

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Depa	rtment	t of the Treasury	▶ Do	not enter	social se	curity numbers or	this form as	s it may be ma	ade public.	2013
Intern	al Rev	renue Service	► Information or tax year beginning	about For	m 990-P	F and its separate	instructions and e		дочнотпівворг.	Open to Public Inspection
_		foundation	or tax year beginning				, and c	and my	A Employer identificatio	n number
IVal	116 01	louildation							, comproyer recommendance	
С	NL	CHARIT	ABLE FOUNDA	TION,	INC				59-3613312	2
_			oox number if mail is not deliv					Room/suite	B Telephone number	·
P	.0	. BOX 4	920					<u> </u>	(407) 650-	-1000
			ovince, country, and ZIP		ostal cod	le			C If exemption application is	pending, check here
_0	RL	ANDO, F		20						
G (heck	all that apply:	Initial return		片	Initial return of a fo	ormer public	charity	D 1 Foreign organization	s, check here
			Final return		片	Amended return			Foreign organizations m check here and attach c	eeting the 85% test,
u (hook	type of organiz	Address char		compt or	Name change vate foundation			1	•
) nonexempt charitable t			vate loundation cable private found:	ation		E If private foundation sta under section 507(b)(1	
l E				J Accounti			X Acc	rual	F If the foundation is in a	
		Part II, col (c),	-		ther (spe				under section 507(b)(1	
	\$, ,,,				nust be on cash	basis)			
Pa	ırt I	√ The total of amount √ The total of a	evenue and Expenses ounts in columns (b), (c), and at the amounts in column (a))	(d) may not		Revenue and enses per books		nvestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions,	gifts, grants, etc., receive	ed	1,	980,000.			N/A	
	2	Check	if the foundation is not required to a							
	3	Interest on saving cash investments	gs and temporary			4.		4.		STATEMENT 1
	4		interest from securities		<u> </u>					
	Ι.	Gross rents					···-			
	۱ ـ	Net rental income	· · · · · · · · · · · · · · · · · · ·		<u> </u>					
ğ	Da b	Gross sales price	from sale of assets not on lin	e 10	<u> </u>				<u></u>	<u> </u>
Revenue	1 -	assets on line 6a	ncome (from Part IV, line 2)	- 1 4, 12,	- 10			0.		
æ		Net short-term	اها	0.0.0010	1					
	9	Income modifi	cations S NUV	28 2016	100					
	10a	Gross sales less and allowances				1				
	1	Less Cost of good		<u></u> N, <u>U</u>	<u> </u>	<u> </u>				
	l	Gross profit or	(loss)		<u> </u>					
		Other income Total Add line	oc 1 through 11		 1	980,004.		4.		
	12		officers, directors, trustees,	etc	 '	0.		0.		0.
	I -	•	e salaries and wages	510	-					
	i .	Pension plans,	, employee benefits							
ses	16a	Legal fees	-							
e e	b	Accounting fee	es							
ive Expe		Other professi	onal fees							
tive		Interest	Cmx	IT 2		66.		0.		0.
strati		Taxes		11 Z	-	00.	-			
Ë	1	Depreciation a Occupancy	na depletion		<u> </u>			•		·
Adn			ences, and meetings		<u> </u>					
Ď	I	Printing and p			-					
Operating and Administrative Expenses	I	Other expense		1T 3		1,161.		0.		1,161.
ratır	24	•	g and administrative							
þe		-	d lines 13 through 23			1,227.		0.		1,161.
J	1		gifts, grants paid		$\frac{2}{1}$	289,900.	 			2,289,900.
	26	-	es and disbursements.		۱ ,	291,127.		0.		2,291,061.
	27	Add lines 24 a Subtract line 2			 	, 491, 141.		0.		2,271,001
	ŀ		o Iruin line 12.	ements	.	<311,123.	>			
	1		nt income (if negative, enter					4.		
	c		ncome (if negative, enter -0						N/A	
5235	01 4-15		perwork Reduction Act		instructi	ions				Form 990-PF (2015

Page 2

Part	Balance Sheets Attached schedules and amounts in the description column should be for each of-year amounts only	Beginning of year	End of	
rait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	313,313.	2,256.	2,256.
2	Savings and temporary cash investments			
3	Accounts receivable			
	Less: allowance for doubtful accounts			
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			1
	Less; allowance for doubtful accounts			
र्छ 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges	2,399.	2,333.	2,333.
10: 🔰 🏲	a 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 ►)			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	315,712.	4,589.	4,589.
17	Accounts payable and accrued expenses			
18	Grants payable			
စ္က 19	Deferred revenue			
≝ 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 51 20 21 21 22	Mortgages and other notes payable			
그 22	Other liabilities (describe ▶)			i
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
ဗ္ဗိ ₂₄	Unrestricted			
E 25	Temporarily restricted			
සි 26	Permanently restricted			
[]	Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balanc 30 25 25 25 25 25 25 25 25 25 25 25 25 25	and complete lines 27 through 31.			
ο 27	Capital stock, trust principal, or current funds	0.	0.	
평 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ 29	Retained earnings, accumulated income, endowment, or other funds	315,712.	4,589.	
를 30	Total net assets or fund balances	315,712.	4,589.	
_				
31	Total liabilities and net assets/fund balances	315,712.	4,589.	
Part	Analysis of Changes in Net Assets or Fund Ba	alances		
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)		1	315,712.
•	er amount from Part I, line 27a		2	<311,123.
	er increases not included in line 2 (itemize)		3	0.
	I lines 1, 2, and 3		4	4,589.
	creases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	4,589.

2-story brick w		nd(s) of property sold (e.g or common stock, 200 sh			P-	low ac Purch Dona	iase	(c) Date (mo., c	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a	NTE			<u>_</u>	├ ─				-	
	NE			<u></u>	├					
d					+					
e					1					
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale					ain or (loss) s (f) minus (
<u>a</u> <u> </u>	İ				+					
<u> </u>	1				-		_			
d							_			
e				10/0						
Complete only for assets show							(l)) Gains (0	Col. (h) gain not less thai	minus n -0-) or
(i) F.M.V. as of 12/31/69		i) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				Losses	(from col. (h))
<u>a</u>	<u> </u>		<u> </u>							
<u>b</u>										
<u>d</u>					$\neg +$				_	
е										
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter -0	r in Part I, line	7	}	2				
3 Net short-term capital gain or (lo	. ,	•		•	プト	_				
if gain, also enter in Part I, line 8			iu (0).]	l				
If (loss), enter -0- in Part I, line 8	<u>. </u>	·	-			3				
		ection 4940(e) for					ent ind	ome_		_
(For optional use by domestic privat	e ioundatio	ns subject to the section (4940(a) iax on	i net investment ir	icome.	.)				
If section 4940(d)(2) applies, leave t	this part bla	nk.								
Was the foundation liable for the sec	ction 4942 t	ax on the distributable an	nount of any ye	ear in the base pei	rıod?					Yes X No
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					ntrion					
(a)	each colun	(b)	nstructions be	iore maxing any e						(d) ution ratio
Base periód years Calendar year (or tax year beginn	ıng ın)	Adjusted qualifying dis	tributions	Net value of no	(c) Inchari	table-L	ise assets		Distrib (col. (b) div	utión ratio ided by col. (c))
2014		1,13	1,995.			37:	1,075			3.050583
2013			6,898.				4,103		-	1.749562
2012			1,237.				$\frac{5,415}{4,023}$			1.063470
2011 2010			5,888. 3,356.	· · ·			4,923 9,382		_	.484501
2010		1,40	3,330.	<u> </u>		, , , ,	7,302	+-	Ī	.372700
2 Total of line 1, column (d)								2		6.720876
3 Average distribution ratio for the	5-year base	e period - divide the total (on line 2 by 5,	or by the number	of yea	ırs			i	
the foundation has been in existe	ence if less t	than 5 years						3_		1.344175
4 Enter the net value of noncharita	ble-use ass	ets for 2015 from Part X,	line 5					4		95,526.
5 Multiply line 4 by line 3								5		128,404.
6 Enter 1% of net investment incor	me (1% of F	Part I, line 27b)						6		0.
7 Add lines 5 and 6								7		128,404.
8 Enter qualifying distributions from	m Part XII. I	ine 4						8		2,291,061.
If line 8 is equal to or greater tha See the Part VI instructions.			1b, and comp	lete that part usin	ıg a 1%	6 tax ra	ate.		•	

orm 990-PF (2015) CNL CHARITABLE FOUNDAT		0013312		Page 4
	Section 4940(a), 4940(b), 4940(e), or 4948 -	see instri	JCTIO	ns)
1a Exempt operating foundations described in section 4940(d)(2), check her				
	opy 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 organ	, ,			•
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable fo				<u> 0.</u>
3 Add lines 1 and 2	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fo				0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or le	ess, enter -0-			<u> </u>
6 Credits/Payments:	1 2 2 2 2 2			
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a 2,333.			
b Exempt foreign organizations - tax withheld at source	66			
c Tax paid with application for extension of time to file (Form 8868)	6c			
d Backup withholding erroneously withheld	6d		2 2	22
7 Total credits and payments. Add lines 6a through 6d	7		2,3	33.
8 Enter any penalty for underpayment of estimated tax. Check here if				
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount ow			2 2	
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the an			2,3	
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax	2,333 • Refunded ▶ 11			0.
Part VII-A Statements Regarding Activities			IVoc	No
1a During the tax year, did the foundation attempt to influence any national, s	state, or local legislation or did it participate or intervene in		Yes	
any political campaign?		1a	 	X
b Did it spend more than \$100 during the year (either directly or indirectly)		1b		
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			}	v
c Did the foundation file Form 1120-POL for this year?	A. L Man	1c	┼	X
d Enter the amount (if any) of tax on political expenditures (section 4955) in	· · · · · · · · · · · · · · · · · · ·	l		
		1		
e Enter the reimbursement (if any) paid by the foundation during the year formanagers. ► \$ 0 •	or political expenditure tax imposed on toundation		'	1
	a managed at the IDCO	} .	}	x
2 Has the foundation engaged in any activities that have not previously been	n reported to the INS?	2	 	<u> </u>
If "Yes," attach a detailed description of the activities.	Consider an incompanie in observation of incompanies are	1		
3 Has the foundation made any changes, not previously reported to the IRS		3		x
bylaws, or other similar instruments? If "Yes," attach a conformed co,	-	4a	┼	X
4a Did the foundation have unrelated business gross income of \$1,000 or me b if "Yes," has it filed a tax return on Form 990-T for this year?	N/		\vdash	<u> </u>
5 Was there a liquidation, termination, dissolution, or substantial contraction		5	+-	X
If "Yes," attach the statement required by General Instruction T	in during the year:	 	+	
6 Are the requirements of section 508(e) (relating to sections 4941 through	1 4045) satisfied either			
By language in the governing instrument, or	1 4040) Salished Child.			
By state legislation that effectively amends the governing instrument so	that no mandatory directions that conflict with the state law	1	1	ł
remain in the governing instrument?	, that no mandatory directions that commet that the state law	6	x	1
7 Did the foundation have at least \$5,000 in assets at any time during the year	ear? If "Ves " complete Part II, col. (c), and Part XV	7	X	\vdash
To the foundation have at least \$6,000 in assets at any time during the ye	out in 100, complete hair in, con (o), and hair are no		+	
8a Enter the states to which the foundation reports or with which it is register	ered (see instructions)			1
FL			l	İ
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Fori	m 990-PF to the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach ex		86	X	
9 Is the foundation claiming status as a private operating foundation within			1	
year 2015 or the taxable year beginning in 2015 (see instructions for Part		9	1	Х
10 Did any persons become substantial contributors during the tax year? Her		10	T	$\overline{\mathbf{x}}$

	990-PF (2015) CNL CHARITABLE FOUNDATION, INC. 59-36	13312		Page 5
Pa	art VII-A Statements Regarding Activities (continued)		15.4	
			Yes	No
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	ļ	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		.
	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	<u> </u>
	Website address ► N/A The books are in care of ► TRACY TURNER Telephone no. ► (407)) 650	10	<u> </u>
14	· · · · · · · · · · · · · · · · · · ·			
45		32801	-33	30
10	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N	/A	•
10	and enter the amount of tax-exempt interest received or accrued during the year 15		Yes	TAI_
סו	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	T 46	res	X
	securities, or other financial account in a foreign country? See the instructions for expentions and filtra requirements for EnCEN Form 114. If "Yes," onter the name of the	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country	ŀ		
D۶	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Voc	No
1.	a During the year did the foundation (either directly or indirectly):	<u> </u>	162	140
16	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		i	·
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	E .]
	(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	1		
	for the benefit or use of a disqualified person)? Yes X No			Ī
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1		\ ·
	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 X No			
ŀ	o 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)? N/A	1b	1	ł
	Organizations relying on a current notice regarding disaster assistance check here			\vdash
c	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	1		
	before the first day of the tax year beginning in 2015?	10		х
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2015?			
	If "Yes," list the years • , , ,	ļ		ŧ
b	o 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.) N/A	2b		İ
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>		ľ	•
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	of "Yes," did it have excess business holdings in 2015 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	1		
	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 2015) N/A	3b_		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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 2015?	4b	<u> </u>	X

Form 990-PF (2015) CNL CHARITABLE FOUNDATION			59-36133	12 _ Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Hequired (contin	ued)	
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section) Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? 	n 4945(e))? or to carry on, directly or indirectly or described in section or educational purposes, or t	ectly,	es X No es X No es X No es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify universection 53.4945 or in a current notice regarding disaster assistance (see instru	•	in Regulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance (see institution)	•		N/A	30
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 494 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a page 15 to 5 to 5 to 5 to 5 to 5 to 5 to 5 t	N 5-5(d) pay premiums on	1/A 🔲 Y	es No	6b X
If "Yes" to 6b, file Form 8870.	alle de la constantina		∵	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y	es X No N/A	7b
Part VIII Information About Officers, Directors, Trust		nagers Highl		70
Paid Employees, and Contractors	ees, i oundation we	inagers, riigin	y	
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 4		0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "	<u> </u>	
(a) Name and address of each employee paid more than \$50,000 NONE	(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
Total number of other employees paid over \$50,000	<u> </u>		<u> </u>	0

Form **990-PF** (2015)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 94,582. 16 b Average of monthly cash balances 2,399. c Fair market value of all other assets 1c 96,981. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 96,981. Subtract line 2 from line 1d 3 4 1,455. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 95,526. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V. line 4 5 4.776. Minimum investment return Enter 5% of line 5 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.) Minimum investment return from Part X, line 6 1 4.776. Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 2,291,061. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 2,291,061. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 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

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

Form **990-PF** (2015)

6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,	· ·	·		
line 7				4,776.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2015:				=
a From 2010 1,284,578.				
bFrom 2011 1,305,999.				
cFrom 2012 1,357,754.				
dFrom 2013 1,095,019.				
eFrom 2014 1,113,573.				
f Total of lines 3a through e	6,156,923.			
4 Qualifying distributions for 2015 from	0,130,323.			<u></u>
Part XII, line 4: ▶\$ 2,291,061.				
			0.	
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			4 776
d Applied to 2015 distributable amount	0.006.005			4,776.
e Remaining amount distributed out of corpus	2,286,285.			
5 Excess distributions carryover applied to 2015 (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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,443,208.		-	
b Prior years' undistributed income. Subtract	<u> </u>			
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 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				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 2010			-	
not applied on line 5 or line 7	1,284,578.			
9 Excess distributions carryover to 2016.	=,===,0,0,			
Subtract lines 7 and 8 from line 6a	7,158,630.			
10 Analysis of line 9:	.,250,0501			
a Excess from 2011 1,305,999.				
b Excess from 2012 1,357,754.				
c Excess from 2013 1,095,019.				
dExcess from 2014 1,113,573.		;		
e Excess from 2015 2, 286, 285.			<u> </u>	

		NDATION, IN		59-36	13312 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	r 2015, enter the date of t	the ruling	>		
b Check box to indicate whether the found	lation is a private operatir	ng foundation described i		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Totai
investment return from Part X for	_				
each year listed				}	
b 85% of line 2a	<u> </u>				
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not				 	
used directly for active conduct of				l	
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(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed		<u> </u>	<u> </u>		
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				1	
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or mo	re in assets
at any time during t				•	
1 Information Regarding Foundation	n Managers:	 			
a List any managers of the foundation wh		than 2% of the total contr	ributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed n			,		
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large portio	n of the ownership of a pa	rtnership or
other entity) of which the foundation has			, , , , ,		
NONE					
2 Information Regarding Contribute	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
. —		• • •	•	ot accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom apple	cations should be addres	sed:	
a the name, and took, and took not the	001 0. 0 man add.000 01.	no porcon to whom app			
SEE STATEMENT 5					
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:		 			
d Any rectrictions or limitations on average	such as by seconds	l arage abardable fields	kinds of institutions ===	ther feeters:	
d Any restrictions or limitations on awards	s, such as by geographica	n areas, charitable fields,	KINOS OI MISUIUUIONS, OF O	uner lactors;	

Form 990-PF (2015) CNL CHARITABLE FOUNDATION, INC.

Part XV | Supplementary Information (continued)

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				
APARTMENT LIPE	N/A	PUBLIC CHARITY	SUPPORT THEIR PROGRAMS	
10 S. INDUSTRIAL BLVD. STE 170		501(C)(3)		
CULESS, TX 76040		<u> </u>	<u> </u>	10,000
ENTRAL FLORIDA COMMISSION ON IOMELESSNESS	N/A	public CHARITY 501(C)(3)	SUPPORT THEIR PROGRAMS	
255 SOUTH ORANGE AVENUE, SUITE 108		501(0)(3)		
ORLANDO, FL 32801		<u> </u>		16,000
OR. PHILLIPS CENTER FOR THE	N/A		SUPPORT THE ARTS	
PERFORMING ARTS .55 E. ANDERSON STREET		501(C)(3)		
ORLANDO, FL 32801				1,550,000
EXCELSIS 120 SOUTH ORANGE AVE., STE 800	N/A	PUBLIC CHARITY 501(C)(3)	SUPPORT PROGRAMS - EDUCATION AND RELIGION	
ORLANDO, FL 32801		501(6)(3)	EDUCATION AND REDIGION	90,000
RONTLINE OUTREACH	N/A	501(C)(3)	SUPPORT THEIR PROGRAMS	
RLANDO, FL 32805				5,000
Total SEE CC	NTINUATION SHE	ET(S)	▶ 3a	2,289,900
b Approved for future payment				
NONE				
NONE				
Total		 	▶ 3b	(

Form 990-PF (2015)

523621 11-24-15

	Part XVI-A	Analysis	of Income	-Producing	Activities
--	------------	----------	-----------	------------	------------

nter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code		code	Amount		
a				- "		
ь						
c	1				-	
d	<u> </u>		1			
e		·	+			
			+			
g Fees and contracts from government agencies			+			
2 Membership dues and assessments		<u> </u>				
3 Interest on savings and temporary cash investments			14	4.		
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate:		-				
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory					-	
1 Other revenue:						
a						
b						
c						
d						
e						
2 Subtotal. Add columns (b), (d), and (e)		(9.	4.		
3 Total. Add line 12, columns (b), (d), and (e)				13		
See worksheet in line 13 instructions to verify calculations.)		-			-	

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
Î	

Part XV	Information Re Exempt Organ		nsfers To a	and Transactions	and Relations	hips With Nonchar	itabl	е	· _
1 Did the	organization directly or indi		of the followin	o with any other organizati	on described in sect	on 501(c) of	_	Yes	No
	le (other than section 501(c			•				-	
	rs from the reporting found								
	• •			="			1a(1)		X
	sh								X
	ner assets	• • • • • • • • • • • • • • • • • • • •		****	• • • • • • • • • • • • • • • • • • • •		1a(2)		_
	ansactions.						.		
(1) Sai	les of assets to a noncharita	ible exempt organiza	ation				1b(1)		X
(2) Pui	rchases of assets from a no	ncharitable exempt	organization				1b(2)		X
(3) Re	ntal of facilities, equipment,	or other assets					16(3)	<u> </u>	X
(4) Rei	imbursement arrangements						16(4)		Х
(5) Loa	ans or loan guarantees						1b(5)		Х
	rformance of services or me						1b(6)		X
c Sharing	of facilities, equipment, ma	iling lists, other ass	ets, or paid em	ployees	***** * * *** ** * * *		10		X
d If the an	swer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should al	ways show the fair n	narket value of the goods, of	her ass	sets,	
	ces given by the reporting for (d) the value of the goods,			ed less than fair market valu	ue in any transaction	or sharing arrangement, sh	ow In		
a)Line na.	(b) Amount involved			exempt organization	/dl paradation	of brandens brancolless and al			
a)Line no.	(u) Arribant involved	(G) Name (e exempt organization	(u) Description	of transfers, transactions, and st	aring ar	rangeme	nts
			<u> N/A</u>						
	····				-	<u>-</u>			
				·····					
	- 								
	<u> </u>								
					+				
2a le the fo	undation directly or indirect	the affiliated with or	minted to one	or more tay-everant organi	zatione decembed				
ın sectio	on 501(c) of the Code (other complete the following sch	than section 501(c				[Yes	X] No
U II (85,	(a) Name of org			(b) Type of organization		(c) Description of relationship			
	N/A			(b) Typo of organization	·	(0) 000011111111111111111111111111111111	<u>- </u>		
		 -							
	or penalties of parjury, I decipe t						h = 10.05°	diam'r an	
Here	belief, it is true, correct, and con	nplet/Declaration of pr	reparer (other than	n taxpayer) is based on all inform	TREASUR	return show	ı with lh	e prepar (see inst	er
1 50	gnature of officer or trustee		10	Date	Title	Phoeli I I I I I I I I I I I I I I I I I I I			
(Print/Type pr parer's na	me	Preparer's si	gnature	Date	Check if PYIN			
Paid	Allism D	Davis	12	don Las	11/3/16	self- employed Poo	26c	(14)	-6
Preparer Use Only		ERSEN TAX	LLC			Firm's EIN ► 33-11	973	84	
	Firm's address ▶ 77			DRIVE, STE	1700-W				
	WE	ST PALM E	BEACH,	FL 33401		Phone no. 561-80	<u>5-6</u>	550	

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

2015

Nama	of the	organization
name.	oi me	organization

CNL CHARITABLE FOUNDATION, INC.

Employer identification number

59-3613312

Organization type (check one)					
Filers of	f:	Section:			
Form 99	0 or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt chantable trust not treated as a private foundation			
		527 political organization			
Form 99	0-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			
	-	s covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions			
General	Rule				
X		on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, 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, chantable, 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.				
but it mi	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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			

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) (2015)

Name of organization

Employer identification number

CNL CHARITABLE FOUNDATION, INC.

59-3613312

Part !	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	CNL FINANCIAL GROUP, INC P.O. BOX 4920 ORLANDO, FL 32802-4920	\$430,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	NATIONAL CHRISTIAN FOUNDATION 215 E. CENTRAL BLVD. ORLANDO, FL 32801	s1,550,000.	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			
			Person Payroll Oncash Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Occash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Occash Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
523452 10-2	6-15	s	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2015)			

Employer identification number

CNL CHARITABLE FOUNDATION, INC.

59-3613312

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			
(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			
22452 40 00		 s	0.000.E7 or 000.DE\ /2015			

Name of organization **Employer identification number** CNL CHARITABLE FOUNDATION, 59-3613312 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 (Enterthis 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 (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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON S.	AVINGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE			(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CNL BANK - #5584		4.	4.	
TOTAL TO PART I, LINE 3		4.	4.	
FORM 990-PF	TAX	ES		STATEMENT 2
DESCRIPTION				CHARITABLE
FEDERAL INCOME TAX	66.	0.		0.
TO FORM 990-PF, PG 1, LN 1	8 66.	0.		0.
FORM 990-PF OTHER EXPENSES STATEMEN				
DESCRIPTION	(A) EXPENSES PER BOOKS			CHARITABLE
FLORIDA ANNUAL REPORT ADMINISTRATIVE EXPENSES	61. 1,100.			61.
TO FORM 990-PF, PG 1, LN 2	3 1,161.	0.		1,161.

		AND FOUNDATION MANAGERS		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
TAMMY TIPTON P.O. BOX 4920 ORLANDO, FL 32802-4920	ASSISTANT TREA	ASURER 0.	0.	0.
JAMES M. SENEFF, JR. P.O. BOX 4920 ORLANDO, FL 32802-4920	CHAIRMAN 1.00	0.	0.	0.
TIMOTHY J. SENEFF P.O. BOX 4920 ORLANDO, FL 32802-4920	PRESIDENT 1.00	0.	0.	0.
TRACY G. SCHMIDT P.O. BOX 4920 ORLANDO, FL 32802-4920	TREASURER 1.00	0.	0.	0.
MARK SCIMECA P.O. BOX 4920 ORLANDO, FL 32802-4920	SECRETARY 1.00	0.	0.	0.
LINDA SCARCELLI P.O. BOX 4920 ORLANDO, FL 32802-4920	ASSISTANT SECE	RETARY 0.	0.	0.
DAYLE SENEFF P.O. BOX 4920 ORLANDO, FL 32802-4920	DIRECTOR 1.00	0.	0.	0.
TIMOTHY MANOR P.O. BOX 4920 ORLANDO, FL 32802-4920	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

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

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LISA SCHULTZ, CNL CHARITABLE FOUNDATION P.O. BOX 4920 ORLANDO, FL 328024920

TELEPHONE NUMBER

407-650-1000

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE IN WRITING AND SHOULD INCLUDE THE AMOUNT REQUESTED, THE PURPOSE AND PROPOSED BUDGET FOR WHICH THE AMOUNT REQUESTED WILL BE USED, INFORMATION ON THE PURPOSE AND MISSION OF THE ORGANIZATION, INCLUDING THE LATEST ANNUAL REPORT OF THE ORGANIZATION (IF AVAILABLE), THE CONTACT PERSON AT THE ORGANIZATION AND THE ORGANIZATION'S IRS TAX-EXEMPT DETERMINATION LETTER.

ANY SUBMISSION DEADLINES

THERE ARE NO SUBMISSION DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

CNL CHARITABLE FOUNDATION WILL CONSIDER GRANTS TO 501(C)(3) CHARITABLE ORGANIZATIONS FOR PURPOSES WHICH ARE CONSISTENT WITH THE CNL CHARITABLE FOUNDATION TAX-EXEMPT PURPOSES, WITH A MAIN FOCUS AT PRESENT ON CHARITABLE ORGANIZATIONS BENEFITING CENTRAL FLORIDA IN AREAS OF EDUCATION, YOUTH, CANCER RESEARCH AND THE ARTS.

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient HEART OF FLORIDA UNITED WAY PUBLIC CHARITY SUPPORT THEIR PROGRAMS N/A 1940 TRAYLOR BLVD 501(C)(3) ORLANDO, FL 32804-4714 60,000. JUNIOR ACHIEVEMENT OF CENTRAL FL PUBLIC CHARITY EDUCATION N/A 2121 CAMDEN ROAD 501(C)(3) ORLANDO, FL 32803 10,000. LIFEWORK LEADERSHIP N/A PUBLIC CHARITY SUPPORT AND ENHANCE 1220 EAST CONCORD STREET 501(C)(3) LIVES OF PEOPLE WITH ORLANDO, FL 32803 DISABILITIES 5,000. PUBLIC CHARITY SUPPORT THEIR PROGRAMS MENNELLO MUSEUM OF AMERICAN FOLK ART N/A 900 E. PRINCETON STREET 501(C)(3) ORLANDO, FL 32803 5,000. ORLANDO MUSEUM OF ART PUBLIC CHARITY SUPPORT THE ARTS N/A 2416 NORTH MILLS AVENUE 501(C)(3) ORLANDO, FL 32803 10,000. ROLLINS COLLEGE N/A PUBLIC CHARITY EDUCATION 1000 HOLT AVENUE 501(C)(3) WINTER PARK, FL 32789-4499 10,000. PUBLIC CHARITY EDUCATION STERLING COLLEGE N/A 125 WEST COOPER ST 501(C)(3) STERLING, KS 67579 100,000. THE GENEVA SCHOOL PUBLIC CHARITY SUPPORT EDUCATIONAL N/A PROGRAMS 2025 STATE ROAD 436 501(C)(3) WINTER PARK, FL 32792 408,900. THE JOBS PARTNERSHIP OF FLORIDA N/A PUBLIC CHARITY SUPPORT THEIR PROGRAMS 5336 MILLENIA BLVD., SUITE 5000 501(C)(3) ORLANDO, FL 32839 10,000. 618,900. Total from continuation sheets

CNL CHARITABLE FOUNDATION, INC.

EIN: 59-3613312

FOR THE YEAR ENDED DECEMBER 31, 2015

In accordance with Federal requirements, this organization is submitting to the Attorney General of the State of Florida, Federal Form 990-PF, as filed with the Internal Revenue Service.

Treasurer IIIo 2016
Signature Title Date