATEMENT	6
	PART XV, LINES 2A THROUGH 2D		

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	STATEMENT	7
	PART XVII, LINE 1, COLUMN (D)		

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 A CONTRIBUTOR TO THE FOUNDATION.

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	8
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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.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

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

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

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

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on **e-file for Charities & Nonprofits**.

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
	CENTRAL FLORIDA HOTEL & LODGING ASSOC. FOUNDATION, INC.	Employer identification number (EIN) or 26-4207486
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 6675 WESTWOOD BLVD., NO. 210	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ORLANDO, FL 32821	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

Application Is For	Return Code	Application Is For	Return 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-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

LEE JOHNSON, DIRECTOR OF FINANCE

- The books are in the care of ► **6675 WESTWOOD BLVD., SUITE 210 - ORLANDO, FL 32821**

Telephone No. ► **407-313-5000**

Fax No. ►

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

- I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - ☒ **X** calendar year **2014** or
 - ☐ tax year beginning , and ending .

- If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0 .
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0 .
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0 .

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.