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DLN: 93493087000343

Form **990**

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 black lung benefit trust or private foundation)

2011

OMB No 1545-0047

ZUII

► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

A Fo	r the 2	2011 ca	lendar year, or tax year beginning 07-01-2011 and ending 06-30-2012					
3 Ch	eck ıf ap	plicable	C Name of organization CREATIVE CAPITAL FOUNDATION		D Employer	identification number		
- Add	dress ch	ange		-	31-1605			
– Na	me char	nge	Doing Business As		E Telephone			
- Init	ial retur	m	Number and street (or P O box if mail is not delivered to street address) Room/suite	<u>-</u>	(212)59			
– Tei	mınated	t	65 BLEECKER STREET 7TH FLOOR	ļ	G Gross recei	pts \$ 9,339,994		
– _{Am}	ended r	eturn	City or town, state or country, and ZIP + 4	-				
– Apı	olication	pending	NEW YORK, NY 10012					
			F Name and address of principal officer	H(a) Is thu	c a group rot	urn for		
			RUBY LERNER	affilia	s a group ret tes?	TYes ▼ No		
			65 BLEECKER STREET 7TH FLOOR NEW YORK, NY 10012					
			NEW TORK, NT 19912		affiliates incl	·		
Та	x-exem	pt status	▼ 501(c)(3)		p exemption	st (see instructions) number ►		
w	ebsite	• • \\/\\\	W CREATIVE-CAPITAL ORG	11(0)	p			
				T.		Tal		
			Corporation Trust Association Other ►	L Year of for	mation 1998	M State of legal domicile NY		
Ра	rt I		mary					
			escribe the organization's mission or most significant activities VE CAPITAL SUPPORTS INDIVIDUAL ARTISTS' PROJECTS THROUG	SH GRANT A	ND CAREE	R DEVELOPMENT		
3	-	- NEATT	VE CAPITAL SUPPORTS INDIVIDUAL ARTISTS PROJECTS TIMOUR	JII OKANT A	IND CARLLI	CDEVELOPMENT		
covemiance	-							
<u>.</u>	-							
Ş			is box 🔰 if the organization discontinued its operations or disposed of	more than 2	1	1		
			of voting members of the governing body (Part VI, line 1a)		3			
ß			of independent voting members of the governing body (Part VI, line 1b)					
Acuviues &			mber of individuals employed in calendar year 2011 (Part V, line 2a)		5			
ş			mber of volunteers (estimate if necessary)		6			
_	I		related business revenue from Part VIII, column (C), line 12 lated business taxable income from Form 990-T, line 34		76			
	B	vecume	lated business taxable income nom Form 990-1, line 34	Dries	r Year	Current Year		
	8	Contri	butions and grants (Part VIII, line 1h)	Piloi	6,034,804			
ā	9		m service revenue (Part VIII, line 2g)		340,698			
Revenue	10		ment income (Part VIII, column (A), lines 3, 4, and 7d)		161,923	· ·		
Æ	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		80,082			
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		00,002	01,733		
			<u> </u>		6,617,507	9,305,942		
	13	Grants	and similar amounts paid (Part IX, column (A), lines 1–3)		2,446,273	4,661,203		
	14		ts paid to or for members (Part IX, column (A), line 4)		0	0		
Ø	15	Salarıe 5–10)	es, other compensation, employee benefits (Part IX, column (A), lines		1,728,515	2,043,551		
Expenses	16a	,	sional fundraising fees (Part IX, column (A), line 11e)		0			
⊕ ⊕	b		ndraising expenses (Part IX, column (D), line 25) •449,480					
Ð	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,268,175	1,464,356		
	18		expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		5,442,963			
	19		ue less expenses Subtract line 18 from line 12		1,174,544			
200				Beginning	of Current			
net Assets or Fund Bałances				Y	ear	End of Year		
3 TE	20		assets (Part X, line 16)		14,169,582			
Z 2	21		iabilities (Part X, line 26)		485,477	<u> </u>		
	22		sets or fund balances Subtract line 21 from line 20		13,684,105	14,793,197		
Pal Jnde know	r t III r penal	Sign ties of pe	ature Block erjury, I declare that I have examined this return, including accompanying sch f, it is true, correct, and complete. Declaration of preparer (other than officer)	edules and st	atements, and	d to the best of my		
		****			13-03-28			
Sigr		F Signa	ture of officer	Da	te			
der	е		LERNER EXECUTIVE DIRECTOR					
		Type	or print name and title		_			
		Preparer	2012.02.20	Check if Preparer's taxpayer identification number self- (see instructions)				
Paid		sıgnature	11/10/11/11/10/01/	nployed 🕨 🦵	/ ·			
	arer's		ame (or yours TAIT WELLER & BAKER LLP	EIN 23-1144520				
Jse (Only		nployed), and ZIP + 4 1818 MARKET STREET SUITE 2400		LIIV F 23-114	TTJ2U		
		·	PHILADELPHIA, PA 19103		Phone no 🕨	(215) 979-8800		
			FILLENDITETHAL PALLYTUS					

May the IRS discuss this return with the preparer shown above? (see instructions) . .

Form 990 (<u> </u>
Part IV	Checklist of Required Schedules

	Chicagnia and Canadana			
_			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If</i> "Yes," complete Schedule C, Part II	4		Νο
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V^{\bullet}	10	Yes	
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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
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 Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νo
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		Νo
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

	550 (2011)			Page -
Par	t IV Checklist of Required Schedules (continued)		1	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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 J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		No
b	Is 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's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28 a	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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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, line 2	35b		No
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		No
37	Did 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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	. [
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 238			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
a	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			
_				
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
a	year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
_	over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
_	If "Vec" to line 52 or 5h, did the organization file Form 9995-T2	J.		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
_	organization solicit any contributions that were not tax deductible?			.,,
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
e	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
				NO
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
L	1 1			
D	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
-	13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
L	If "Voc " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O			

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

Se	ction A. Governing Body and Management			
			Yes	No
	Enterphenical Control of Control			
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was			
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No
6	Did the organization become aware during the year of a significant diversion of the organization's assets.	6		No
0 7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	-		140
74	more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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 arrangement with a	16-		N.a
h	taxable entity during the year?	16a		No
J	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶NY			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization LESLIE SINGER

65 BLEECKER STREET 7TH FL NEW YORK, NY 10012

NEW YORK, NY 10012 (212) 598-9900

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

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, and **current** key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

◆ 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) Name and Title	(B) Average hours per week (describe hours	Position more unles an	on (d e thai	C) o no n one son er ar	t che e bo: is bo nd a stee)	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former		11255)	organizations
(1) CATHARINE R STIMPSON DIRECTOR	1 00	х						0	0	0
(2) SUNNY BATES DIRECTOR	1 00	х						0	0	0
(3) ED COLLOTON DIRECTOR	1 00	х						0	0	0
(4) RONALD FELDMAN SECRETARY	1 00	х		Х				0	0	0
(5) ARCHIBALD L GILLIES DIRECTOR EMERITUS	1 00	х						0	0	0
(6) LISA HELLER DIRECTOR	1 00	х						0	0	0
(7) LEWIS HYDE DIRECTOR	1 00	Х						0	0	0
(8) COLLEEN JENNINGS-ROGGENSACK DIRECTOR	1 00	Х						0	0	0
(9) LYDA KUTH INTERIM CHAIR & TREASURER	1 00	Х		Х				0	0	0
(10) RICHARD LINKLATER DIRECTOR	1 00	Х						0	0	0
(11) JOHN MORNING DIRECTOR	1 00	х						0	0	0
(12) JAMES SCHAMUS DIRECTOR	1 00	Х						0	0	0
(13) PETER GELLES DIRECTOR	1 00	х						0	0	0
(14) JEFFREY SOROS DIRECTOR	1 00	Х						0	0	0
(15) MICHAEL STIPE DIRECTOR	1 00	х						0	0	0
(16) FRED WILSON DIRECTOR	1 00	х						0	0	0
(17) JOEL WACHS EX-OFFICIO	1 00	Х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) A verage hours per week (describe	Average hours more than one box, per unless person is both week (describe director/trustee) Average hours Position (do not check more than one box, compensation compensation from the organization (Worganizations 2/1099-MISC) Reportable compensation compensation from related organization (Worganizations 2/1099-MISC)									ited fother sation :he on and
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former		MISC)	relat organiza	
(18) V DIREC	/ILLIAM K BOWES TOR	1 00	x						0	0		0
	UZI KEATS CORDISH PERSON	1 00	х		х				0	0		0
(20) E	VE STEELE TOR	1 00	х						0	0		0
(21) DIREC	EBORAH RAPPAPORT TOR	1 00	х						0	0		0
	TEPHEN REILY	1 00	х						0	0		0
	AIGE WEST	1 00	х						0	0		0
	UBY LERNER	40 00			Х				198,190	0		20,700
(25) L	ESLIE SINGER FINANCIAL OFFICER	40 00			х				121,679	0		15,345
(26) F	RANCES ALYSON POU TOR OF PDP PROGRAM	40 00					x		145,276	0		16,996
(27) S	OPHIE HENDERSON	40 00					х		128,725	0		15,838
(28) S	EAN ELWOOD	40 00					×		109,476	0		14,490
DIR C	F PROGRAMS & INITIAT								,			<u> </u>
1b	Sub-Total		<u> </u>	<u> </u>	<u> </u>	<u>. </u>		<u> </u>				
С	Total from continuation sheets t							>				
d	Total (add lines 1b and 1c)			•				>	703,346	0		83,369
2	Total number of individuals (inclu \$100,000 of reportable compens					ted	above)) who	received more tha	n		
3	Did the organization list any form on line 1a? <i>If</i> "Yes," complete Scho	•			-	ey e •	mploy	ee, c	or highest compens		Yes	No No
4	For any individual listed on line 1 organization and related organiza									n from the		
5	Individual	eceive or accru	e comn	• ensa	• tion	fron	• • nanv∣	• Jnrel	lated organization o		4 Yes	
	services rendered to the organiza										5	No
	ction B. Independent Cont											
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax ye	the organization										
	Nam	(A) e and business add	ress						Descr	(B) iption of services	(C Comper	
_	otal number of independent contr 100,000 of compensation from tl	•	_	ot lim	nited	to t	hosel	ıste	d above) who receiv	ed more than		_

Part v		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
粪쏠	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b					
್ರಿ≣	С	Fundraising events 1c	70,449				
£a ≝a	d	Related organizations 1d					
$\frac{\sigma_{\rm e}^{\rm e}}{\sigma_{\rm e}}$	e	Government grants (contributions) 1e	50,000				
충동							
i ž ia	f	All other contributions, gifts, grants, and similar amounts not included above	8,711,007				
通長 -	g	Noncash contributions included in					
투호		lines 1a-1f \$					
ರ≔	h	Total. Add lines 1a-1f	· · · •	8,831,456			
nu n			Business Code				
Ē	2a	PROGRAM FEES	711300	282,206	282,206		
e Ke	ь			·	·		
ar EE	c						
Š		-					
Š	d						
Ē	е						
Program Serwce Revenue	f	All other program service revenue					
Ě	g	Total. Add lines 2a-2f		282,206			
	3	Investment income (including dividence		,			
		and other similar amounts)	. F	88,418			88,418
	4	Income from investment of tax-exempt bond p	F				
	5	Royalties	▶ ↑				
		(ı) Real	(II) Personal				
	6a	Gross rents	, ,				
	ь	Less rental					
		expenses Rental income					
	C	or (loss)					
	d	Net rental income or (loss)					
		(ı) Securities	(II) Other				
	7a	Gross amount 22,103 from sales of					
		assets other than inventory					
	ь	Less cost or 0					
		other basis and sales expenses					
	С	Gain or (loss) 22,103					
	d	Net gain or (loss)		22,103			22,103
	8a	Gross income from fundraising	Ī				
Other Revenue		events (not including \$					
<u> </u>		a	44,201				
÷.	b	Less direct expenses b	34,052				
δ	С	Net income or (loss) from fundraising	events 🟲	10,149			10,149
	9a	Gross income from gaming activities See Part IV, line 19 a					
	ь	Less direct expenses b					
	С	Net income or (loss) from gaming activ	/ities .				
	10a	Gross sales of inventory, less returns and allowances .					
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales of inve					
		Miscellaneous Revenue	Business Code				
	11a	ADMINISTRATION FEE	900099	70,000	70,000		
	ь	OTHER INCOME	900099	1,610	1,610		
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		71,610			
	12	Total revenue. See Instructions		9,305,942	353,816	0	120,670

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) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations				<u> </u>
	in the United States See Part IV, line 21	2,885,479	2,885,479		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	1,720,724	1,720,724		
3	Grants and other assistance to governments,	1,720,721	1,720,721		
3	organizations, and individuals outside the United States See Part IV, lines 15 and 16	55,000	55,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	372,875	266,268	30,612	75,995
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	372,673	200,200	30,012	,3,333
7	Other salaries and wages	1,376,868	983,216	113,037	280,615
8	Pension plan contributions (include section 401(k) and section	1,370,808	963,210	113,037	200,013
	403(b) employer contributions)	55,183	39,317	4,555	11,311
9	Other employee benefits	100,434	71,590	8,281	20,563
10	Payroll taxes	138,191	98,525	11,388	28,278
11	Fees for services (non-employees)				
а	Management				
b	Legal	14,495	13,396	302	797
C	Accounting	52,278	48,313	1,091	2,874
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	19,554		19,554	
g	Other	614,674	598,494	15,708	472
12	Advertising and promotion	10,595	9,265	444	886
13	Office expenses	76,397	65,426	5,648	5,323
14	Information technology	17,682	15,463	740	1,479
15	Royalties				
16	Occupancy	46,643	40,215	2,143	4,285
17	Travel	197,493	191,326		6,167
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	89,682	80,237	7,697	1,748
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	16,682	13,902	1,390	1,390
23	Insurance	4,948	4,048	450	450
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	HONORARIUMS	114,882	114,882		
b	GRANTEE CONFERENCE	110,470	110,470		
c	ADMINISTRATION FEES	70,000	70,000		
d	SPECIAL EVENTS	6,847			6,847
e					
f	All other expenses	1,034	1,034		
25	Total functional expenses. Add lines 1 through 24f	8,169,110	7,496,590	223,040	449,480
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
					rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1,549,083 1,544,505 1 4.818.751 2 6.210.045 2 3 5,942,538 5,770,392 7.200 0 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 7 8 9 34.921 9 90.118 Prepaid expenses and deferred charges 184,398 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 154,594 b Less accumulated depreciation 21,523 10c 29,804 1,777,366 11 1,784,343 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 18,200 15 18,400 15 14,169,582 15,447,607 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 485,477 17 479,410 17 Accounts payable and accrued expenses . 18 18 175,000 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 24 Unsecured notes and loans payable to unrelated third parties 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 25 D 26 485,477 26 654,410 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,934,737 27 2,177,668 Unrestricted net assets 10,723,368 28 11,589,529 28 Temporarily restricted net assets Fund 29 1,026,000 29 1,026,000 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 13.684.105 33 14,793,197 34 Total liabilities and net assets/fund balances 14.169.582 15.447.607

-(-	Check if Schedule O contains a response to any question in this Part XI			.┏	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		q :	305,942
2	Total expenses (must equal Part IX, column (A), line 25)	2			169,110
3	Revenue less expenses Subtract line 2 from line 1	3		1,1	136,832
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,6	584,105
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-27,740
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		14,7	793,197
Par	The triangle of the contains a response to any question in this Part XII	ī		৮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
_	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3b		

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OMB No 1545-0047

2011

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

CREATIVE CAPITAL FOUNDATION

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number

31-1605982 Reason for Public Charity Status (All organizations must complete this part.) See instr

Part	31	Reas	on for Pu	ıblic Charity Sta	tus (All or	ganızatıons	s must com	plete this p	art.) See	instructions	S
he or	ganız	zatıon ıs	not a priva	te foundation becaus	seitis (For	lınes 1 throu	ıgh 11, chec	k only one bo	ox)		
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation of	fchurches :	section 170(l	o)(1)(A)(i).			
2	Γ	A scho	ol describe	d in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)				
3	\sqcap	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descr	ibed in sectio	on 170(b)(1)	(A)(iii).		
4	Γ			h organization opera ity, and state	ted in conjun	iction with a	hospital des	cribed in sec	tion 170(b)	(1)(A)(iii).	Enter the
5	Г	An orga	anızatıon op	perated for the benefi	t of a college	e or universi	ty owned or o	perated by a	a governme	ntal unit des	 cribed in
		section 170(b)(1)(A)(iv). (Complete Part II)									
6	Г			local government o	•	tal unit desc	ribed in sect	ion 170(b)(1	.)(A)(v).		
7	<u>\</u>	An orga describ	anızatıon th oed ın	at normally receives (A)(vi) (Complete P	a substantia					from the ger	neral public
8	Г			described in section		A)(vi) (Cor	mplete Part I	I)			
9				at normally receives					butions, me	mbership fee	es, and gross
	•			vities related to its e							
				oss investment inco							
				ganızatıon after June						,	
L O	Г										
l 1	Γ	An organization organized and operated exclusively to test for public safety. Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a									
e	Γ	other t	-	ox, I certify that the ion managers and ot	_			•	•	-	•
f		check	this box	received a written d						: III support	ing organization,
g		followir	ng persons?)	Yes No
				governing body of th			=				g(i)
		(ii) a fa	amıly memb	er of a person descri	bed in (i) abo	ove?					g(ii)
		(iii) a 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?				ı(iii)
h				ng information about							
(i) Name suppo organiz		of ted	I EIN	EIN lines 1- 9 above or IRC section	Is the organizat col (i) list your gove	(iv) Is the organization in col (i) listed in your governing document?		tify the lion in your rt?	(vi Is t organiza col (i) or in the	he ation in ganized	(vii) A mount of support?
				(see instructions))	Yes	No	Yes	No	Yes	No	7
							†	1	1		
							1	1			
			!	.		+	+	+	+	$\overline{}$	+

Total

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(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.)

_	ection A. Public Support	e organization f	alls to qualify u	naer the tests li	istea below, ple	ase complete	Part III.)
	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	
1	in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual			5,314,707	6,034,804	8,831,456	39,226,009
2	grants ") Tax revenues levied for the organization'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 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	10,123,07	8,921,971	5,314,707	6,034,804	8,831,456	39,226,009
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column						28,043,777
6	(f) Public Support. Subtract line 5 from line 4						11,182,232
	ection B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	A mounts from line 4	10,123,071	8,921,971	5,314,707	6,034,804	8,831,456	39,226,009
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	290,217	100,276	48,110	90,107	88,418	617,128
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	82,688	39,792	36,355	30,908	71,610	261,353
11	Total support (Add lines 7 through 10)						40,104,490
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	_
13	First Five Years If the Form 990 is check this box and stop here	for the organızatı	on's first, second,	third, fourth, or fi	fth tax year as a !	501(c)(3) organi:	zation,
	ection C. Computation of Pub						
14	Public Support Percentage for 201:	•	,	11 column (f))		14	27 880 %
15	Public Support Percentage for 2010	O Schedule A , Pa	rt II, line 14			15	29 760 %
16a	33 1/3% support test—2011. If the and stop here. The organization qua				ne 14 is 33 1/3%	or more, check t	this box
	33 1/3% support test—2010. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization meets and the organization meets.	organization did n qualifies as a pu — 2011. If the org tion meets the "f	not check the box ublicly supported of anization did not c acts and circumst	on line 13 or 16a organization heck a box on line ances" test, chec	e 13, 16a, or 16b k this box and st o	and line 14 op here. Explain	check this
	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organization Part IV how the organization Private Foundation If the organization	nization meets the "f	e "facts and cırcu acts and cırcumst	mstances" test, c ances" test The	heck this box and organization qual	d stop here. Ifies as a publicly	, , ▶□

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part TV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

THE ORGANIZATION MEETS THE 10% FACTS AND CIRCUMSTANCES TEST FOR THE FOLLOWING REASONS (1) IT HAS A PUBLIC SUPPORT PERCENTAGE IN EXCESS OF THE 10% OF SUPPORT LIMITATION.(2) IT IS ORGANIZED AND OPERATED TO ATTRACT NEW AND ADDITIONAL PUBLIC OR GOVERNMENTAL SUPPORT ON A CONTINUOUS BASIS. (3) IT HAS A REPRESENTATIVE GOVERNING BODY. (4) IT PROVIDES FACILITIES OR SERVICES DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON CONTINUOUS BASIS. (5) MEMBERS OF THE PUBLIC HAVING SPECIAL KNOWLEDGE OR EXPERTISE. PUBLIC OFFICIALS OR COMMUNITY LEADERS PARTICIPATE IN OR SPONSOR PROGRAMS OF THE ORGANIZATION AND (6) IT MAINTAINS A DEFINITIVE PROGRAM FOR ACCOMPLISHING ITS CHARITABLE WORK IN THE COMMUNITY 10% OF SUPPORT LIMITATION THE ORGANIZATION HAS A PUBLIC SUPPORT PERCENTAGE OF 27 88% FOR THE YEAR ENDED 6/30/12 BASED ON AGGREGATE FINANCIAL INFORMATION FOR THE YEARS ENDED 6/30/08 THROUGH 6/30/12 THIS AMOUNT IS IN EXCESS OF THE 10% REQUIRED BY REGULATION SECTION 1 170A-(9)(E)(3)(I) ATTRACTION OF ADDITIONAL PUBLIC SUPPORT CREATIVE CAPITAL HAS A DEDICATED DEVELOPMENT DEPARTMENT OF THREE FULL-TIME STAFF MEMBERS WHO WORK ON FUNDRAISING AND SOLICITATIONS FROM A DIVERSE BASE OF DONORS. IN ADDITION TO THE ONGOING DONOR CULTIVATION WORK OF OUR EXECUTIVE DIRECTOR FUNDRAISING ACTIVITIES INCLUDE SPECIAL EVENTS. GRANT SUBMISSIONS TO FOUNDING FUNDERS. CULTIVATION OF INDIVIDUAL DONORS. ANNUAL FUNDRAISING APPEAL. AND OUR NEW COMMUNITY-SUPPORTED ARTIST CAMPAIGN. OUR DONORS INCLUDE MAJOR FOUNDATIONS. FAMILY FOUNDATIONS, MAJOR INDIVIDUAL GIFTS, AND SMALL CONTRIBUTIONS FROM OUR COMMUNITY OF ARTISTS SINCE FISCAL YEAR 2008-09, OUR GIVING FROM THE BOARD OF DIRECTORS, INDIVIDUALS AND FAMILY FOUNDATIONS HAS GROWN 71% IN 2012, OUR BENEFIT AUCTION WAS OUR MOST SUCCESSFUL ANNUAL FUNDRAISING EVENT TO DATE REPRESENTATIVE GOVERNING BODY CREATIVE CAPITAL'S BOARD OF DIRECTORS IS COMPRISED OF SOME 20 INDIVIDUALS FROM ACROSS THE COUNTRY WHO HAVE SPECIALIZED KNOWLEDGE IN A WIDE VARIETY OF ARTISTIC DISCIPLINES - INCLUDING FILM, VISUAL AND PERFORMING ARTS, AND LITERATURE - AS WELL AS OTHER PROFESSIONS. SUCH AS HIGHER EDUCATION. BUSINESS. MARKETING AND VENTURE CAPITAL INVESTMENTS. ALL OF OUR BOARD MEMBERS SUPPORT CREATIVE CAPITAL'S MISSION OF PROVIDING FUNDING AND SERVICES TO A BROAD ARRAY OF ARTISTS ACROSS THE COUNTRY, BUT BOARD MEMBERS DO NOT MAKE THE SELECTION OF THE ARTIST SUPPORTED PROVISION OF FACILITIES OR SERVICES CREATIVE CAPITAL'S PROFESSIONAL DEVELOPMENT PROGRAM, WHICH INCLUDES OUR ONGOING SERIES OF AFFORDABLE ONLINE WEBINARS. PROVIDES ARTISTS ACROSS THE COUNTRY WITH TRAINING IN BUSINESS PLANNING. BUDGETING. MARKETING. PROMOTION AND OTHER SKILLS THAT SUPPORT THEIR ENTREPRENEURSHIP AND CAREER DEVELOPMENT PARTICIPATION IN AND SPONSORING OF PROGRAMS CREATIVE CAPITAL IS ONE OF THE FEW NATIONAL ORGANIZATIONS THAT AWARDS GRANTS TO INDIVIDUAL ARTISTS THROUGH AN OPEN APPLICATION PROCESS. AND WE RECEIVE 2.700-3.200 APPLICATIONS FROM ARTISTS FOR EACH GRANT DEADLINE. CREATIVE CAPITAL INVITES ARTS PROFESSIONALS AND SPECIALISTS IN CONTEMPORARY ARTISTIC PRACTICE TO PARTICIPATE IN OUR GRANTMAKING PROCESS THESE OUTSIDE ART PROFESSIONALS REVIEW THE APPLICATIONS AND ULTIMATELY RECOMMEND THE GRANT RECIPIENTS FROM AMONG THESE SUBMISSIONS WE ALSO INVITE MORE THAN 150 PROFESSIONALS IN THE ARTS AND OTHER FIELDS TO PARTICIPATE IN OUR ARTIST RETREAT, WHERE THEY SHARE THEIR KNOWLEDGE, SKILLS AND ADVICE WITH OUR GRANTEES PROGRAM FOR ACCOMPLISHING CHARITABLE WORK CREATIVE CAPITAL IS COMMITTED TO MAINTAINING OUR SIGNATURE GRANTMAKING PROGRAM, WHICH PROVIDES INDIVIDUAL ARTISTS WITH PROJECT GRANTS OF UP TO \$50,000, COMPLEMENTED BY AN IN-DEPTH PROGRAM OF ADVISORY SERVICES THAT HELP OUR GRANTEES ACHIEVE THEIR GOALS CREATIVE CAPITAL ALSO CONTINUES TO DEVELOP NEW WAYS TO OFFER CAREER DEVELOPMENT SERVICES TO ARTISTS BEYOND OUR GRANTEES. THROUGH OUR PROFESSIONAL DEVELOPMENT PROGRAM WORKSHOPS AND THE NEW ONLINE LEARNING PROGRAM WEBINARS

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Department of the Treasury

DLN: 93493087000343

OMB No 1545-0047

SCHEDULE D (Form 990) Supplemental Financial Statements

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

Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Name of the organization CREATIVE CAPITAL FOUNDATION

Employer identification number 31-1605982 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located ▶_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

а Г b Г	sing the organization's accession and othe ems (check all that apply)	r records, check any	of the	- foll	owing t	hat ara	a signific	- n+	o of its collec	L		
ь Г				. 1011	owning c	iiat aie	a signine	ant us	se of its conec	tion		
	Public exhibition		d	Γ	Loan	rexch	ange prog	rams				
_	Scholarly research		e	▽	Other	HELD	FORINV	ESTM	IENT			
с Г	Preservation for future generations											
	ovide a description of the organization's co art XIV	ollections and expla	ın how	they	furthe	r the or	rganızatıor	ı's ex	empt purpose	ın		
	uring the year, did the organization solicit of sets to be sold to raise funds rather than t								ılar	Γ γ	es	√ No
Part I		ements. Comple	te if t	the c	organi	zation			es" to Form !	990,		
	the organization an agent, trustee, custod cluded on Form 990, Part X?	ıan or other ınterme	diary	forco	ontribut	cions o	r other ass	ets n	ot	Γ γ	es	┌ No
b If	"Yes," explain the arrangement in Part XIV	/ and complete the	followi	ng ta	ible		-					
							-		Aı	noun	t	
c Be	eginning balance						-	1c				
d A	dditions during the year							1d				
e Di	istributions during the year							1e				
f Er	nding balance							1f				
2a Dı	d the organization include an amount on Fo	orm 990, Part X, line	21?							Γ γ	es	∏ No
b If	"Yes," explain the arrangement in Part XIV	•										
Part \	Endowment Funds. Complete											
		(a)Current Year	(b) F	rior Y		(c) Two	Years Back		Three Years Back	+ ` _	our Ye	ars Back
	eginning of year balance	1,137,928		1,0	026,000		1,026,00	0	1,026,000	<u>'</u>		
	ontributions									1		
	vestment earnings or losses	10,650			111,928							
	ants or scholarships											
	ther expenditures for facilities											
	Iministrative expenses											
	nd of year balance	1,148,578		1.1	137,928		1,026,00	0	1,026,000			
_	·	, ,						-		1		
	ovide the estimated percentage of the yea	r end balance neid a	15									
	pard designated or quasi-endowment											
b Pe	ermanent endowment 🕨 89 330 %											
	erm endowment 🕨 10 670 %											
	e there endowment funds not in the posse: ganization by	ssion of the organiza	ation t	hat a	re held	and ac	dministere	d for t	the	Г	Yes	No
	unrelated organizations								3a		103	No
) related organizations								3a			No
b If	"Yes" to 3a(II), are the related organizatio	ns listed as required	d on So	hed	ule R?				3	ь	İ	
4 De	escribe in Part XIV the intended uses of th	e organızatıon's end	lowme	nt fu	nds					•	·	
Part V	Land, Buildings, and Equipme	nt. See Form 99	0, Pai	rt X,	lıne 1	0.						
	Description of property				Cost or (inves		(b) Cost or basis (ot		(c) Accumulate depreciation		(d) Bo	ok value
1a Lan	d											
b Bui	ldıngs											
c Lea	sehold improvements											
d Equ	iipment						18	4,398	154,	594		29,804
e Oth	ner									\neg		
	dd lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colun	nn (B),	line	10(c).)		·			\neg		29,804

Pari VIII Investments—Other Securities. See	Form 990, Part X, line 1.	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(5)200. Talab	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
		12
Part VIII Investments—Program Related. See	Porm 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
	-	Cost or end-or-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, lir	ne 15.	
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	25.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
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1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
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1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
1 Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	(, line 25.	

T	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,305,942
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	8,169,110
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,136,832
4	Net unrealized gains (losses) on investments	4	-27,740
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-27,740
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,109,092
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Ret	urn
1	Total revenue, gains, and other support per audited financial statements	1	9,409,417
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	123,029
3	Subtract line 2e from line 1	3	9,286,388
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 19,554		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	19,554
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	9,305,942
Par 1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	per R	eturn 8,300,325
_	statements	1	8,300,323
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	150,769
3	Subtract line 2e from line 1	3	8,149,556
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 19,554		
	I I		
b	Other (Describe in Part XIV)		
ь с 5	Other (Describe in Part XIV)	4c 5	19,554 8,169,110

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	TO GENERATE INCOME TO SUPPORT ARTISTS' PROGRAMS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS (2009-2011) OR EXPECTED TO BE TAKEN IN CCF'S 2012 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS

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DLN: 93493087000343

OMB No 1545-0047

Inspection

Open to Public

SCHEDULE F (Form 990)

Department of the Treasury

to Part I

c Totals (add lines 3a and 3b)

Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

► Attach to Form 990. ► See separate instructions.

Name of the organization

Employer identification number

) =	rt I General Information	n on Activiti	es Outside t	ne United States Co	31-1605982	ation answored
Œ	"Yes" to Form 990, Par			ne United States. Co	ompiete ii the organiz	ation answered
	For grantmakers. Does the o	organization n	naıntaın record	s to substantiate the a	amount of the grants o	or
	assistance, the grantees' elig	jibility for the	grants or assis	stance, and the selecti	on criteria used to awa	ırd
	the grants or assistance?					✓ Yes
	For grantmakers. Describe in Pa United States	rt V the organiz	atıon's procedur	res for monitoring the use	e of grant funds outside th	ne
	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		52,00
	EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		3,00
						_
За	Sub-total	0	0			55,000
	Total from continuation sheets					,

55,000

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nui	mber of other o	organizations or en	tities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	EAST ASIA AND THE PACIFIC	1	3,000	CHECK PAYMENT	†		appraisal, other)
	EUROPE	3	52,000	CHECK PAYMENT	†		
	†		 I		†		
	†		 I		1		
	† '				1		
	<u> </u>						
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						1	
	'					1	dula F (Farra 200) 2011

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 Page **5**

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 WE MONITOR THE USE OF GRANT FUNDS THROUGH THE FUNDING REQUESTS AND FINAL REPORTS THAT WE RECEIVE FROM GRANTEES IN ADDITION, THE ORGANIZATION RECEIVES INFORMATION ON A REGULAR BASIS FROM GRANTEES REGARDING THE STATUS OF THE FUNDED PROJECTS FROM THE INITIAL PHASE THROUGH PREMIERE AND BEY OND

Schedule F (Form 990) 2010

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DLN: 93493087000343

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

CREATIVE CAPITAL FOUNDA	Employer ide	Employer identification number				
	11011				31-1605982	2
Part I Fundraising Act	civities. Comple	te if the o	organiza	tion answered "Yes"	to Form 990, Part IV	/, line 17.
 Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at leas 	licitations s a written or oral agr Form 990, Part VI t paid individuals o	eement wi I) or entity r entities	e f g th any inc / in conne (fundraise	Solicitation of no Solicitation of go Solicitation of go Special fundraising office dividual (including office ection with professional ers) pursuant to agreem	n-government grants vernment grants ng events ers, directors, trustees fundraising services? ents under which the fu	
(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity (iii) Did fundraiser hav custody or control of contributions? Yes No			(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total	· · · · · · · organization is regi		▶ licensed t	to solicit funds or has b	een notified it is exemp	t from registration or
licensing						

			(a) Event #1 MAY 10 BENEFIT	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through
			AUCTION (event type)	(event type)	(total number)	col (c))
₽	1	Gross receipts	114,650			114,650
Kevelikle	2	Less Charitable contributions	70,449	,		70,449
	3	Gross income (line 1 minus line 2)	44,201			44,201
	4	Cash prizes				
ဟ	5	Non-cash prizes				
ELISE:	6	Rent/facility costs				
Expenses	7	Food and beverages				
기rea	8	Entertainment				
2	9	Other direct expenses .	34,052			34,052
	10	Direct expense summary Add lir	ies 4 through 9 in column	(d)		(34,052)
	11	Net income summary Combine li	nes 3 and 10 ın column (d)		10,149
ar	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
<u>þ</u>			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming
<u> </u>				bingo/progressive bingo		col (c))
# # # # # #	1 (Gross revenue		bingo/progressive bingo		
		Gross revenue		bingo/progressive bingo		
	2 (bingo/progressive bingo		
- Deliber	3	Cash prizes		bingo/progressive bingo		
(benses	3	Cash prizes		bingo/progressive bingo		(Add col (a) through col (c))
Direct Expenses Keveline	2 (3) 4) 5 (Cash prizes Non-cash prizes Rent/facility costs	Г Yes		Г Yes	
cherises	2 (3) 4) 5 (6)	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	Г Yes	☐ Yes	ΓNο	col (c))
cherises	2 (3) 4) 5 (6)	Cash prizes	∑ Yes	Г Yes	No	col (c))
cherises	2 (3) 4) 5 (6)	Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor	∑ Yes	Г Yes		col (c))
	2 (3 4 5 (6) 7 8 Ente	Cash prizes	Yes No s 2 through 5 in column (bine lines 1 and 7 in column (厂 No	((c)
cherises	2	Cash prizes	Yes	<pre></pre>	No	()

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza			
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

DLN: 93493087000343 OMB No 1545-0047

Inspection

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury ► Attach to Form 990 Internal Revenue Service Name of the organization

Employer identification number

CREATIVE CAPITAL FOUNDATION							
CREATIVE CAPITAL FOUNDATION						31-1605982	
Part I General Informatio	n on Grants and	l Assistance				•	
Does the organization maintain the selection criteria used to aw	vard the grants or as	sıstance [?]			the grants or assist	ance, and	✓ Yes
2 Describe in Part IV the organiza	*		<u> </u>				
Part II Grants and Other A Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 503 Enter total number of other orga		-				_	71
		C.MCI CODICI I I					

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) INITIAL GRANT	70	963,000			
(2) FOLLOW UP SUPPORT	86	519,224			
(3) SPECIAL OPPORTUNITY	5	8,500			
(4) INFRASTRUCTURE GRANTS	46	230,000			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
	1	SCHEDULE I, PART I, LINE 2 WE MONITOR THE USE OF GRANT FUNDS THROUGH THE FUNDING REQUESTS AND
MONITORING GRANTS		FINAL REPORTS THAT WE RECEIVE FROM GRANTEES IN ADDITION, THE ORGANIZATION RECEIVES
IN THE U S		INFORMATION ON A REGULAR BASIS FROM GRANTEES REGARDING THE STATUS OF THE FUNDED PROJECTS FROM
		THE INITIAL PHASE THROUGH PREMIERE AND BEYOND

Schedule I (Form 990) 2011

Software ID: Software Version:

EIN: 31-1605982

Name: CREATIVE CAPITAL FOUNDATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETH MORRISON PROJECTS305 E 93RD ST APT 4B NEW YORK, NY 10128	20- 8422447	501(C)(3)	43,811				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
CROSS PERFORMANCE INC140 SECOND AVENUE NEW YORK, NY 10003	13- 3335670	501(C)(3)	50,788				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	` '	(d) A mount of cash grant	(e) A mount of non-cash assistance	• •	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DANCE THEATER WORKSHOP219 WEST 19TH STREET NEW YORK, NY 11232	13- 6206608	1 5017((3)(3)	95,788				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
FRACTURED ATLAS PRODUCTIONS INC248 W 35TH ST 10TH FLOOR NEW YORK, NY	11- 3451703	1 5017637	102,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HAKEAKALA INC 512 WEST 19TH STREET NEW YORK, NY 10011	13- 2803557	501(C)(3)	37,553				PERFORMING ARTISTS PROJECT FUNDING
HEADLONG DANCE THEATER1170 S BROAD ST PHILADELPHIA,PA 19146	23- 2803557	501(C)(3)	28,790				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HERE ARTS CENTER145 SIXTH AVE NEW YORK, NY 10013	13- 3449416	501(C)(3)	40,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
ON THE BOARDS100 WEST ROY ST SEATTLE, WA 98105	91- 1081983	501(C)(3)	50,788				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RUDE MECHANICALS 2211A HIDALGO ST AUSTIN,TX 78702	74- 2885150	1 5017(*)(3)	34,282		other)		PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
SPRINGBOARD FOR THE ARTS308 PRINCE ST STE 270 ST PAUL, MN 55101	41- 1690483	1 5017637	50,600				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
A CONTEMPORARY THEATRE INC700 UNION ST SEATTLE, WA 98101	91- 0787792	501(C)(3)	25,035				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
ALLIED MEDIA4126 THIRD STREET DETROIT, MI 48201	01- 0559608	501(C)(3)	44,440				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTSPORT PRODUCTIONS 6100 CANAL BLVD NEW ORLEANS, LA 70124	72- 1499547	501(C)(3)	27,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
AUTOMATA1920 N HILLHURST AVE400 LOS ANGELES,CA 90027	30- 0259101	501(C)(3)	34,282				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG TREE402 HORATIO ST 46 NEW YORK, NY 10014	13- 4200666	1 501(0)(3)	38,091				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
BRAVA2781 24TH STREET SAN FRANCISCO,CA 94110	94- 2609353	1 501(0)(3)	29,203				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CBD MUSIC INC 552 RIVERSIDE DRIVE 3H NEW YORK, NY 10027	84- 1688812	1 5017631	22,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
CENTRUMPO BOX 1158 PORT TOWNSEND, WA 98368	23- 7348302	1 5017631	37,553				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CIRCUIT NETWORK499 ALABAMA ST203 SAN FRANCISCO,CA 94110	94- 2917575	501(C)(3)	55,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
CIRCUS AMOK 190 BEDFORD AVE 213 BROOKLYN,NY 11201	11- 3485125	501(C)(3)	31,294				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
COLLAPSABLE GIRAFFE251 PACIFIC ST 25 BROOKLYN,NY 11201	11- 3279675	501(C)(3)	86,297				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
CONTRATIEMPO 1702 SOUTH HALSTED CHICAGO,IL 60608	35- 2237428	1 5017637	17,550				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONE 708 TRACTION AVE LOS ANGELES,CA 90013	95- 4493498	501(C)(3)	57,137				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
DANCING IN THE STREETS928 SIMPSON STREET 6TH FLR BRONX,NY 10459	11- 2706055	501(C)(3)	31,743				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

	-	•					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
DANSOLOGY INC 1540 SECOND AVE 501 NEW YORK, NY 10003	13- 4080133	1 5017636	53,327				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
UNIVERSITY OF CALIFORNIA-SAN DIEGOGILMAN DRMC0099 SAN DIEGO, CA 92093	95- 6006144	1 5017631	34,125				PERFORMING ARTISTS PROJECT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	 Description of	(h) Purpose of grant or assistance
EIGHT BLACKBIRD PERFORMING ARTS ASSOCIATION 5315 NCLARK ST104 CHICAGO,IL 60640	41- 2081766	1 501(()(3)	20,000			PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
FIJI THEATER COMPANYDBA PING CHONG & CO47 GREAT JONES ST 6TH FL NEW YORK, NY 10012	13- 2874863	1 5017637	31,294			PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	 Description of	(h) Purpose of grant or assistance
FUSEBOX FESTIVAL 400 BW ALPINE RD AUSTIN,TX 78704	26- 3676365	1 5017637	31,294			PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
GAMETOPHYTEINC 383 CLINTON ST1C BROOKLYN,NY 11231	01- 0632725	501(C)(3)	10,000			PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOTHAM DANCE INC 140 SECOND AVE STE 404 NEW OYORK, NY 10003	13- 3618577	501(C)(3)	43,811				PERFORMING ARTISTS PROJECT FUNDING
HARVESTWORKS OF HANS TAMMEN596 BROADWAY 602 NEW YORK, NY 10012	13- 2891159	501(C)(3)	25,500				PERFORMING ARTISTS PROJECT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEADLANDS CENTER FOR THE ARTS944 FORT BARRY SAUSALITO, CA 94965	94- 2817843	1 5017(3)(3)	38,091		,		PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THE HUMAN FUTURE DANCE CORP140 SECOND AVE STE 404 NEW YORK, NY 10003	11- 3757378	1 501(C)(3)	50,788				PERFORMING ARTISTS PROJECT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	ofcash	(e) A mount of non-cash assistance	" "	Description of	(h) Purpose of grant or assistance
INTERNATIONAL CONTEMPORARY ENSEMBLE FDN 4306 3RD AVE 4TH FLR BROOKLYN,NY 11232	13- 4192400	1 50170 773	71,803				PERFORMING ARTISTS PROJECT FUNDING
INTERNATIONAL WOW COMPANY324 WEST 71 ST NEW YORK, NY 10023	13- 3931803	1 5017 (173)	50,788				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
KHMER ARTS ACADEMY375 REDONDO AVE 156 LONG BEACH,CA 90814	01- 0740113	1 5017(3)(3)	50,788				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
LA POCHA NOSTRA2857 24TH ST SAN FRANCISCO,CA 94110	94- 3371729	1 501(0)(3)	20,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	1, ,	Description of	(h) Purpose of grant or assistance
MAPP INTERNATIONAL PRODUCTIONS140 SECOND AVE 502 NEW YORK, NY 10003	20- 4725265	1 5017(03/3)	90,053				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
MARLBORO COLLEGE2582 SOUTH ROAD MARLBORO,VT 05344	03- 0179593	501(C)(3)	40,630				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MUSIC AT THE ANTHOLOGY260 WEST BROADWAY 5 BNEW YORK, NY 10013	13- 4114492	501(C)(3)	38,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
NEW SOUNDS MUSIC (AKA PRISIM QUARTET) 257 WHARVEY ST PHILADELPHIA, PA 19144	38- 2996081	501(C)(3)	22,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
NEW YORK FOUNDATION FOR THE ARTS20 JAY ST BROOKLYN,NY 11201	23- 7129564	501(C)(3)	60,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
NEW YORK SHAKESPEARE FESTIVEALTHE PUBLIC THEATER 425 LAFAYETTE NEW YORK, NY	13- 1844852	501(C)(3)	31,743				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PAN LEFT PRODUCTIONS 631 S6TH AVE TUCSON, AZ 85701	86- 0762169	501(C)(3)	20,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
PERFORMANCE SPACE 12267 WEST ST315 BROOKLYN,NY 11222	13- 3522283	1 5017631	27,933				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
PIG IRON THEATRE COMPANY234 HARRIET ST SOUTH PORTLAND, ME 04106	13- 3874192	1 50176 1631	31,294		33.161)		PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
PILSBURY HOUSE & THEATER3501 CHICAGO AVE SOUTH MINNEAPOLIS, MN 55407	41- 0916478	1 50176363	25,394				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
POETRY IN REVIEW FOUNDATION205 W89TH STREET 8F NEW YORK, NY 10024	23- 7453274	501(C)(3)	35,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
REGGIE WILSONFIST AND HEEL PERFORMANCE GROUP476 DEAN ST2 BROOKLYN,NY	04- 3702601	501(C)(3)	57,137				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
RUSSIAN RIVERKEEPERPO BOX 1335 HEALDSBURG, CA 95448	68- 0321117	501(C)(3)	21,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
SENS PRODUCTION140 METROPOLITAN AVE3 BROOKLYN,NY 11211	11- 3603090	501(C)(3)	37,553				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	` '	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHADOWLIGHT PRODUCTIONS22 CHATTANOOGA ST SAN FRANCISCO, CA 94114	94- 3216800	1 5017631	65,053				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
SOUTHWEST CHAMBER MUSIC 638 E COLORADO BLVD SUITE 201 PASADENA, CA 91101	95- 4030386	1 501(C)(3)	37,553				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	` '	Description of	(h) Purpose of grant or assistance
ST ANN'S WAREHOUSE45 MAIN ST315 BROOKLYN,NY 11201	11- 2665242	501(C)(3)	43,811		·		PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THE CATASTROPHIC THEATRE1540 SUL ROSS HOUSTON,TX 77006	75- 3244892	501(C)(3)	28,790				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	` '	(d) A mount of cash grant	(e) A mount of non-cash assistance	` '	Description of	(h) Purpose of grant or assistance
THE EDUCATIONAL ALLIANCE14 ST Y 344 EAST 14TH STREET NEW YORK, NY 10003	13- 5562210	1 5017 (13)	42,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THE FIELD161 SIXTH AVE 14TH FLR NEW YORK, NY 10013	13- 4457408	1 5017()(3)	102,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE REBUILD FOUNDATION 6918 SDORCHESTER AVE CHICAGO,IL 60637	27- 1308845	1 5017631	10,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THE UNIVERSITY CORPORATION SF STATE UNIVERSITY1600 HOLLOWAY AVE ADM 361 SAN FRANCISCO, CA 94132	94- 1384645	1 5017631	18,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THEATER ET AL INCTHE CHOCOLATE FACTORY5-49 49TH AVE LONG ISLAND, NY 11101	13- 4038993	1 5017(1)(3)	25,035				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THEATRE MITU PO BOX 11140LD CHELSEA STATION NEW YORK, NY 10113	03- 0539644	1 501763731	53,327				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THEATRE OF YUGEN2840 MARIPOSA ST SAN FRANCISCO,CA 94110	94- 2800477	1 5017(**)	44,440		261)		PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
THIN MAN DANCE INC140 SECOND AVE 501 NEW YORK, NY 10003	13- 3922974	1 501(0)(3)	53,811				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TICKLE THE SLEEPING GIANT600 FIFTH ST BROOKLYN,NY 11215	33- 1020155	501(C)(3)	10,000				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
TOFTE LAKE CENTER2209 FERNBERG RD ELY,MN 55731	13- 4359561	501(C)(3)	27,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOUCHSTONE THEATRE321 E 4TH STREET BETHLEHEM,PA 18015	23- 2073331	501(C)(3)	31,294				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
TRI-CENTRIC FOUNDATION 1218 CORTELYOU RD 2ND FLR BROOKLYN,NY 11218	13- 3772881	501(C)(3)	33,647				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	Description of	(h) Purpose of grant or assistance
WALKER ART CENTER1750 HENNEPIN AVE MINNEAPOLIS, MN 55403	41- 0693929	1 501(0)(3)	46,500				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING
YOUNG JEAN LEE'S THEATRE COMPANY138 SOUTH OXFORD ST1D BROOKLYN,NY 11217	20- 8603288	501(C)(3)	31,294				PERFORMING ARTISTS PROJECT FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH SPEAKS INC1663 MISSION ST 604 SAN FRANCISCO,CA 94103	91- 2134499	1 5017631	37,553				PERFORMING ARTISTS PROJECT /ORGANIZATION INFRASTRUCTURE SUPPORT FUNDING

DLN: 93493087000343

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization CREATIVE CAPITAL FOUNDATION **Employer identification number**

31-1605982

Pa	rt I Questions Regarding Compensation						
				Yes	Νo		
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to pr						
	First-class or charter travel	Housing allowance or residence for personal use					
	Travel for companions	Payments for business use of personal residence					
	Γ Tax idemnification and gross-up payments Γ	Health or social club dues or initiation fees					
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes in line 1a are checked, did the organiz reimbursement orprovision of all the expenses described		1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?						
3	Indicate which, if any, of the following the organization us organization's CEO/Executive Director Check all that ap	pply					
	Compensation committee	Written employment contract					
	Independent compensation consultant	Compensation survey or study					
	Form 990 of other organizations	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990, Part \ or a related organization	/II, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-control paym	nent?	4a		Νo		
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?						
c	Participate in, or receive payment from, an equity-based	compensation arrangement?	4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and provide	the applicable amounts for each item in Part III					
	Only 501(c)(3) and 501(c)(4) organizations only must co	mulata linas 5-0					
5	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the revenues of						
а	The organization?		5a		Νo		
b	Any related organization?		5b		No		
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the net earnings of	La, did the organization pay or accrue any					
а	The organization?		6a		Νo		
b	Any related organization?		6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III						
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," described in lines 5 and 6.		7		No		
8	Were any amounts reported in Form 990, Part VII, paid o subject to the initial contract exception described in Region Part III		8		No		
9	If "Yes" to line 8, did the organization also follow the rebusection 53 $4958-6(c)$?	uttable presumption procedure described in Regulations	9				

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(i) Base compensation (ii) Bonus & incentive compensation		SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(1) RUBY LERNER	(ı) (ıı)	198,190	0		13,873	6,827	218,890	0 0
(2) FRANCES ALYSON POU	(1) (11)	144,976 0	300 0		10,169 0	6,827 0	162,272 0	0
-								

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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As Filed Data -

DLN: 93493087000343

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name	of t	he oi	rganı:	zatıo	n
CREATI	VE C	APIT A	L FOU	INDAT:	IOI

Employer identification number

31-1605982

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	IRS FORM 990 IS REVIEWED AND APPROVED BY FINANCE/INVESTMENT COMMITTEE AND BOARD BEFORE FILING. IT IS ALSO REVIEWED BY LEGAL COUNSEL FOR RECOMMENDATIONS. THE EXECUTIVE DIRECTOR/PRESIDENT SIGNS AND ENSURES IT IS FILED IN A TIMELY AND ACCURATE MANNER. THE IRS FORM 990 IS DISTRIBUTED TO THE BOARD AND THE COMMITTEE AND DISCLOSED TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE.
	FORM 990, PART VI, SECTION B, LINE 12C	ANY CONFLICT OF INTEREST IS DISCLOSED TO GOVERNING BODY AND MANAGEMENT WHO TAKE APPROPRIATE DISCIPLINE AND CORRECTIVE ACTION DIRECTORS, OFFICERS AND GOVERNING BODY MEMBERS SIGN CONFLICT INTEREST ACKNOWLEDGEMENT FORMS
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD MEMBERS REVIEW AND APPROVE OF COMPENSATION OF DIRECTORS, OFFICERS AND KEY EMPLOYEES BY TAKING INTO CONSIDERATION CASH AND NONCASH COMPENSATION, PERFORMANCE EVALUATION, EXPERIENCE, AND MARKET DATA
	FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -27,740
		THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT, ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT