

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
CNL Financial Group Inc Political Action Committee

ADDRESS (number and street) 450 S Orange Avenue Suite 1400
Check if different than previously reported. (ACC) Orlando FL 32801

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00454314
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report
(b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31
(c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special
(d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2015 through 04 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Tracy Turner

Signature of Treasurer Tracy Turner [Electronically Filed] Date 05 / 13 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**CNL Financial Group Inc Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="58858.77"/>	<input type="text" value="58858.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="61835.36"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="5905.40"/>	<input type="text" value="8881.99"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="67740.76"/>	<input type="text" value="67740.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="67740.76"/>	<input type="text" value="67740.76"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**CNL Financial Group Inc Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5769.22	7115.37
(ii) Unitemized .....	136.18	1766.62
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5905.40	8881.99
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5905.40	8881.99
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	5905.40	8881.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5905.40	8881.99

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	0.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5905.40	8881.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5905.40	8881.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**CNL Financial Group Inc Political Action Committee**

**A. Andrew A Hyltin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1215 Spring Lake Drive

City Orlando State FL Zip Code 32804

FEC ID number of contributing federal political committee. **C**

Name of Employer: CNL Financial Group, Inc. Occupation: President of Real Estate Advisors

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1346.17**

Date of Receipt: **04 / 10 / 2015**

**Transaction ID : SA11AI.6147**

Amount of Each Receipt this Period: **192.31**

**B. Andrew A Hyltin**  
Full Name (Last, First, Middle Initial)

Mailing Address 1215 Spring Lake Drive

City Orlando State FL Zip Code 32804

FEC ID number of contributing federal political committee. **C**

Name of Employer: CNL Financial Group, Inc. Occupation: President of Real Estate Advisors

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1538.48**

Date of Receipt: **04 / 24 / 2015**

**Transaction ID : SA11AI.6158**

Amount of Each Receipt this Period: **192.31**

**c. Sherry Magee**  
Full Name (Last, First, Middle Initial)

Mailing Address 8110 Caraway Drive

City Orlando State FL Zip Code 32819

FEC ID number of contributing federal political committee. **C**

Name of Employer: CNL Financial Group Occupation: VP of Communications

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **307.68**

Date of Receipt: **04 / 10 / 2015**

**Transaction ID : SA11AI.6149**

Amount of Each Receipt this Period: **38.46**

**SUBTOTAL** of Receipts This Page (optional)..... **423.08**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CNL Financial Group Inc Political Action Committee**

**A. Sherry Magee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8110 Caraway Drive  
City Orlando State FL Zip Code 32819  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Occupation VP of Communications  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **346.14**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : SA11AI.6160**  
Amount of Each Receipt this Period **38.46**

**B. Stephen Mauldin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4119 Wardell Place  
City Orlando State FL Zip Code 32814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Occupation Group President - Fund Management  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **307.68**

Date of Receipt **04 / 10 / 2015**  
**Transaction ID : SA11AI.6143**  
Amount of Each Receipt this Period **38.46**

**C. Stephen Mauldin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4119 Wardell Place  
City Orlando State FL Zip Code 32814  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Occupation Group President - Fund Management  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **346.14**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : SA11AI.6154**  
Amount of Each Receipt this Period **38.46**

**SUBTOTAL** of Receipts This Page (optional)..... **115.38**  
**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 10
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CNL Financial Group Inc Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Tracy Schmidt</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : SA11AI.6163</b>
Mailing Address 6055 Louise Cove Drive		Amount of Each Receipt this Period 5000.00
City Windermere	State FL	Zip Code 34786
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group Inc.	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Lisa A Schultz</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 10 / 2015 <b>Transaction ID : SA11AI.6144</b>
Mailing Address 45 Interlaken Road		Amount of Each Receipt this Period 38.46
City Orlando	State FL	Zip Code 32804
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

Full Name (Last, First, Middle Initial) <b>C. Lisa A Schultz</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2015 <b>Transaction ID : SA11AI.6155</b>
Mailing Address 45 Interlaken Road		Amount of Each Receipt this Period 38.46
City Orlando	State FL	Zip Code 32804
FEC ID number of contributing federal political committee. C		
Name of Employer CNL Financial Group, Inc.	Occupation Human Capital Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5076.92
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 10
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CNL Financial Group Inc Political Action Committee**

**A. Michael Tetrick**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1223 Lake Highland Drive  
City Orlando State FL Zip Code 32803  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 307.68

Date of Receipt 04 / 10 / 2015  
**Transaction ID : SA11AI.6142**  
Amount of Each Receipt this Period 38.46

**B. Michael Tetrick**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1223 Lake Highland Drive  
City Orlando State FL Zip Code 32803  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Occupation Sr VP of Structured Finance  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 346.14

Date of Receipt 04 / 24 / 2015  
**Transaction ID : SA11AI.6153**  
Amount of Each Receipt this Period 38.46

**C. Tammy Tipton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 450 S. Orange Avenue Suite 1400  
City Orlando State FL Zip Code 32801  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CNL Financial Group Inc. Occupation Chief Accounting Officer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 307.68

Date of Receipt 04 / 10 / 2015  
**Transaction ID : SA11AI.6146**  
Amount of Each Receipt this Period 38.46

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 115.38  
**TOTAL** This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 10  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**CNL Financial Group Inc Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Tammy Tipton**

Mailing Address 450 S. Orange Avenue Suite 1400

City Orlando	State FL	Zip Code 32801
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FEC ID number of contributing federal political committee. **C**

Name of Employer CNL Financial Group Inc.	Occupation Chief Accounting Officer
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
346.14

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	24	/	2015

**Transaction ID : SA11AI.6157**

Amount of Each Receipt this Period  
38.46

Full Name (Last, First, Middle Initial)  
**B.**

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	38.46
<b>TOTAL</b> This Period (last page this line number only).....▶	5769.22