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532001 12-16-15

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A F	or the	2015 calendar year, or tax year beginning JUL 1, 2015 and e	nding J	UN 30, 2016							
B Cr ap	eck if plicable	C Name of organization		D Employer identifi	cation number						
	Addres change	S COMMUNITY FOUNDATION OF BROWARD, INC									
	Name change		59-2	477112							
	Initial return		eet (or P.O. box if mail is not delivered to street address) Room/suite E Telephone r								
	Final return/	910 EAST LAS OLAS BLVD 2	(954	954)761-9503							
	termin- ated			G Gross receipts \$	94,637,289.						
	Amend return	FORT LAUDERDALE, FL 33301	H(a) Is this a group return								
	Applica	F Name and address of principal officer: DINDA D. CARTER		for subordinates	s? Yes X No						
	pendin	SAME AS C ABOVE		H(b) Are all subordinates i	ncluded? Yes No						
Į Ta	ax-exe	mpt status: X 501(c)(3) 501(c)()	r 527	If "No," attach a	list (see instructions)						
		e: ▶ WWW.CFBROWARD.ORG		H(c) Group exemption							
		organization: X Corporation Trust Association Other	L Year	of formation: 1984] i	M State of legal domicile: FL						
Pa		Summary			!! 4						
ě	1 1	Briefly describe the organization's mission or most significant activities: ${f SEE}$ ${f A}$	TTACH	ED STATEMEN	r #1.						
auc	-										
Activities & Governance	_	Check this box I if the organization discontinued its operations or disposi	ed of more	e than 25% of its net a							
ૃં		Number of voting members of the governing body (Part VI, line 1a)	• •	3	22						
8		Number of independent voting members of the governing body (Part VI, line 1b)		4	15						
ties		Total number of individuals employed in calendar year 2015 (Part V, line 2a)	••	5	40						
		Total number of volunteers (estimate if necessary)		7a							
Ą		Total unrelated business revenue from Part VIII, column (C), line 12	••	, <u>7a</u>							
	D	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year						
	0	Contributions and grants (Part VIII, line 1h)		8,407,814.							
že		Program service revenue (Part VIII, line 2g)	<u> </u>	0,407,014.	0.						
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		8,391,726							
Re		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		37,196	31,235.						
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	"	16,836,736							
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		7,790,641	9,200,953.						
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.						
S		Salaries, other compensation, employee benefits (Part X Column (A), lines 5-10)		1,309,888	1,466,343.						
Expenses		Professional fundraising fees (Part IX, column (A) line 11e)		0.							
ğ		Total fundraising expenses (Part IX, column (D) he 25 B 1 0 20174 5 0 2 2 5	54. 🗌								
'nЩ	17	Other expenses (Part IX, column (A), lines 11a (I) d, 11f-24e)		2,112,897	2,128,288.						
	18	Total expenses, Add lines 13-17 (must equal Rart IX, column (A), line, 25).		11,213,426							
	19	Revenue less expenses. Subtract line 18 from line 10GDEN, U1		5,623,310	-4,628,713.						
Net Assets or Fund Balances				eginning of Current Year							
sets	20	Total assets (Part X, line 16)	<u> </u>	171,966,018.							
it As	21	Total liabilities (Part X, line 26)		20,084,541							
컐	22	Net assets or fund balances. Subtract line 21 from line 20		<u> 151,881,477</u>	<u>. 139,603,192.</u>						
	ırt II	Signature Block									
		alties of perjury, I declare that I have examined this return, including accompanying schedules			ny knowledge and belief, it is						
true, correct, and complete declaration of preparer (other train officer) is based on all information of which preparer has any knowledge											
		Signification of officer		Date / G	/ / /						
Sig				Date	/						
Her	е	LINDA B. CARTER, PRESIDENT/CEO Type or print name and title									
_				Date Check	PTIN						
De!		Print/Type preparer's name Preparer's signature	Ά Ι	21.1.2	— П						
Paid		WILLIAM G. BENSON VILLE, C. Firm's name KEEFE, MCCULLOUGH & CO., LLP, C	<u> </u>		· · · · · · · · · · · · · · · · · · · 						
	oarer Only		.P.A. 410	S Firm's EIN	59-1363792						
บชช	omy	FT. LAUDERDALE, FL 33308	4 T O	Dhone no O	54-771-0896						
Mar	the !	RS discuss this return with the preparer shown above? (see instructions)		Tallolle IIO. 3	X Ves No.						

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2015)

orm	990 (2015) COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
•	TO PROVIDE LEADERSHIP ON COMMUNITY SOLUTIONS AND FOSTER PHILANTHROPY
	THAT CONNECTS PEOPLE WHO CARE WITH CAUSES THAT MATTER.
	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
_	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	Eld the diganization bodds contacting, or make organization and general transfer and the second contacting to the second contacting to the second contact and th
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ 10,497,152. including grants of \$ 9,200,953.) (Revenue \$ 31,235.)
	SEE ATTACHED STATEMENT #2.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	, ,
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶ 10,497,152.
	Form 990 (2015)

Part IV | Checklist of Required Schedules

	Г		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		.,	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		77
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		. ,	
	during the tax year? If "Yes," complete Schedule C, Part II	4_	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		37
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u>X</u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		37	
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_ 1		v
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		37
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			7.7
	If "Yes," complete Schedule D, Part IV	9		<u>X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		37	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445	x	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	444		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	 ^
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	A	
f	· · · · · · · · · · · · · · · · · · ·	11f		x
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12a		12a	X	
	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
D	If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	1	х
40	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		
13	The state of the s	14a	t	X
14a	Did the organization maintain an office, employees, or agents outside of the officed states. Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-70	 	
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	1		
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	··•	1	1
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	T.,	†	†- <u></u> -
	1c and 8a? If "Yes," complete Schedule G, Part II	18	1	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		1	<u> </u>
	complete Schedule G, Part III	19	1	x
			n 990	(2015)

Form 990 (2015) COMMUNITY FOUNDATI
Part IV Checklist of Required Schedules (continued)

20a Dat the organization or proverse one or more hospital flacidities? If "Nes," complete Schedule I. Part I and II bit "Yes" to line 20a, did the organization attach a copy of its audited flameual statements to this return? 20b				Yes	No
bit "Vest folling 20a did the organization statish a copy of its audited financial statements to fine return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part X, column (A), line 1" I" "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), line 2" I" "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, local mind (A), line 2" I" "Yes," complete Schedule I, Parts I and III Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I and the organization maves any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maves are an excrow account other than a refunding excrow at any time during the year to defease any tax-exempt bonds? Did the organization maves are an "on behalf of" issuer for bonds outstanding at any time during the year? 24d J. Section S01(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization engage in an excess benefit transaction what a disciplation waver that it engaged in an excess benefit transaction was refusit in engaged in an excess benefit transaction with a disciplation waver that it engaged in an excess benefit transaction with a disciplation waver that it engaged in an excess benefit transaction with a disciplation waver that it engaged in an excess benefit transaction with a disciplation waver that it engaged in an excess benefit transaction with a disciplation waver that it engaged in an excess benefit transaction with a disciplation of the organization waver that it engaged in an excess benefit transaction with a disciplation of the organiza	20a	Did the organization operate one or more hospital facilities? If "Yes." complete Schedule H	20a		
the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic operament on Part XI, column (A), inte 2º II "Yes, complete Schedule I, Part I and II 19 and I					
domestic government on Part IX, column (A), ine 1º If "res," complete Schedule I, Parts I and II 20 Did the organization open time than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III 21 Did the organization answer "Ves" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I Schedule I Will No." got to the 25s 23 X 24b Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was assued after December 31, 2002? If "Yes," conserve lines 24b through 24d and complete Schedule I, Will No." got to the 25s 25b Did the organization invest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization minest any proceeds of tax exempt bonds beyond a temporary peniod exception? 25d Did the organization and that it is suited for issue for bonds outstanding at any time during the year? 25d Did the organization and that the transaction is the substanction of the adjusted person in a prior year, and that the transaction has not been reported on any of these proceeds of the process of the substanction of the organization sport of process of the process of the substanction of the organization sport of process of the substanction of the organization sport of the process of the substanction of the process of the substanction of the process of t			-		
22 Dd the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X, column (A), inse 2* // 1*79s*, "complete Schedule*, Parts I and III and offered officers, directors, frustees, key employees, and highest compensated employees* // 1*79s*, complete Schedule*, Part II and former officers, directors, frustees, key employees, and highest compensated employees* // 1*79s*, complete Schedule*, Part II and former officers, directors, frustees, key employees, and highest compensated employees* // 1*79s*, complete Schedule*, K. If *No*, go to line 25a			21	Х	
Part IX, column (A), time 2? If "Yes," complete Schedule I, Part I and III 22	22	•			
23 bit the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. 24 bit the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a 25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax exempt bonds? 25c Section 50 (tq.03), 50 (tq.04), and 50 (tq.03) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 25c In the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part II 25c In the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part IV 25d Did the organization is party to a business transaction with one of the following parties (see Schedule L, Part IV 25d A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 26d A nentity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27d An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27d An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27d Did the organization liquidate, terminate, or dissolve and cease operations? 27d If "Yes," complete Schedule R, Part	_		22		X
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after Discember 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to here 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 24c Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 24d Did the organization and as an "on behalf of" issuer for bonds outstanding st any time during the year? 24d Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the school of the principal and the principal and the transaction with a disqualified person of uring the year? 25a Section 501(6)(8), 501(6)(4), and 501(6)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, the 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, or disqualified persons? If "Yes," complete Schedule L, Part IV Did the organization provide a grant or or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV Did the organization provide a grant or former officer, director, trustee, or key employee or a family member thereof) was an officer, director, trust	23				
Schedule / 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? developed the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? developed the organization and adequalled person during the year? If "Pes," complete Schedule L, Part I are organization and a disqualled person of any of the organization with a disqualled person in a prior year, and that the transaction with a disqualled person of any of the programization's prior Formes 950 or 990-E72 If "Yes," complete Schedule L, Part I are organization report any amount on Part X, Ine 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualled persons? If "Yes," complete Schedule L, Part II are organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV be A remainly of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV and the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV and the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV and the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part IV and Did t					
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size day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K, If 'No', go to line 25a b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? d Did the organization with a disqualified person during the year? If 'Yes,' complete Schedule L, Part II 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If 'Yes,' complete Schedule L, Part II b Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officer, strustees, key employees, or disqualified persons? If "Yes,' complete Schedule L, Part III D Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former of any of these persons? If "Yes, complete Schedule L, Part IV 27b Did the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV a Name organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV C An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV D Id the organization parties of the organization and any tax exempt or a thin stora	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
b Did the organization invest any proceeds of fax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrive account other than a refunding escrive at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Did the organization aware that it engaged in an excess benefit transaction with a disqualified person of uning the year? If "Yes," complete Schedule L, Part I Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization is prof froms 990 or 990-EZ? If "Yes," complete Schedule L, Part I Did the organization prof any amount on Part X, line 5, 8, or 22 for receivables from or payables to any current or former officer, and any amount on Part X, line 5, 8, or 22 for receivables from or payables to any current or former officer, director, trustee, with a contributior or employee thereof, a grant selection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule L and II Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV By A tarnity member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A carnet or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-eash contributions? If "Yes," complete Schedule R, Part I, III, or IV, and Part I, III,		last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	•		
C Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization of part of part of the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, trustee, expending persons? If "Yes," complete Schedule persons? If "Yes," complete Schedule persons? If "Yes," complete Schedule L, Part II 25b Us the organization provide a prant or other assistance to an officer, director, trustee, or to former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A nentry of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A current or former officer,		Schedule K. If "No", go to line 25a	24a		<u>X</u>
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b is the organization water that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction was not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I 25b Utheorganization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 260 Utheorganization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 27 Institutions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 28b X 29 Dd the organization or a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 29 Dd the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 30	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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Schedule L, Part I 25	b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
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27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X 27 X 28a X 28b X 28 X 28b X 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization individate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701.3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? b If "Yes," to ine 35a, did the organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Sche					
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a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee? If "Yes," complete Schedule M 29 X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization iquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 X 32 X 33 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 Was the organization have a controlled entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization conduct more than 5% of its activitie	28				
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 31 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 32 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Ime 1 33 Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 36 Was the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Wother organization complete Schedule O and provide explanations in Schedul	_		200	Ì	v
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	-	Note. All Form 990 filers are required to complete Schedule U			(0015)

532004 12-16-15

Par				
	Check if Schedule O contains a response or note to any line in this Part V			ᆜ
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0	i 1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		77	
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 15	1	7.7	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		7.7	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			٠,,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	_		3.5
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	_		7,7
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	١		
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	l _		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			X
_	to file Form 8282?	7c	-	<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d 7d	┤	x	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f	X	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		 ^	╁
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	-	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/ 11	 	\vdash
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		x
	Sponsoring organizations maintaining donor advised funds.	۳,	<u> </u>	1
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:	75	1	 **
	Initiation fees and capital contributions included on Part VIII, line 12			
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		
11	Section 501(c)(12) organizations. Enter.	7		
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
	amounts due or received from them)	1		
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	15 Hardington and Alexander	13a	†	†
a	Note. See the instructions for additional information the organization must report on Schedule O	1.00	1	1
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand	1		
14a		14a	T -	Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	1	1
	particular in contradict in contradict in contradict in contradict			1/2015

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

_	Check if Schedule O contains a response or note to any line in this Part VI					<u>LX.</u>
Sec	tion A. Governing Body and Management					
			1		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>	22	4		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	22	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ıp with	any other			
_	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			
_	of officers, directors, or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5		X
6	Did the organization have members or stockholders?			6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	_		•
_	more members of the governing body?	_41	alda	7a		X
D	Are any governance decisions of the organization reserved to (or subject to approval by) members,	Stockn	olders, or			.
	persons other than the governing body?		a fallaccina	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year. The governing body?	sar by ti	ie following.		х	
a	Each committee with authority to act on behalf of the governing body?		-	8a	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-	aabad		8b		<u> </u>
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	acneu	at trie	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Povonu	e Code)	<u> </u>	L	ΙΛ.
	tion 2.1 and a control of tequests information about policies not required by the internal i	ievenu	e code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	103	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	:haptei	rs. affiliates	100		
	and branches to ensure their operations are consistent with the organization's exempt purposes?		o, a,a.oo,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing box	dv befo	ore filing the form?	11a	х	1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	,	g	1.5		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to cor	nflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "					
	ın Schedule O how this was done			12c	x	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approx	/al by ii	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?				
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	with a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anızatıc	on's			
	exempt status with respect to such arrangements?			16b		<u> </u>
	tion C. Disclosure	-				
17	List the states with which a copy of this Form 990 is required to be filed ▶FL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Sec	tion 501(c)(3)s only)	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply X Own website X Another's website X Upon request Other (explain	n ın Sc	hedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict	of interest policy, ar	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's b $\frac{\text{CAROL DORKO}}{1}$, $\frac{\text{CFO}}{1}$ - $\frac{1}{2}$ -	ooks a	nd records >			
	910 EAST LAS OLAS BLVD, NO. 200, FORT LAUDERDALE,	FL	33301			
53200	8 12-16-15			Forn	990	(2015)

Form 990 (2015)	CC

59-2477112

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule	O contains a re	sponse or note to an	y line in this Part VII	 	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee "
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A)	(B)			(()			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		than (one	Reportable	Reportable	Estimated
	hours per	рох	, unle	ss pe	rson	s bot	han	compensation	compensation	amount of
	week		<u> </u>		1		,	from the	from related organizations	other compensation
	(list any hours for	direct				, '		organization	(W-2/1099-MISC)	from the
	related	50	stee			nsate		(W-2/1099-MISC)	(** 27 1000 111100)	organization
	organizations	trust	al fr		yee	эшо				and related
	below	Individual trustee or director	Institutional trustee	5	Key employee	Highest compensated employee	Je.			organizations
	line)	횰	is is	Officer	Xey.	를	Former		<u>-</u>	····-
GARY BITNER	2.00									
BOARD MEMBER		X						0.	0.	0.
CYNTHIA BORDERS-BYRD	2.00									
BOARD MEMBER		X		_				0.	0.	0
DORIA M. CAMARAZA	2.00	ļ	1		1		İ			
BOARD MEMBER		X		L				0.	0.	0
MARGARITA CASTELLON	2.00				1	1				
BOARD MEMBER		X				<u> </u>		0.	0.	0
JAMES DAVIS	2.00	1	i	1	1	l	ļ			
BOARD MEMBER		X	_					0.	0.	0
LOUISE F. DILL	2.00]			1					
BOARD MEMBER		X	<u> </u>	<u> </u>	$oxed{oxed}$			0.	0.	0
JAMES DONNELLY	2.00	1								
BOARD MEMBER		X	$oldsymbol{oldsymbol{oldsymbol{eta}}}$	$oxed{igspace}$		<u> </u>	L.	0.	0.	0
EDWARD HASHEK	2.00		1							
BOARD MEMBER		X		<u> </u>	L	<u> </u>	<u> </u>	0.	0.	0
STEVEN W. HUDSON	2.00	1					1			
BOARD MEMBER		X	<u> </u>	└-		<u> </u>		0.	0.	0
ALICE LUCIA JACKSON	2.00				İ					
BOARD MEMBER		X	_	<u> </u>	<u> </u>	$oxed{oxed}$	<u> </u>	0.	0.	0
JARETT S. LEVAN	2.00	1				1		_		
BOARD MEMBER		X	┡	_	┖	ļ	L	0.	0.	0
ANNE JOYNER	2.00				l	1		_		
BOARD MEMBER		X	<u> </u>	╙	<u> </u>		_	0.	0.	0
MICHAEL G. LANDRY	2.00		ļ		1	•]		}	}
BOARD MEMBER		X	▙	丄	\perp	╙	_	0.	0.	0
ARMANDO LEIGHTON, JR.	2.00		l]	1					
BOARD MEMBER		X	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$	<u> </u>	1_			0.	0.	0
CORI F. MELTZER, ESQ.	2.00						}]
BOARD MEMBER		X	$oldsymbol{\perp}$	<u> </u>	_	1_	_	0,	0.	0
JAMES MONROE	2.00			1			-			
BOARD MEMBER		X	_	┺	 _	\bot		0.	0.	0
JOHN OFFERDAHL	2.00				1					
BOARD MEMBER		X	Ц,			<u></u>	<u> </u>	0.	0.	0

532007 12-16-15

Part VII Section A. Officers, Directors, Trus		oloy	ees,			ghes	st C			$\overline{}$			
(A)	(B)			(C	ි) ition			(D)	(E) Reportable			(F)	
Name and title	Average hours per		not d	neck i	more	than		Reportable			mated ount o		
	week					ıs bot or/trus		compensation from	compensation from related			ther	,
	(list any	į						the	organizations	C		ensatı	on
	hours for	direc				-		organization	(W-2/1099-MISC)	ı	fro	m the	
	related	stee o	ustee			ensal		(W-2/1099-MISC)			-	nızatıc	
	organizations	al trus	ınal tr	,	loyee	E CO				l		relate	
	below line)	ndividual trustee or director	nstitutional trustee	Officer	, emp	Highest compensated employee	ia ei			'	organ	ızatıo	ns
		<u> </u>	置	5	<u>\$</u>	호등	윤			+			
KIM SWEERS	2.00				ļ					,			Λ
BOARD MEMBER		X			-	1	<u> </u>	0.).			0.
WILLIAM SNYDER	2.00				ļ			,		,			^
CHAIR		X	-	X	<u> </u>	┼—	-	0.).			0.
RAMON A. RODRIGUEZ	2.00	l				İ				,			^
VICE CHAIR		X	<u> </u>	X	├	\vdash		0.).			0.
KAREN MITCHELL CURRAN	2.00	l											^
TREASURER		X	├	X	ļ	-	 	0.). _			0.
BACARDI L. JACKSON	2.00	l					Ì		,				^
SECRETARY		X	_	X	1	╁	┡	0.	().			0.
LINDA B. CARTER	40.00	1					1	225 227			4 -		4.0
PRESIDENT/CEO		<u> </u>		X	┺	_	—	206,097.).	17	,14	19.
CAROL DORKO	40.00	_	ŀ				1						_
CHIEF FINANCIAL OFFICER			<u> </u>	X	<u> </u>	ļ	_	118,263.) · [1:	, 02	<u> </u>
SHERI S. BROWN	40.00									_			
VP OF GRANTS AND INITIATIV		<u> </u>	<u> </u>		1_	X	ļ	119,482.		0.	13	3,12	<u> 28</u>
NANCY REIERSON	40.00	-											
VP OF PHILANTHROPIC SERVIC				l	Ш.	X		102,759.		0.		2,20	
1b Sub-total							ightharpoons	546,601.		0.		5,50	
c Total from continuation sheets to Part V	II, Section A						ightharpoons	112,996.		0.		2,80	
d Total (add lines 1b and 1c)							<u> </u>	659,597.		0.	68	3,3	<u>75.</u>
2 Total number of individuals (including but in	not limited to ti	nose	e list	ed a	abov	/e) w	ho r	received more than \$100	0,000 of reportable				_
compensation from the organization	-										- 1	. 1	5
										Γ		Yes	No
3 Did the organization list any former officer			e, k	ey e	mpl	oyee	, or	highest compensated e	mployee on		1	ļ	
line 1a? If "Yes," complete Schedule J for										-	3		X
4 For any individual listed on line 1a, is the s									the organization		ļ		
and related organizations greater than \$15								•		F	4	X	
5 Did any person listed on line 1a receive or								ted organization or indiv	idual for services		l		
rendered to the organization? If "Yes," con	nplete Schedu	le J	for s	such	pe	rson					5		X
Section B. Independent Contractors						-							
1 Complete this table for your five highest complete.										ensat	tion fi	om	
the organization. Report compensation for	the calendar	year	enc	lıng	with	orv	vithi	in the organization's tax	year.				
(A)				_				(B)		Co	(C		_
Name and business	s address	N	ON	E				Description of	services		mper	satio	
								1					
									<u>_</u>				
								-					
												-	
2 Total number of independent contractors	(including but	not	limit	ed t	o th	ose	ııste	d above) who received i	more than				

\$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS
532008
12-18-15

Form 990 (2015)

59-2477112

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) (D) (E) (F) (A) (B) Position Reportable Reportable Estimated Name and title Average (check all that apply) compensation compensation amount of hours other from from related per organizations compensation the week Highest compensated employee (list any Individual trustee or director organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization hours for Institutional trustee and related related Key emptoyee organizations organizations below Officer line) 40.00 THOR R. BARRACLOUGH 0. 112,996. 12,806. VP OF MARKETING & COMMUNIC 112,996 12,806. Total to Part VII, Section A, line 1c

Form 990

Form 990 (2015)
Part VIII S

	-		Check if Schedule O conta	une a reconec a	or note to any line	in this Part VIII			
_			Check if Schedule O conta	ans a response c	in note to any inte	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
t ts	1 :	a I	Federated campaigns	1a	39,996.				
트			Membership dues	1b		İ			
اغ ي		C	Fundraising events	1c					
無る			Related organizations	1d					
E S			Government grants (contributi	ons) 1e					
P S	1		All other contributions, gifts, grant						
돌림			similar amounts not included abov	/e 1f	3,146,464.				
들임		g	Noncash contributions included in lines	1a-1f \$	196,630.				
Contributions, Gifts, Grants and Other Similar Amounts		h '	Total. Add lines 1a-1f		>	3 186 460.			
					Business Code				
9	2	а							
اھ چَ		b							
Program Service Revenue		С							
eve a		d							
<u> </u>		е							
죠		f	All other program service reve	nue .				_	
		g	Total. Add lines 2a-2f		•				
	3		Investment income (including	dıvıdends, ıntere	est, and				
			other similar amounts)		▶	3,108,556.			3,108,556.
	4		Income from investment of ta	x-exempt bond p	roceeds 🕨				
	5		Royalties	·	▶				
				(i) Real	(ii) Personal				
	6	а	Gross rents						
		b	Less: rental expenses						
		С	Rental income or (loss)	_					
			Net rental income or (loss)		.				
	7	а	Gross amount from sales of	(i) Securities	(ıi) Other				
			assets other than inventory	88,311,038,					
		b	Less: cost or other basis						
			and sales expenses	86,470,418.					
			Gain or (loss)	1,840,620,					
			Net gain or (loss) .		.	1,840,620.		_	1,840,620.
e	8	а	Gross income from fundraisin						
le/			including \$	of					
Other Revenu			contributions reported on line						
Ē			Part IV, line 18	. a					
₹			Less direct expenses	, b					
	_		Net income or (loss) from fund	-					
	9	а	Gross income from gaming a						
			Part IV, line 19	a					
			Less: direct expenses	b					
			Net income or (loss) from gan						<u> </u>
	10	а	Gross sales of inventory, less			•			
	Ì		and allowances	a					!
	l		Less: cost of goods sold	b				1	
	-	С	Net income or (loss) from sale		<u> </u>				
	-		Miscellaneous Reveni		Business Code	1		1	
	11		FEES		900099	31,235	31,235.		+
		b					 		
		C	All other revenue				 	 	+
		_		• ••		21 225	 - -	 	
	40		Total. Add lines 11a-11d Total revenue See instructions.			31,235	T .	 	4 040 475
	12		TOTAL LEAGURE SEE HISTOCHORS.	_		8 166 871	31 235	<u>. </u>	4 949 176

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (A) Total expenses Do not include amounts reported on lines 6b, Management and Fundraising Program service 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 9,200,953. 9,200,953 and domestic governments, See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 646,981. 254,782. 260,353. 131,846. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 262,274. 169,482. 148,579. 580,335. 7 Other salaries and wages Pension plan accruals and contributions (include 16,029. 13,325. 8,693. section 401(k) and 403(b) employer contributions) 38,047 38,909. 111,097 46,804. 25,384. Other employee benefits 37,867. 31,479. 20,537. 89,883. 10 Payroll taxes Fees for services (non-employees): Management Legal 41,100. 17,262. 14,385. 9,453. Accounting Lobbying Professional fundraising services. See Part IV, line 17 1,078,352. 1,078,352. investment management fees Other, (If line 11g amount exceeds 10% of line 25, 16,494. column (A) amount, list line 11g expenses on Sch O.) 18,074. 1,580 8,291 3,482 2,902. 1,907. 12 Advertising and promotion 16,881. 7,112. 5,912. 3,857. Office expenses . . . 41,196. 17,302. 14,419. 9,475. Information technology 15 Royalties 294,500 179,645 85,405 29,450. 16 Occupancy 1,849. 779. 648. Travel 422. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials $6,95\overline{2}$ 5,780 16,503 3,771. 19 Conferences, conventions, and meetings Interest 20 Payments to affiliates 21 66,602 40,628 19,314. 6,660. 22 Depreciation, depletion, and amortization 6,405. 12,810. 6,405 23 Insurance 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) **EDUCATION PROGRAMS** 266,845. 266,845 28,436 PRINTING 67.497. 23,639. 15,422. DONOR RELATIONS 50,060. 18,964. 18,819. 12,277. DIRECT FUND EXPENSES 27,879 27,879 119,849 55,172. 42,156 22,521. All other expenses 10,497,152. 1,848,178. 12,795,584. Total functional expenses Add lines 1 through 24e 450,254. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

orm Par	990 (2 t X	Balance Sheet COMMUNITY FOUNDATION OF BROWN	ARD, INC.	<u> و ر</u>	Z4//IIZ Page II
		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>		
		Chook ii Conodulo C Containe 2 100pcn=2 11100	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	862,851.	1	444,661.
Ì	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	1,494,000	3_	125,191
	4	Accounts receivable, net	249,713.	4	117,600
	5	Loans and other receivables from current and former officers, directors,			
	_	trustees, key employees, and highest compensated employees Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under	er		·
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributi			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ņ		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
H22013	7	Notes and loans receivable, net		7	
Ĉ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	333,773	9	229,145
		Land, buildings, and equipment cost or other			
	,,,,	basis Complete Part VI of Schedule D 10a 648, 25	9.	1	
	ь	Less: accumulated depreciation 10b 279,33		10c	368,926
	11	Investments - publicly traded securities	119,065,661		117,123,911
	12	Investments - other securities. See Part IV, line 11	48,425,748	. 12	38,004,051
	13	Investments - program-related. See Part IV, line 11	500,000	. 13	500,000
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	635,533	. 15	585,321
	16	Total assets. Add lines 1 through 15 (must equal line 34)	171,966,018	. 16	157,498,806
	17	Accounts payable and accrued expenses	467,676	. 17	244,507
	18	Grants payable	1,856,650	. 18	2,335,832
	19	Deferred revenue	372,227	. 19	362,008
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
g	22	Loans and other payables to current and former officers, directors, trustees,			
≝		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17:24) Complete Part X of			
		Schedule D	17,387,988		14,953,267
	26	Total liabilities. Add lines 17 through 25	20,084,541	<u>. 26</u>	17,895,614
		Organizations that follow SFAS 117 (ASC 958), check here	d		
es		complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets .	149,363,048		138,616,223
ga E	28	Temporarily restricted net assets	2,518,429		986,969
힏	29	Permanently restricted net assets	-,	29	_
Ē		Organizations that do not follow SFAS 117 (ASC 958), check here	J	ĺ	
ģ		and complete lines 30 through 34.	'		
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	<u> </u>
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	4 7 4	32	
Z	33	Total net assets or fund balances	151,881,477	. 33	139,603,192
	1		1 171 066 010		. 167 400 00 <i>6</i>

157,498,806. Form **990** (2015)

Total liabilities and net assets/fund balances

	990 (2015) COMMUNITY FOUNDATION OF BROWARD, INC.	59-	24771	12	Pag	_{le} 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	_ 1			6,8	
2	Total expenses (must equal Part IX, column (A), line 25)	2	12	79	5,5	84.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4	, 62	B,7	13.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	151	, 88	1,4	77.
5	Net unrealized gains (losses) on investments	5	-8	91	0,3	46.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1	, 26	0,7	74.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				-	
	column (B))	10	139	,60	3,1	92.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		_			\mathbf{x}
			_		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		l	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both.		}	ŀ		
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis		ļ			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	. [
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Auc	int			
	Act and OMB Circular A-133?		. [3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired aud	lit			
	or guides explain why in Schedule O and describe any stone taken to undergo such guides			O.L.		1

532012 12-18-15

Form **990** (2015)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Open to Public

Inspection

Name of the organization

Employer identification number

		COMM	NITY FOUN	DATION OF BRO	OWARD	, INC.		59-247	7112
Pa	rt I	Reason for Public C					e instructions		
he	organı	zation is not a private founda	ation because it is: (F	or lines 1 through 11, cl	neck only	one box.)			
1		A church, convention of chu					(A)(i).		
2		A school described in section	on 170(b)(1)(A)(ii). (A	Attach Schedule E (Form	990 or 99	0-EZ))			
3		A hospital or a cooperative I).		
4		A medical research organiza	,				•	Enter the hospit	tal's name,
•		city, and state:		,				·	
5		An organization operated fo	r the benefit of a col	lege or university owned	or operat	ed by a go	vernmental unit de	escribed in	
•		section 170(b)(1)(A)(iv). (C				, 3-			
6		A federal, state, or local gov		antal unit described in e	oction 17	O/6\/4\/A\/	νN		
	\mathbf{x}	An organization that normal	_				•	neral public de	scribed in
′	لما			ntial part of its support if	om a gove	- iiiiii eiii ai	unit of nom the ge	nierai public des	scribed in
_	$\overline{}$	section 170(b)(1)(A)(vi). (Co		AVAV. D. (Commiste Dort	11.5				
8	H	A community trust describe							
9	لـــا	An organization that normal	•	•	•			_	
		activities related to its exem	•	•	• •				
		income and unrelated busin		(less section 511 tax) fro	om busine:	sses acqui	red by the organiz	ation after June	30, 1975.
		See section 509(a)(2). (Con							
10	\vdash	An organization organized a		•	-				
11		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	he functio	ns of, or to carry o	ut the purposes	s of one or
		more publicly supported org	ganizations describe	ed in section 509(a)(1) or	section !	509(a)(2). S	See section 509(a)(3). Check the	box in
	_	lines 11a through 11d that o	describes the type o	f supporting organization	n and com	iplete lines	11e, 11f, and 11g	J.	
а	٠ ــــ		nızatıon operated, s	upervised, or controlled	by its sup	ported org	anızatıon(s), typica	ally by giving	
		the supported organization	n(s) the power to re	gularly appoint or elect a	majority o	of the direc	ctors or trustees of	f the supporting	}
		organization You must c	omplete Part IV, Se	ections A and B.					
b	, L	☐ Type II. A supporting orga	anızatıon supervised	or controlled in connec	tion with it	s supporte	ed organization(s),	by having	
		control or management of	f the supporting orga	anızatıon vested ın the s	ame perso	ns that co	ntrol or manage th	ne supported	
		organization(s) You mus	t complete Part IV,	Sections A and C.					
c	; [Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functionally int	egrated with,	
		its supported organization	n(s) (see instructions	s). You must complete F	Part IV, Se	ctions A,	D, and E.		
c	ı 🗆	Type III non-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	th its supported	organization(s)	
		that is not functionally int	egrated. The organiz	zation generally must sat	isfy a dist	ribution red	quirement and an	attentiveness	
		requirement (see instructi	_		-				
•	, [Check this box if the orga	•	•				vpe III	
		functionally integrated, or					,, , ,, , ,	•	
•	Fnte	er the number of supported o	• •)9					
Ì		vide the following information	•	ed organization(s).		•	•	<u> </u>	
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of mon	etary (vi)	Amount of
		organization		(described on lines 1-9	listed i	n your document?	support (see	other:	support (see
				above (see instructions))	Yes	No	instructions)	ıns ¹	tructions)
		 							
]				
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Tot	al		I	I	1	1	i	1	

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 59-2477112 Page 2

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support	-					
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7,482,491.	48,637,190.	7,263,874.	8,407,814.	3,186,460.	74,977,829.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
•	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	7,482,491.	48,637,190.	7,263,874.	8,407,814.	3,186,460.	74,977,829.
	The portion of total contributions	.,					·
Ŭ	by each person (other than a				İ		
	governmental unit or publicly			ì	I	İ	
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11.						
	column (f)]		41,525,542.
6	Public support. Subtract line 5 from line 4						33,452,287,
	ction B. Total Support		<u></u>	•		•	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 4	7,482,491.	48,637,190.	7,263,874.	8,407,814,	3 186 460.	74.977.829.
8	Gross income from interest.			1	, , , , , , ,		
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,642,500.	2,728,313.	2,239,296.	2,483,872.	2,801,049.	11,895,030.
9	Net income from unrelated business	1,012,000.					
J	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI)	1,129,493.	1,957,791,	1 658 488	1,774,820.	1.736.196.	8,256,788.
11	Total support. Add lines 7 through 10	1,127,423,	1,00,,,01	1,030,100,	1,771,020,	2,750,250	95,129,647.
12		etc (see instructi	ions)			12	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	First five years. If the Form 990 is fo			d. fourth, or fifth ta	x vear as a section		
10	organization, check this box and sto		o mot, 0000ma, tim	o,			▶□
Se	ction C. Computation of Pub	lic Support Pe	rcentage				<u>, —</u> .
	Public support percentage for 2015			column (f))		14	35.16 %
	Public support percentage from 2014				•	15	39.12 %
	a 33 1/3% support test - 2015. If the			n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies					,	▶ X
1	o 33 1/3% support test - 2014. If the				line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qua					, ,	
17:	a 10% -facts-and-circumstances tes	•			13, 16a, or 16b,	and line 14 is 10%	or more.
•••	and if the organization meets the "fa						
	meets the "facts-and-circumstances"						▶□
1	b 10% -facts-and-circumstances tes					17a, and line 15 is	10% or
	more, and if the organization meets t	3	•				
	organization meets the "facts-and-cil						▶□
10	Private foundation. If the organizate		-	-		-	ıs 🚡
10	THE TOURS AND THE THE OTHER PROPERTY.	and mot officer b	. 23/1 01/11/0 101 10		• • • • • • • • • • • • • • • • • • • •		000 E7\ 0016

532022 09-23-15

Schedule A (Form 990 or 990-EZ) 2015 COMMUNITY FOUNDATION OF BROWARD, INC.

59-2477112 Page 3

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

	ualify under the tests listed be	low, please comp	lete Part II.)				
Section A.	Public Support						
alendar year ((or fiscal year beginning in) 🖊	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	ants, contributions, and ship fees received. (Do not			·			
	any "unusual grants.")						
2 Gross re merchan formed, any activ	ceipts from admissions, dise sold or services per- or facilities furnished in vity that is related to the tion's tax-exempt purpose						
are not a	ceipts from activities that in unrelated trade or busder section 513						
ızatıon's	nues levied for the organ- benefit and either paid to						
furnishe	e of services or facilities d by a governmental unit to nization without charge						
6 Total. A	dd lines 1 through 5 .						
7a Amounts	s included on lines 1, 2, and	,					:
3 receive	ed from disqualified persons						
from other exceed the	icluded on lines 2 and 3 received than disqualified persons that greater of \$5,000 or 1% of the line 13 for the year						
c Add line	s 7a and 7b						
	support. (Subtract line 7c from line 6) Total Support			_			
		(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	(or fiscal year beginning in) ▶ s from line 6	(a) 2011	(b) 2012	(6) 2013	(u) 2014	(e) 2010	(i) rotal
10a Gross in dividend securities	ds, payments received on se loans, rents, royalties ome from similar sources						
b Unrelated	d business taxable income						
,	tion 511 taxes) from businesses after June 30, 1975						
11 Net inco activitie whether	es 10a and 10b come from unrelated business is not included in line 10b, ir or not the business is it carried on						
12 Other in or loss t	rcome. Do not include gain from the sale of capital Explain in Part VI.)						
13 Total su	pport. (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>		L	1	<u> </u>
14 First fiv	re years. If the Form 990 is for	the organization'	's first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organi	zation,
	his box and stop here						
	. Computation of Publ					· 1 ·1	
	support percentage for 2015 (I		•	column (f))	•	15	
	support percentage from 2014				· · · · · · · · · · · · · · · · · · ·	16	%
	. Computation of Inves					TT	
	nent income percentage for 20	•	-	ine 13, column (f))		17	<u>%</u>
	nent income percentage from				. 45	18	<u>%</u>
	6 support tests - 2015. If the						1/ is not
	an 33 1/3%, check this box a 6 support tests - 2014. If the						▶
line 18	is not more than 33 1/3%, che	ck this box and s	stop here. The org	anızatıon qualifies	as a publicly sup	ported organization	▶ 🔲
20 Private	foundation. If the organization	in did not check a	a box on line 14, 19	9a, or 19b, check t	this box and see in	structions	ightharpoonup

16

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A D, and F. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

<u> </u>	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)			
<u> </u>	tion A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		100	
•	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		i
2	Did the organization have any supported organization that does not have an IRS determination of status			
-	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			İ
	organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
Ju	(b) and (c) below.	За	<u> </u>	L
h	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
-	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			1
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
-	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	Зс		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b	<u> </u>	
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			1
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			ŀ
	purposes.	4c		<u> </u>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a		—
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			-
	designated in the organization's organizing document?	<u>5b</u>	 	ــــ
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	 	↓
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	1		
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also			1
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		1	
	Part VI.	6	1	<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			1
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with			
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	_		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	+	+
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			1
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	<u>9a</u>		+
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	+	+
C				1
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	-	+
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	40		
	supporting organizations)? If "Yes," answer 10b below.	10a	+-	+
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	400		
	determine whether the organization had excess business holdings)	10b	_1_	1

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A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If *No,* describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If *No,* describe in Part VI how the supported organization or supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the supported organization of the trustees of the supported organization of the trustees of the organization of the organizations. 1 Were a majority of the organization's directors or frustees during the tax year also a majority of the directors or frustees of each of the organization's directors or frustees during the tax year also a majority of the directors or frustees of each of the organization's directors or frustees during the tax year also a majority of the directors or frustees of each of the organization's directors or frustees of organization(s)? 1 Were a majority of the organization's directors or frustees during the tax year also a majority of the directors o	Yes	No
A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the supported organization of the than the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the supported organization of the organization of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s) If No, describe near the supported organization of the supported organization or supported organization or supported organization or supported organi		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) above? lib. c A 35% controlled entity of a person described in (a) a for (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11to Section B. Type I Supporting Organizations 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 1 Did the organization of the organization or restrictions, if any, applied to such powers during the tax year 2 Did the organization of the supporting organization or trustees were allocated among the supported organization(s) that operated, supervised, or controlled the supporting organizations Part VI how providing such benefit camed out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's directors or trustees of each of the organization(s). 2 Section C. Type II Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the p	Yes	No
below, the governing body of a supported organization? 11a Afamily member of a person described in (a) above? 12 A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 11b 11c 12c 12c 13c 14c 15c 15c 15c 15c 15c 15c 15	Yes	No
b A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above?!f "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization such benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization. Part VI how providing such benefit camed out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization's organization's inferes, directors, or trustees either (i) appointed or elected by the supported organization's organization's organization is effect on the date of notification, to the extent not previously provided?	Yes	No
C A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. 1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year. If "No," describe in Part VI how the supported organization's effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, it any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization of the supported organization of the providing such benefit cared out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or managed the supported organization was vested in the same persons that controlled or managed the supported organization provide to each of its supported organizations. 1 Did the organization provide to each of its supported organizations, by the last day of the fifth morth of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year. (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's tax year. (i) a written notice describing the type and amount of support provided during the prior tax year. (i) a copy of the Form 990 that was most r	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization is directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization granization was vested in the same persons that controlled or managed the supported organization for granization was vested in the same persons that controlled or managed the supported organization provide to each of its supported organizations, by the last day of the fifth month of the organization's styper. (i) a written notice describing the type and amount of support provided during the prior tax year. (i) a copy of the Form 990 that was most recently field as of the date of notification, and (iii) copies of the organization's governing obty of a supported organization, and (iii) copies of the organization's governing obty of a supported organization in an analysis of the organization is not	Yes	No
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those supported organizations and explain how these activities directly furthered their exempt purposes,		
how the organization was responsive to those supported organizations, and how the organization determined		
that these activities constituted substantially all of its activities.		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		
of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		
reasons for the organization's position that its supported organization(s) would have engaged in these		
activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		
trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations		dule A (Form 990 or 990-EZ) 2015 COMMUNITY FOUNDATION OF			59-2477112 Page 6
cother Type III non-functionally integrated supporting organizations must complete. Section A - Adjusted Net Income (A) Pnor Year (B) Current Year (optional) 1 Net short-term capital gain 2 Recovenes of pnor-year distributions 2 2 3 Other gross income (see instructions) 3 3 4 Add lines 1 through 3 5 Depreciation and depletion 6 Portion of operating expenses paid or incurred for production or collection of gross income (see instructions) 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or management, conservation, or management, conservation, or property held for production of income (see instructions) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 Section B - Minimum Asset Amount (A) Pnor Year (B) Current Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions) for short tax year or assets held for part of year) a Average monthly value of securities b Average monthly cash balances 1 b Average monthly cash balances 1 c Fair market value of other non-exempt-use assets 1 c d Total (add lines 1a, 1b, and 1c) 1 d d Total (add lines 1a, 1b, and 1c) 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1 d 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Acquisition indebtedness applicable to non-exempt-use assets 7 Recovenes of prior-year distributions 7 Recovenes of prior-year distributions 7 Recovenes of prior-year distributions 7 Recovenes of prior-year distributions 1 Adjusted net income for pror year (from Section A, line 8, Column A) 1 Adjusted net income for pror year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from	Par	1,700			
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Instructions for short tax year or assets held for part of year) a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A)	Sect			(A) Prior Year	1 ' '
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c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d 3 3 4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions). 4 Cash deemed held for exempt use instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 Niminum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Id 4 Cash deemed held for exempt use assets 2 2 3 Subtract line 2 4 5 Id 5 Current Year 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a	Average monthly value of securities	1a		
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6 Multiply line 5 by .035 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3			4		
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7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Section C - Distributable Amount Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3	6		6		
8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year 1 Adjusted net income for prior year (from Section A, line 8, Column A) 2 Enter 85% of line 1 2 Minimum asset amount for prior year (from Section B, line 8, Column A) 3 Minimum asset amount for prior year (from Section B, line 8, Column A)	7		7		
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2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3	Sect				Current Year
2 Enter 85% of line 1 2 3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3	1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3	2				
	3		3		
	4	Enter greater of line 2 or line 3	4		<u> </u>
5 Income tax imposed in prior year 5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			1.3		
emergency temporary reduction (see instructions)	-		6		
7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see	7			ated Type III supporting or	ganization (see

Schedule A (Form 990 or 990-EZ) 2015

instructions).

Schee Par	t V Type III Non-Functionally Integrated 509	NDATION OF BROW		9-2477112 Page 7
		(a)(o) oupporting orgo	inizations (continues)	Current Year
	on D - Distributions	mpt numocos		Ourrent Teal
	Amounts paid to supported organizations to accomplish exer Amounts paid to perform activity that directly furthers exemp			
2		or barboses or supported		
	organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purpose	on of supported organization	-	
<u>3</u> 4		es of supported organization	·	
	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions		<u> </u>	
<u>6</u>			····	
7	Total annual distributions. Add lines 1 through 6.	no ergonization in reaponely		
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		· ·-·	
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	(a)	/::\	/:::\
		(i) Excess Distributions	(ii) Underdistributions	(iii) Distributable
Secti	on E - Distribution Allocations (see instructions)	EXCESS DISTIBUTIONS	Pre-2015	Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
	Underdistributions, if any, for years prior to 2015			·
~	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a	Excess distributions carryover, if any, to 2013.			
<u>a</u>				
<u>_</u>				
	From 2013	<u> </u>		
	From 2014			<u> </u>
	Total of lines 3a through e			
	Applied to underdistributions of prior years	-	· · · · · · · · · · · · · · · · · · ·	
	Applied to 2015 distributable amount			
	Carryover from 2010 not applied (see instructions)			· ··· · · · · · · · · · · · · · · · ·
 i	Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D.		· · · · · · · · · · · · · · · · · · ·	
•	line 7. \$			
a	Applied to underdistributions of prior years		<u></u>	
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
-	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h	 		
_	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3	-		
•	and 4c.			
8	Breakdown of line 7:	 		
a				
<u>u</u>				
	Excess from 2013			
	Excess from 2014	<u> </u>		
	Excess from 2015	 		

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
MANAGEMENT FEES CHARGED TO INDIVIDUAL FUNDS
2011 AMOUNT: \$ 1,129,493.
2012 AMOUNT: \$ 1,957,791.
2013 AMOUNT: \$ 1,658,488.
2014 AMOUNT: \$ 1,774,820.
2015 AMOUNT: \$ 1,736,196.

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

• :	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
	COMMUNI	TY FOUNDATION OF	BROWARD, I	NC.	59-2477112
Pa	art I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities		
		. <u> </u>			
		ganization is exempt und			·
	Enter the amount of any excise tax	• •			
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 4955	5 ▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720) for this year?		Yes No
4 a	a Was a correction made?				. L Yes L No
_	If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c)	, except section 501(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt fund	ction activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	ection 527	
	exempt function activities			. • \$	<u> </u>
3	Total exempt function expenditures	s Add lines 1 and 2. Enter here	and on Form 1120-POL	- ,	
	line 17b	•		. ▶\$	
4	Did the filing organization file Form	1120-POL for this year?			Yes No
5	Enter the names, addresses and er made payments. For each organiza contributions received that were prolitical action committee (PAC). If	ation listed, enter the amount pa romptly and directly delivered to	ud from the filing organical asseparate political org	ization's funds Also enter th ganization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2015

Schedule C (Fo	orm 990 or 990-EZ) 2015 C	OMMU	VITY FO	UNDATION OF	BROWARD.	NC. 59-2	477112 Page 2
Part II-A	Complete if the orga section 501(h)).	nizatio	n is exem	pt under section	501(c)(3) and file	ed Form 5768 (e	lection under
Check >		n belond	ns to an affilia	ated group (and list in I	Part IV each affiliated	proup member's nam	e. address. EIN.
CHOOK P	expenses, and share				art i vaait allinataa	group mombor o num	o, araiooo, 2,
3 Check ▶				d "limited control" prov	usions apply		
,	Limits	on Lobb	ying Expend			(a) Filing organization's totals	(b) Affiliated group totals
1a Total Joh	bying expenditures to influe	nce pub	lic opinion (a	rass roots lobbying)	·	0.	
	bying expenditures to influe	•			*	0.	
	bying expenditures (add line			(directions)ing)	ļ	0.	
	empt purpose expenditures		- ·-,		Ţ		
	mpt purpose expenditures		s 1c and 1d)	•	ļ	0.	
	nontaxable amount Enter				columns.	0.	
	ount on line 1e, column (a) or			ying nontaxable amo		<u> </u>	
	\$500,000			ne amount on line 1e.			
Over \$50	0,000 but not over \$1,000,	000	\$100,000) plus 15% of the exce	ss over \$500,000.		
Over \$1,	000,000 but not over \$1,50	0,000	\$175,000) plus 10% of the exce	ess over \$1,000,000.		
Over \$1,	500,000 but not over \$17,0	00,000	\$225,000) plus 5% of the exces	s over \$1,500,000.		ł
Over \$17	7,000,000		\$1,000,0	00			
g Grassro	ots nontaxable amount (ente	er 25% o	f line 1f)			0.	
h Subtract	line 1g from line 1a. If zero	or less, e	enter -0-		ļ	*	
i Subtract	line 1f from line 1c. If zero	or less, e	nter -0-		Į	···· <u>·</u> .	
j If there is	s an amount other than zero	on eithe	er line 1h or li	ne 11, did the organiza	tion file Form 4720	,	
reporting	section 4911 tax for this ye	ear?		<u> </u>			Yes No
	(Some organizations that		a section 50	raging Period Under s of(h) election do not hate te instructions for line	nave to complete all	of the five columns b	elow.
		Lobi	oying Expen	ditures During 4-Year	Averaging Period		_
	alendar year I year beginning in)	(a)	2012	(ь) 2013	(c) 2014	(d) 2015	(e) Total
2a Lobbyin	g nontaxable amount			667,157.	710,671.		1,377,828
•	g ceiling amount						
(150% c	f line 2a, column(e))			1			2,066,742
c Total lob	bying expenditures			50,195.	80,172.		130,367
	ots nontaxable amount	_		166,789.	177,668.		344,457
	ots ceiling amount of line 2d, column (e))						516,686

Schedule C (Form 990 or 990-EZ) 2015

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2015 COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

for each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? 1 Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bit "Yes," enter the amount of any tax incurred by organization managers under section 4912 ci If "Yes," enter the amount of any tax incurred by organization managers under section 4912 di If the filing organization curred a section 4912 tax, did if the Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes." 1 Dues, assessments and similar amounts from members Section 150(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes." 1 Dues, assessments and similar amounts from members Section 150(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes." 1 Dues, assessments and similar amounts from members Section 150(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3,	(a)		(b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization in curred as section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 1 Dues, assessments and similar amounts from members 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year 2 Description of the excess does the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount feborying and political expenditures (see instructions) 5 Taxable amount of lobbying and political expenditures	Yes	N	0	Amo	unt
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2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues d If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Taxable amount of lobbying and political expenditures (see instructions)					
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5 Taxable amount of lobbying and political expenditures (see instructions) 5	cal		Par 1 2a 2b 2c		ne 3, i
	cal		Pari 1 2a 2b 2c 3		ne 3, i
	cal		1 2a 2b 2c 3		ne 3, i
	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
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	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
	cess	R (b)	1 2a 2b 2c 3	t III-A, lir	ne 3, i
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Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exdoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? 5 Taxable amount of lobbying and political expenditures (see instructions)		Yes	Yes N	Yes No On 501(c)(5), or se	on 501(c)(5), or section

Schedule C (Form 990 or 990-EZ) 2015

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Name	e of the organization	ON OF BROWARD, INC.	Employer identification number 59-2477112
Par			
- ai			Accounts: Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
	Total number at and of year	100	
1	Total number at end of year	863,025.	
	Aggregate value of contributions to (during year)	1,541,746.	
	Aggregate value of grants from (during year)	19,597,479.	
	Aggregate value at end of year		I fundo
5	Did the organization inform all donors and donor advisors in	-	X Yes No
_	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of impermissible private benefit?	of dollor advisor, or for any other purpose co	X Yes No
Par		ranization answered "Yes" on Form 990 Pai	
1	Purpose(s) of conservation easements held by the organization		111, 1110 7.
•	Preservation of land for public use (e.g., recreation or e	·	cally important land area
	Protection of natural habitat	Preservation of a certifie	• •
	Preservation of open space	i reservation of a certific	a materie audeture
2	Complete lines 2a through 2d if the organization held a quali	find concentration contribution in the form of	a consequation easement on the last
2	day of the tax year.	ned conservation contribution in the form of	Held at the End of the Tax Year
-	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
	Number of conservation easements included in (c) acquired	· · ·	
u	listed in the National Register	arter of 17700, and not on a historio structure	2d
3	Number of conservation easements modified, transferred, re	Neased extinguished or terminated by the o	
J	year	incased, extinguioned, or terminated by the o	nganization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
Ū	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
•	>	,	
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year
	▶ \$		g ,
8	Does each conservation easement reported on line 2(d) abor	ve satisfy the requirements of section 170(h))(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		3
Pai	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form	n 990, Part IV, line 8.	
 1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items.		_
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial c	
	the following amounts required to be reported under SFAS 1		
a	Revenue included on Form 990, Part VIII, line 1	· -	▶ \$
b	Assets included in Form 990, Part X		> \$
	For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Schedule D (Form 990) 2015

		TY FOUNDAT				<u>59-24</u>			ge 2
Par									
3	Using the organization's acquisition, accession	on, and other records	s, check any of the f	following that are	e a significa	nt use of its o	collection	ıtems	i
	(check all that apply).								
а	Public exhibition	d	Loan or exch	nange programs					
þ	Scholarly research	е	Other						
C	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	ne organization's	exempt pu	ırpose ın Part	XIII.		
5	During the year, did the organization solicit o	r receive donations o	of art, historical treas	sures, or other s	ımılar asset	s	_		1
	to be sold to raise funds rather than to be ma						Yes_		No
Par	t IV		te if the organizatioi	n answered "Yes	s" on Form	990, Part IV, 1	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.							
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other assets	s not includ	ed	_		
	on Form 990, Part X?		•				Yes		No
b	If "Yes," explain the arrangement \ensuremath{If} Part XIII	and complete the fol	lowing table:		_			_	
							Amount	<u> </u>	
С	Beginning balance			•	1	<u>c </u>			
d	Additions during the year				. 1	d			
е	Distributions during the year	•	•		1	е		_	
f	Ending balance	·			1	f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for escrow or cu	ıstodıal account	lability?	L_	Yes	<u></u>	No
	If "Yes," explain the arrangement in Part XIII								
Par	t V Endowment Funds. Complete		swered "Yes" on Fo	rm 990, Part IV,	line 10.				
		(a) Current year	(b) Prior year	(c) Two years ba	ack (d) Thi	ee years back	(e) Four	years	back_
1a	Beginning of year balance	154,183,525.	155,585,797.	137,604,7	52. 8	<u>3,395,009.</u>	84_	413	741.
b	Contributions	1,508,594.	5,796,618.	5,452,5	92. 4	6,385,654,	5	360,	<u>797.</u>
C	Net investment earnings, gains, and losses	-4,265,088.	1,976,974.	20,758,8	32. 1	3,914,923.	1	928,	<u>576.</u>
þ	Grants or scholarships	7,696,561.	6,579,347.	5,973.9	59.	3, <u>616,192.</u>	2	956.	<u>973.</u>
e	Other expenditures for facilities						l		
	and programs .	1,009,552.	895,078.	674.8	46.	491,446.		298,	<u>306.</u>
f	Administrative expenses .	1,659,826.	1,701,439.	1,581,5	74.	1,983,196.	1	.195,	67 4 .
g	End of year balance	141,061,092.	154,183,525.	155,585,7	97. 13	7,604,752.	83	395,	009.
2	Provide the estimated percentage of the cur	rent year end balanc	e (lıne 1g, column (a	ı)) held as:					
a	Board designated or quasi-endowment	·	_%						
b	Permanent endowment ► 100.00	%							
c	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%							
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered	for the org	anization	r		
	by:						,	Yes	No
	(i) unrelated organizations	• •					3a(i)		<u>X</u>
	(ii) related organizations	•				•	3a(ii)		<u>X</u>
Ь	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Schedule R?				3b		
4_	Describe in Part XIII the intended uses of the		wment funds.						
Par	rt VI Land, Buildings, and Equipn								
	Complete if the organization answere	d "Yes" on Form 990), Part IV, line 11a. S	See Form 990, P	art X, line 1	0			
	Description of property	(a) Cost or o	1 ' '		(c) Accumu	1	(d) Boo	k value	Э
		basis (investr	nent) basis	(other)	deprecia	tion			
1a	Land .								
b	Buildings								
C	Leasehold improvements			1,357.		,296.		<u>8,0</u>	
đ	Equipment .			1,819.		,912.		2,9	
	Other			5,083.	<u> </u>	,125.		<u>7,9</u>	
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X column (B) line 3	(Oc.)		▶	36	8.9	26.

Schedule D (Form 990) 2015

	OUNDATION OF	BROWARD, INC.	59-2477112 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) INVESTMENT FUNDS	27,126,349.	END-OF-YEAR	MARKET VALUE
(B) PRIVATE EQUITY FUNDS	9,182,506.	END-OF-YEAR	MARKET VALUE
(C) COMMODITIES INVESTMENT		·	
_ (D) TRUSTS	149,908.	END-OF-YEAR	MARKET VALUE
E) REAL ESTATE INVESTMENTS			
(F) TRUSTS	1,545,288.	END-OF-YEAR	MARKET VALUE
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	38,004,051.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)	<u> </u>	<u> </u>	
(5)		<u></u>	
(6)		_	
			
(8)			
(9)			
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)	<u></u>		
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X	
	Description		(b) Book value
(2)			
(3)			
			
(5)			
	_		
(7)			
(8)			
(9)		· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 15)	· · · · · · · · · · · · · · · · · · ·	

Part X Other Liabilities.

1.	(a) Description of liability	 (b) E	ook va	lue
(1)	Federal income taxes			
(2)	AGENCY TRANSACTIONS PAYABLE	14,	953,	267.
(3)				
(4)				
(5)				
(6)_				
(7)_		 		
(8)				
(9)				
Total	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	14.	953	267.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2015

										_
		(Form 990) 2015 COI	MUNITY F	OUNDATION	OF BRO	WARI	O, INC.		2477112	Page 4
Par	t XI	Reconciliation of Rev	renue per Auc	lited Financial	Statemer	nts Wi	th Revenue per R	eturn	·	
		Complete if the organization	answered "Yes"	on Form 990, Part	IV, line 12a.					
1	Total ı	evenue, gains, and other sup	port per audited f	inancial statement	s .			1	-2,280,	<u>693.</u>
2	Amou	nts included on line 1 but not	on Form 990, Pa	rt VIII, line 12						
а	Net ur	irealized gains (losses) on inv	estments			2a	<u>-8,910,346.</u>	[[
b	Donat	ed services and use of faciliti	es			2b	<u>3,673.</u>]		
С	Recov	enes of prior year grants				2c]		
d	Other	(Describe in Part XIII)				2d]		
е	Add I	nes 2a through 2d				_		2e	-8,906,	673.
3	Subtra	act line 2e from line 1						3	6,625	980.
4	Amou	nts included on Form 990, Pa	art VIII, line 12, bu	t not on line 1:						
а	Invest	ment expenses not included	on Form 990, Par	t VIII, line 7b		4a	964,943.			
		(Describe in Part XIII.)				4b	575,948.]		
C	Add lı	nes 4a and 4b						4c	1,540	891.
5	Total	evenue. Add lines 3 and 4c.	(This must equal F	Form 990, Part I, Iır	ne 12.)			5	8,166	
Par	t XII	Reconciliation of Exp	enses per Au	dited Financia	al Stateme	ents V	lith Expenses per	Retu		
		Complete if the organization	=							
1	Total	expenses and losses per aud			<u>', </u>	_		1	9,951	236.
2		nts included on line 1 but not					•			<u> </u>
a		ed services and use of facilit				2a	3,673.			
b		ear adjustments	.00	-	- •	2b		1		
c		losses	• •			2c		1 1		
d		(Describe in Part XIII.)		• •		2d		1		
		nes 2a through 2d	•			<u>zu</u>		2e	3	,673.
е 3		act line 2e from line 1	•				•	3	9,947	563
4		nts included on Form 990, Pa	art IV line 25 but	not on line 1:					J, J=1	, 303.
		ment expenses not included				امدا	964,943			
a		(Describe in Part XIII.)	on Form 990, Par	t viii, iirie 76		4a_	1,883,078			
b		nes 4a and 4b		-		40	1,005,070	7 1	2,848	021
_		nes 4a and 4b expenses. Add lines 3 and 4d	This must save	 J. Earm 000 Dart I	lmo 10)			4c	12,795	
Par		Supplemental Inform		i Foiiii 990, Pait I,	iiie io)			5	14,193	, 304.
				O. Dart III. base 4		N. I.a.a.	1b d Obs Dd V Israe	4 0-4	V less 0. Double	·
		descriptions required for Par						4, Pan	X, line 2, Part	XI,
ıınes	20 and	I 4b; and Part XII, lines 2d an	a 4b. Also comple	ete this part to prov	vide any addi	tionai in	itormation.			
										
										
D 3 -		·	m							
PAL	CT X	I, LINE 4B - O	THER ADJU	STMENTS:						
- ~-										0.40
<u>AGI</u>	SNCY	TRANSACTIONS							5/5	<u>,948.</u>
										
<u>PAI</u>	RT X	III, LINE 4B -	OTHER ADJ	USTMENTS:			 -— -			
<u>AGI</u>	<u>ENC?</u>	TRANSACTIONS							1,883	<u>,078.</u>
		· · · · · · · · · · · · · · · · · · ·								
			·							

SCHEDULE 1 (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

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

Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990. ► Attach to Form 990.

Employer identification number

Inspection

59-2477112

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

59-2477112	ie selection	<u></u>	90 Part IV line 21 for any		ion of (h) Purpose of grant istance or assistance	ANNUAL DISTRIBUTION				364.	Schedule I (Form 990) (2015)
	sistance, and th		Vee" on Form 9		(g) Description of non-cash assistance						
i	for the grants or as		" peremone a citoria	mization answered	(f) Method of valuation (book, EMV, appraisal, other)						
	grantees' eligibility	00000	o States.	omplete ir the orga	(e) Amount of non-cash assistance	0					
RD, INC.	or assistance, the	20 st. ml 1 0 ml 2 ml 2 ml 2 ml 2 ml 2 ml 2 ml 2 ml	runds in the United	: Governments. C	(d) Amount of cash grant	8,595,456,				listed in the line 1 table	
ON OF BROWARD,	amount of the grants		oring the use of grant	ations and Domestic	(c) IRC section if applicable					ganizations listed in th	table ons for Form 990.
FOUNDATIC	d Assistance substantiate the	ance?	sedures for monito	omestic Organiz	(b) EIN					nd government org	see the Instructi
COMMUNITY FOUNDATION	Ceneral Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantses' eligibility for the grants or assistance, and the selection	criteria used to award the grants or assistance?	꺙	_	recipient that received more than \$5,000 Part II can be duplicated II addition a space is recognited to the control of the con	איווושאטט נומאטינישיג ממס				 Enter total number of section 501(c)(3) and government organizations	Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.
	Part I	crit	2 Des	Part II	1 (a)	E E E	444			2	E HA F

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) GRANTEES SUBMIT MID-YEAR Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. FOUNDATION HAS A GOOD WORKING RELATIONSHIP WITH ITS GRANTEES. IT IS THE A CONTRACT IS CREATED THAT OUTLINES THE \mathtt{THE} GOAL OF THE COMMUNITY FOUNDATION TO HELP GRANTEES REACH THEIR STATED AND YEAR-END REPORTS THAT INCLUDE A FINANCIAL ACCOUNTING REPORT. (d) Amount of non-cash assistance (c) Amount of cash grant PROJECT SPECIFICS AS DESCRIBED IN THE PROPOSAL. (b) Number of recipients OUTCOMES TO ADDRESS COMMUNITY CHANGE ONCE A GRANT HAS BEEN AWARDED, (a) Type of grant or assistance LINE PART I, Part IV Part III

Page 2

59-2477112

COMMUNITY FOUNDATION OF BROWARD, INC

Schedule I (Form 990) (2015)

Schedule I (Form 990) (2015)

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 59-2477112 COMMUNITY FOUNDATION OF BROWARD

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			ı
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			ı
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ĺ
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	}		İ
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	1		İ
	CEO/Executive Director Check all that apply. Do not check any boxes for methods used by a related organization to			ĺ
	establish compensation of the CEO/Executive Director, but explain in Part III	1		l
	Compensation committee Written employment contract			ŀ
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.			ĺ
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the revenues of.			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	ļ	1	1
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		{	
	contingent on the net earnings of		l	
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			[
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			[
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in		ĺ	
	Regulations section 53.4958-6(c)?	9	1	ĺ

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

Schedule J (Form 990) 2015

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2015

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII

Note: The sum of columns (B)(i) (iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	orner dererred compensation	Denems	(a)-(i)(a)	reported as deferred on prior Form 990
LINDA B. CARTER	€ €	205,152.	0.0	945.	8,553.	8,596.	223,246.	0.0
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							Sched	Schedule J (Form 990) 2015

532113 10-14-15

SCHEDULE M (Form 990)

Noncash Contributions

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

2015

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

COMMUNITY FOUNDATION OF BROWARD, INC.

Employer identification number 59-2477112

Par	rt I Types of Property							
		(a)	(b)	(c)	(d)	_		
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of det noncash contribut			
		applicable		Form 990, Part VIII, line 1g	noncash contribut	ion an	iounts	•
1	Art · Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests			· <u> </u>				
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles				 -			
7	Boats and planes		<u> </u>					
-	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			 -				
8	Intellectual property	77	8	106 630	FAIR MARKET	777 T	TTD	
9	Securities - Publicly traded	X		130,030.	FAIR MARKET	_VAI	10E	
10	Securities - Closely held stock					_		
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures .		ļ					
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy .							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ()				-			
28	Other (-		
29	Number of Forms 8283 received by the organi	zation durin	a the tax year for	contributions		-		
	for which the organization completed Form 82		- •					
		,,		gee			Yes	No
30a	During the year, did the organization receive b	v contributir	on any property re	ported in Part I lines 1 throi	igh 28, that it			
	must hold for at least three years from the date					ŀ		
	exempt purposes for the entire holding period		ar commodition, arm	a willow is not required to be	0 0300 101	200		Х
h	If "Yes," describe the arrangement in Part II.	•		•		30a		
31	Does the organization have a gift acceptance	nolicy that s	equires the review	of any non-etandard contrib	outione?			X
						31		
o∠a	Does the organization hire or use third parties	or related of	rganizations to sol	icit, process, or sell noncast	1		. .	
	contributions?					32a	X	
	If "Yes," describe in Part II.							Í
33	If the organization did not report an amount in	column (c)	for a type of prope	erty for which column (a) is c	hecked,			l
	describe in Part II							
LHA	For Paperwork Reduction Act Notice, see	the instruc	tions for Form 99	3 0.	Schedule M	(Form	990) (2015)

532141 08-21-15

SCHEDULE M, LINE 32B: SECURITIES ARE RECEIVED INTO BROKERAGE ACCOUNTS AND SOLD IMMEDIATE	
SECURITIES ARE RECEIVED INTO BROKERAGE ACCOUNTS AND SOLD IMMEDIATE	
	LY.
	
	
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-	
	
532142 08-21-15 Schedule M	(Form 990) (2015)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule Q (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015
Open to Public Inspection

Name of the organization

COMMUNITY FOUNDATION OF BROWARD, INC.

Employer identification number 59-2477112

FORM 990, PART VI, SECTION B, LINE 11: THE FOUNDATION HAS ESTABLISHED AN AUDIT COMMITTEE CONSISTING OF BOARD MEMBERS AND INDIVIDUALS FROM THE COMMUNITY WITH FINANCIAL AND TAX ONE OF THE FUNCTIONS AND RESPONSIBILITIES OF THIS COMMITTEE IS EXPERTISE. TO ENSURE A REVIEW OF THE FORM 990 AND RELATED SCHEDULES PRIOR TO FILING. COPY OF FORM 990 AND ACCOMPANYING SCHEDULES IS DELIVERED TO ALL BOARD MEMBERS FOR THEIR REVIEW BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: BOARD AND STAFF MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY BOARD MEMBERS ARE ALSO REQUIRED TO DISCLOSE CONFLICTS OF INTEREST AND ABSTAIN FROM ANY DISCUSSION OR VOTING, AT THE MONTHLY BOARD MEETINGS. FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION OF CEO IS DETERMINED BY THE BOARD AFTER A REVIEW OF CEO'S PERFORMANCE AND ACCOMPLISHMENTS, REVIEW OF COMPARABLE COMPENSATION DATA OBTAINED FROM INDEPENDENT RESOURCES AND BUDGET LIMITATIONS. COMPENSATION OF KEY EMPLOYEES IS DETERMINED BY THE CEO AFTER A REVIEW OF THEIR PERFORMANCE AND ACCOMPLISHMENTS, REVIEW OF COMPARABLE COMPENSATION DATA OBTAINED FROM INDEPENDENT RESOURCES AND BUDGET LIMITATIONS. FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION ISSUES AN ANNUAL REPORT PROVIDING FINANCIAL INFORMATION TO THE PUBLIC AND DOCUMENTATION OF THE FOUNDATION'S SIGNIFICANT ACTIVITIES.

ANNUAL REPORT IS MAILED TO THE FOUNDATION'S CONTACTS AND POSTED TO ITS

532211 09-02-15

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

Schedule O (Form 990 or 990-EZ) (2015)

Employer identification number Name of the organization COMMUNITY FOUNDATION OF BROWARD, INC. 59-2477112 WEBSITE. AUDITED FINANCIAL STATEMENTS AND FORM 990 (INCLUDING RELATED SCHEDULES) ARE AVAILABLE AT THE FOUNDATION'S OFFICE UPON REQUEST AND CAN BE DOWNLOADED FROM THE FOUNDATION'S WEBSITE. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: 1,307,130. AGENCY TRANSACTIONS -46,356.CHANGE IN SPLIT-INTEREST AGREEMENTS 1,260,774. TOTAL TO FORM 990, PART XI, LINE 9 FORM 990, PART XII, LINE 2C NO CHANGE FROM PRIOR YEAR.

Schedule O (Form 990 or 990-EZ) (2015)