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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Dep Inter	artmen nal Re	t of the Treasury venue Service	► Information about Form 990 and its instructions is at www.irs.gov/for	rm990.	Inspection
A	For	the 2013 calen	dar year, or tax year beginning , 2013, and ending		<u> </u>
В	Check	of applicable	C Name of organization Circle Cinema Foundation	D Employe	r Identification Number
	\prod_{i}	Address change	Doing Business As	05-0	527339
		lame change	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephon	e number
		nitial return	8 S. Lewis	(918) 585-3496
	П	erminated	City or town, state or province, country, and ZIP or foreign postal code		<u></u>
		mended return	Tulsa OK 74104	G Gross red	cerpts \$ 509,644.
		application pending	F Name and address of principal officer H(a) Is this a group return for	or subordinates? Yes X No
			Clark Wiens 8 South Lewis Tulsa OK 74104 H(b	Are all subordinates in If 'No,' attach a list (se	
	Tax	c-exempt status	X 501(c)(3) 501(c) () ▼ (insert no) 4947(a)(1) or 527	# 110, dilacir dilat (30	e mandedonay
J	We	ebsite: ► WW		Group exemption num	ber ►
K		m of organization	X Corporation Trust Association Other ► L Year of formation	2002 M Sta	ate of legal domicile OK
Pa	art I	Summar			
	1	Briefly describ	e the organization's mission or most significant activities See Schedule "	O"_for_Organiz	a <u>tion Mission Statement</u>
S					
nan				-	
ş ş	2	Check this bo	x If the organization discontinued its operations or disposed of more than	25% of its net ass	
ခြဲ့ဇိ	3		ting members of the governing body (Part VI, line 1a)		3 15
್ಲಿ• ರ	4		ependent voting members of the governing body (Part VI, line 1b)		4
#ie,	5		of individuals employed in calendar year 2013 (Part V, line 2a)		5
ۇز	6 7-		of volunteers (estimate if necessary)	_	6 30
ี่า∢	/a		d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, line 34	 -	7a 0.
Revenue DEC # & LUIS Activities & Governance		Net unleated	business taxable income from Form 950-1, line 34	Prior Year	Current Year
IJ	8	Contributions	and grants (Part VIII, line 1h)	86,45	
29	9		ce revenue (Part VIII, line 2g)	313,71	
	10		come (Part VIII, column (A), lines 3, 4, and 7d)	- 010,11	2.
n n	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1. 0.
<i></i>	12		 add lines 8 through 11 (must equal Part VIII, column (A), line 12) 	400,16	51. 509,644.
	13		nılar amounts paıd (Part IX, column (A), lınes 1-3)		
	14		to or for members (Part IX, column (A), line 4)		
S	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	19.	
Expenses	16 a	Professional for			
ă.	b	Total fundrais	ng expenses (Part IX, column (D), line 25) ►		
ш	17 ၙ	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)	334,37	147,383.
	18	Total expense	S Add/IndS 13-17 (must equal Part IX, column (A), line 25)	483,25	5. 147,383.
B	19	Revenue less	expenses. Subtract line 18 from line 12	-83,09	362,261.
Net Assets of Fund Balances		100		Beginning of Current	
Ass	20		200×20046)	2,834,07	
ž	21	-	(Part X, line 26) (Part X, line 26)	454,80	
			und training Subtract line 21 from line 20	2,379,26	6.
	rt III		e Block		
Comp	er penal olete D	lties of perjury, I decl eclaration of prepare	are that I have examined this return, including accompanying schedules and statements, and to the best of r ir (other than officer) is based on all information of which preparer has any knowledge	ny knowledge and belief	, it is true, correct, and
				11/17/14	
Sig	ın	Signatur	e of officer	Date	
He	re		V	olunteer Pi	ceparer
			print name and title		
1 1	1	Print/Type pr	eparer's name Preparer's signature Date	Check	if PTIN
Pa			n J. Liwack, CPA Stephen J. Liwack, CPA	self-employed	P00451041
	epar		Stephen J. Litwack, CPA		
US		Firm's addres	0000 0 1000 1000 100	Firm's EIN ►	73-1554657
•		DO 1	Tulsa OK 74135-7426		(918) 828-9807
			return with the preparer shown above? (see instructions)		X Yes No
DAV	n ro	ı ⊢aperwork K	eduction Act Notice, see the separate instructions. TEEA010	01 11/08/13	Form 990 (2013)

Form 990 (2013)

		Circle Cinema Founda		05-052	7339 Fage 2
Ra		tement of Program Service	•		
			or note to any line in this Part III		<u> </u>
1		ribe the organization's mission			
	See Sch	edule_"O"_for_Organiza	ation Mission Statement	·	-
				. – – – – – – – – – – – .	
				· 	
	Did the eres	projection undertake any significant pr	ogram services during the year which we	ro not listed on the prior	
2	_				Yes X No
		cribe these new services on Schedul			les V
3			e O. significant changes in how it conducts, ar	ov program services?	Yes X No
J	-	cribe these changes on Schedule O.	significant changes in now it conducts, ar	y program services	_ res _ ito
4	Describe the	e organization's program service acc	omplishments for each of its three largest	program services, as measured t	oy expenses.
	Section 501	(c)(3) and 501(c)(4) organizations an otal expenses, and revenue, if any, f	id section 4947(a)(1) trusts are required to	report the amount of grants and	allocations to
	· (Cada)) (Expenses \$	including grants of \$	O V/Pavanua ¢	
4 8	(Code:	· · · ·		0.)(Revenue \$_	
	Ennanci	ng community conscious	sness through film by sho	wing independent,	
			<pre>uage films that educate t torical and current event</pre>		
			The purpose of Circle Cinema		
			rsity of the human experi		
			tivities include partners	1-2	
			r nonprofit organizations		
			anization is working to r		
			n is a national historic		
				· 	
4 t	(Code) (Expenses S	including grants of \$) (Revenue \$)
				, , , , , , , , , , , , , , , , , , , ,	
4 0	: (Code) (Expenses \$	including grants of \$) (Revenue \$)
		- 			
					
					
				·	
4 0	Other progra	am services (Describe in Schedule C	0)		<u> </u>
	(Expenses	\$ include	ding grants of \$) (Revenue \$)
4 e	Total progr	am service expenses ▶			

Circle Cinema Foundation 05-0527339 Page 3 Partive Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х Х 2 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election Х 4 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 . . . Χ 5 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, 6 Χ 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 Х 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' Х complete Schedule D. Part III . 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation 9 Х 10 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, 11 or X as applicable a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule Х 11 a 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 Х 11 b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Χ 11 c 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 Χ 11 d Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X..... 11 e 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 . . . Χ 11 f Χ 12a 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 and XII is optional Х 12b Χ 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, 14b Х 15 Χ 16 Χ 16 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 (see instructions) X 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 lines 1c and 8a? If 'Yes,' complete Schedule G, Part II Х 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' X 19

20

20 b

Х

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H

Form 990 (2013) Circle Cinema Foundation

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or 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		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
1	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		
1	d Did the organization act as an 'on behalf of issuer for bonds outstanding at any time during the year?	24d		
25	a 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		Х
	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L. Part II	26	х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		, ; -27	
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
i	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Χ
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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? If 'Yes,' complete Schedule R, Part I	33		Х
	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		Х
35 :	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Χ
ı	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

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Form 990 (2013)

Form 990 (2013) Circle Cinema Foundation 05-0527339 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 2 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 \overline{X} b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2 b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?..... 3 a **b** If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O. 3 Ь 4 a 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, securities account, or other financial account)? . 4 a Х **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 $\overline{\mathsf{x}}$ 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Х **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5 c 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization X b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Х 7 a b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7 b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d Х e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?. . . 7 f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 Х as required? . 7 g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7 h X 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 8 holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? . . **b** Did the organization make a distribution to a donor, donor advisor, or related person? 9 b 10 Section 501(c)(7) organizations. Enter b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 11 a b Gross income from other sources (Do not net amounts due or paid to other sources 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . . . 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year | 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13 a Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13 b Χ

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

14b

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Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 15 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O **b** Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х Did the organization make any significant changes to its governing documents 4 X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Χ 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Χ 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 a Х 8 b Х 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 Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No Χ 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12 b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 12 c 13 Did the organization have a written whistleblower policy? 13 X 14 X 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? 15 a Χ 15 b X 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 a Χ b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?...... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20 Stephanie LaFevers 8 S. Lewis TULSA OK 74104 (918) 585-3456 BAA Form 990 (2013) TEEA0106 07/02/13

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.												
	(C)											
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other		
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations		
_(1) Stephanie LaFevers	40.00											
Executive Director					Х			31,250.	0.	0.		
(2) Beth Bovaird	2.00											
Vice President/Development		X	Щ	Х				0.	0.	0.		
_(3) Sterlin Harjo	1.00											
Programs		Х	Ш.					0.	0.	0.		
_(4)_William_JDoyle_III	_ 1 .00;											
Secretary		X		Х				0.	0.	0.		
_(5)_Clark_Wiens	20.00											
President		X	Щ	Х				0.	0.	0.		
(6) Shan Glandon	1.00											
Programs/Education		Х	Ш					0.	0.	0.		
_(7)_Michael_Wright	_2.00		:									
Director		Х						0.	0.	0.		
_(8)_Stephen_JLitwack	3.00											
Treasurer		Х	Ш	Х				0.	0.	0.		
_(9) Jay Eshelman	1.00											
Fundraising		X						0.	0.	0.		
(10) Julie Miner	_1.00							_				
Programs		X						0.	0.	0.		
(11) BK Rogers	1.00							_ [_	_		
Technology		X						0.	0.	0.		
(12) Kirk Van Valkenburgh	_1.00							_				
Programs/Markenting	0.00	X	\vdash					0.	0.	0.		
(13) Michelle Hoffman	_ 2 .00	,,								_		
Marketing\Development	1 00	Х					ļ	0.	0.	0.		
(14) Tom C. Vincent II	1.00	١,,							2	_		
Programs	<u> </u>	Х						0 <u>.</u>	0.	0.		

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	(B)			((npensated Emp		e (com	mucuj
(A) Name and title	Average hours per week	Position (do not check more that box, unless person is bo officer and a director/tn			s both or/trust	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	amou	(F) timated int of oth censatio	ner	
	(list any hours for related organiza - tions below dotted line)	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	ormer	(W-2/1099-MISC)	(W-2/1099-MISC)	orga and	om the anization f related anization	j
15) Alicia Haus Programs	1.00	Х						0.	0.			0
16) Michelle Svenson Marketing\Development	1.00	Х						0.	0.			0
17)												
18)												
19)												
20)												
21)												
22)												
23)												
24)												
25)												
1 b Sub-total								31,250.	0.			0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)							ived	31, 250. I more than \$100,0	0. 000 of reportable cor	npensat	ion	0
3 Did the organization list any former officer, director, on line 1a? If 'Yes,' complete Schedule J for such indi										3	Yes	No
4 For any individual listed on line 1a, is the sum of report the organization and related organizations greater that such individual	an \$150,0	2000	If 'Y	'es' (com	olete	Sch	nedule J for		. 4	tine !	X
5 Did any person listed on line 1a receive or accrue cor for services rendered to the organization? If 'Yes,' coi	npensati	on fr	om a	any (unre	lated	org	anization or individ	lual	. 5		X
Section B. Independent Contractors												
Complete this table for your five highest compensated compensation from the organization. Report compensation.	a indepersation for	the	cale	ndar	r yea	rnat ar end	ding	with or within the	organization's tax ye			
(A) Name and business addres	s							(B) Description o		Compe	C) nsatio	n
Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not lim	nited	to th	ose	liste	d ab	ove)) who received moi	re than	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ŗ	

•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
2 5	1 a	Federated campaigns	. 1a					
	b	Membership dues	. 1b	44,026.				
5 2	C	Fundraising events	. 1 c					
4R .	d	Related organizations	. 1 d					
, 를	е	Government grants (contributions) .	. 1 e					
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, grants, an similar amounts not included above. Noncash contributions included in lines	· <u>[1f</u>	337300.				
3 Z	h	Total. Add lines 1a-1f			79,926.			
当				Business Code	7,7,7,2,0,1			
KEN	2 a	Theatre Operations		711110	429,716.	429,716.	0.	0.
2	b							
일	С							
8	d	_ 						
S	е							
8	f	All other program service reven						
읽	g	Total. Add lines 2a-2f			429,716.			
	3	Investment income (including diother similar amounts)	ıvıdends,	interest and	2.	2.	0.	0.
}	4	Income from investment of tax-	exempt b	ond proceeds				
	5	Royalties						
		(ı) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of (i) S	Secunties	(II) Other				
		assets other than inventory Less: cost or other basis						:
		and sales expenses Gain or (loss)						
		Net gain or (loss)						
핔		Gross income from fundraising (not including. \$						
		of contributions reported on line	1c)					
2		See Part IV, line 18		a				
OTHER REVENUE	h	Less: direct expenses		Ď				
히		Net income or (loss) from fundra				-		
		Gross income from gaming actives Part IV, line 19	vities					-
		Less direct expenses						
		Net income or (loss) from gamir	-	ES				
		Gross sales of inventory, less reand allowances						
		Less cost of goods sold		b				
	С	Net income or (loss) from sales	of invent	, - : 				
ļ	4.6	Miscellaneous Revenue		Business Code				
	11 a b	Theatre Operations		711110	0.	0.	0.	0.
	C							
		All other revenue						
	е	Total. Add lines 11a-11d			0.			1

509,644.

429,718.

0.

0.

Form	1990(2013) Circle Cinema Founda	tion		05-052	7339 Page 10
Par	t IX Statement of Functional Expens				
	tion 501(c)(3) and 501(c)(4) organizations must co		ther organizations must	complete column (A)	
	Check if Schedule O contains a res	sponse or note to any line	e in this Part IX		
	not include amounts reported on lines 7b, 8b, 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 in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16			,	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salanes and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
t	Legal				
c	Accounting				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
-	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	147,383.	· · · · · · · · · · · · · · · · · · ·		
23	Insurance		·		
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses				

Office expenses			
Information technology			
Royalties			
Occupancy			
Travel			
Payments of travel or entertainment expenses for any federal, state, or local public officials			
Conferences, conventions, and meetings			
Interest			
Payments to affiliates			<u> </u>
Depreciation, depletion, and amortization	147,383.		
Insurance			
Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)			
Equipment Rental			
Projection Supplies			·
Film_Purchase			
Film Rental			
All other expenses			
Total functional expenses. Add lines 1 through 24e	147,383.		· <u>-</u>
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)			
	TEEA0110 11/	08/13	 Form 990 (2013)

 Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X. (A) (B) End of year Beginning of year 26,977 2 2 3 3 141,358 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L. 6 7 8 10. 9 10 a 10 b 10 c 2,655,376 11 11 investments - other securities See Part IV, line 11 12 12 Investments – program-related See Part IV, line 11 13 13 14 14 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 2,834,072 0. 17 17 23,684 18 Grants payable....... 18 Deferred revenue 19 19 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees. 22 key employees, highest compensated employees, and disqualified persons 200,000 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 231 122 Other liabilities (including federal income tax, payables to related third parties, 25 and other liabilities not included on lines 17-24) Complete Part X of Schedule D . . . 25 Total liabilities. Add lines 17 through 25 <u>454,80</u>6 26 0 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets....... 27 1,000,727 28 28 1,378,539 29 29 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 2,379,266 33 34 2,834,072 34 0. BAA

Form	1990 (2013) Circle Cinema Foundation	<u>5-05</u> 27339		Pa	ige 12						
Par	t XI Reconciliation of Net Assets						_				
	Check if Schedule O contains a response or note to any line in this Part XI			• • •			. [X]				
1	Total revenue (must equal Part VIII, column (A), line 12)		1		5(9,6	544.				
2	Total expenses (must equal Part IX, column (A), line 25)		2	_	14	17,3	383.				
3	Revenue less expenses. Subtract line 2 from line 1		3		36	52,2	261.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4		2,37	79,2	266.				
5	5 Net unrealized gains (losses) on investments										
6 Donated services and use of facilities											
7	Investment expenses		7								
8	Prior period adjustments		8								
9	Other changes in net assets or fund balances (explain in Schedule O)		9								
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,										
D	column (B))		10		2,74	11,5	<u>527.</u>				
Par	t XII Financial Statements and Reporting						_				
	Check if Schedule O contains a response or note to any line in this Part XII						· 📗				
				_		Yes	No				
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			[
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.											
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?				2 a		Х				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a		Ī							
	Separate basis Consolidated basis Both consolidated and separate basis			1							
b	Were the organization's financial statements audited by an independent accountant?				2 b		X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	Э									
	basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis										
				-							
c If 'Yes' to line 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											
3 a 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?											
b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requi										
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u> </u>	<u></u>	<u> </u>	3 b						
BAA					Form !	990 (2013)				

TEEA0112 07/08/13

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2013

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2013

	le Cinema Found				_				52733		
Part I			(All organizations				oart.) S	See inst	ruction	ıs.	
The org	anization is not a private		, -		•	•					
1	≕		tion of churches describ		ction 17	'0(b)(1)(<i>i</i>	۹)(i).				
2	A school described in	section 170(b)(1)(A)(ii). (Attach Schedule E.))							
3	A hospital or a cooper	ative hospital service of	organization described ii	n sectio r	170(b)	(1)(A)(iii).				
4	A medical research or	ganization operated in	conjunction with a hosp	oital desc	ribed in	section	170(b)(1)(A)(iii)	Enter th	ne hospital's	,
	name, city, and state.					E. T. T. T					
5 [⊒ 170(b)(1)(A)(iv). (Coi	mplete Part II)	college or university ow					tai unit d	escribed	In section	
6	_	•	rnmental unit described		•		•	41			
7	ল section 170(b)(1)(৴	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8 _	A community trust des	scribed in section 170	(b)(1)(A)(vi). (Complete	Part II.)							
9 [An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)										
10	An organization organ	ized and operated exc	lusively to test for public	safety S	See sec	tion 509	(a)(4).	•			
11	→ more publicly supporte	ed organizations descr	lusively for the benefit o ibed in section 509(a)(1 n and complete lines 11) or section	on 509(a	functions a)(2). Se	of, or o	arry out on 509(a)	the purp (3). Che	oses of one eck the box t	or :hat
	a ∏Type I b	Type II c	Type III - Function	ally integ	rated		a 🔲 .	Type III -	- Non-fu	inctionally in	itegrated
e			zation is not controlled on an one or more publicly								
f	If the organization recicheck this box	eived a written determi	nation from the IRS that	tıs a Typ	e I, Typ	e II or Ty	pe III su	ipporting	organiz	ation,	
g	Since August 17, 2006	6, has the organization	accepted any gift or co	ntributioi	n from a	ny of the	followin	ng persor	ns?		
											Yes No
			trols, either alone or togo orted organization?							. 11 g (i)	
	(ii) A family membe	r of a person describe	d ın (ı) above?							. 11 g (ii)	
	(iii) A 35% controlled	d entity of a person de	scribed in (i) or (ii) above	е [?]						· 11 g (iii)	
h			upported organization(s							1	
	(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(iv) Is organiza column (i) your gov docur	ation in listed in verning	(v) Did yo the organi column (i) supp	zation in of your	(vi) Is organiza colum organized U S	ation in in (i) d in the		t of monetary port
				Yes	No	Yes	No	Yes	No		
(A)											
/B\		:									
(B)				+							
(C)				ļ							
(D)											
(E)											
Total											

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

05-0527339

Part II Support Schedule for Organizations Described in Sections 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.) Section A. Public Support Calendar year (or fiscal year (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants') 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 3 . . The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2012 (a) 2009 (b) 2010 (c) 2011 (e) 2013 (f) Total beginning in) > Amounts from line 4 . . . Gross income from interest, dividends, payments received on securities loans, rents. royalties and income from similar sources Net income from unrelated business activities, 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 7 through 10 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here......... Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2012 Schedule A, Part II, line 14 15 % 16a 33-1/3% support test - 2013. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization b 33-1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . .

05-0527339

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

<u>Sec</u>	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions and membership fees						
	received. (Do not include		05 055	00.054	06 353		410 175
2	any 'unusùal grants.') Gross receipts from admis-	134,485.	95,975.	92,954.	86,75 <u>7</u> .		410,171.
2	sions, merchandise sold or						
	services performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose	312,388.	340,206.	306,683.	313,428.		1,272,705.
3	Gross receipts from activities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	, , , , , , , , , , , , , , , , , , , ,		
	that are not an unrelated trade or business under section 513						
А	Tax revenues levied for the						
•	organization's benefit and						
	either paid to or expended on						
5	Its behalf						
•	facilities furnished by a			1			
	governmental unit to the organization without charge						
c	Total. Add lines 1 through 5	446 072	426 101	200 627	400 105		1 602 076
	Amounts included on lines 1,	446,873.	436,181.	399,637.	400,185.		1,682,876.
, a	2, and 3 received from						
	disqualified persons						
b	Amounts included on lines 2						į
	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						•
_	Add lines 7a and 7b						
			-				
8	Public support (Subtract line 7c from line 6.)			٠ - ي - ي - ي			1,682,876.
500	tion B. Total Support			ا ردا		_ `	1 1,002,070.
		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	dar year (or fiscal yr beginning in)				`/-	(e) 2013	
_	Amounts from line 6	446,873.	436,181.	399,637.	400,185.		1,682,876.
IVa	dividends, payments received						
	on securities loans, rents,						
	royalties and income from similar sources	598.	6.	8.	1.		613.
b	Unrelated business taxable	330.		· ·			013.
	income (less section 511						
	taxes) from businesses acquired after June 30, 1975				-		
С	Add lines 10a and 10b	598.	6.	8.	1.		613.
	Net income from unrelated business	330.		· · ·			013.
	activities not included in line 10b,						
	whether or not the business is regularly carried on			•			
12	Other income. Do not include						
	gain or loss from the sale of						
	čapital assets (Explain in Part IV.)						
13	Total Support. (Add Ins 9,10c, 11 and 12)	447,471.	436,187.	399,645.	400,186.		1,683,489.
	• • • • • • • • • • • • • • • • • • • •					on 501(c)(3)	
	First five years. If the Form 990 is organization, check this box and s	top here					
Sec	tion C. Computation of Pu						_
15	Public support percentage for 2013	3 (line 8, column (f	divided by line 13	, column (f))		1	5 99.96 %
16	Public support percentage from 20	12 Schedule A, Pa	ırt III, line 15		<u></u>	1	6 99.97 %
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	•			
17	Investment income percentage for	2013 (line 10c, co	lumn (f) divided by	line 13, column (f))	1	7 0.04 %
18	Investment income percentage fro	·			•		8 0.03 %
	33-1/3% support tests - 2013. If					<u></u>	
	is not more than 33-1/3%, check the	nis box and stop h	ere. The organizat	ion qualifies as a p	oublicly supported o	rganization	
b	33-1/3% support tests - 2012. If	the organization di	d not check a box	on line 14 or line 1	9a, and line 16 is r	nore than 33-1	/3%, and
	line 18 is not more than 33-1/3%, of	check this box and	stop here. The or	ganızatıon qualifie:	s as a publicly supp	orted organiza	ation ▶ 🔲
20	Private foundation. If the organization	ation did not check	a box on line 14,	19a, or 19b, check	this box and see in	structions	▶ 🗍

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

2013

Department of the Treasury Internal Revenue Service

Name of the organization

Open to Public

OMB No 1545-0047

Cir	rcle Cinema Foundation				05-0527339	
D 2	Organizations Maintaining Dono	r Advised Funds or O	ther Similar Fun	ds or Acc		.
[F-QI	Complete if the organization answer	ered 'Yes' to Form 990,	Part IV, line 6.	40 01 7101	oounto.	
		(a) Donor advised	d funds	(b) F	unds and other acco	ounts
1	Total number at end of year	(a) Donor davicos	- Turido	(5) !	dias and other acce	
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)		-			· · · · · - · · ·
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor a	advicers in writing that the co	aata bald in danar adi	used funds		
•	are the organization's property, subject to the org	anızatıon's exclusive legal co	ntrol?	<i></i>	L., I	No
	Did the organization inform all grantees, donors, a for charitable purposes and not for the benefit of timpermissible private benefit?	the donor or donor advisor, o	for any other purpos	e conferring		No
Par	t il Conservation Easements. Complete if the organization answe	ered 'Yes' to Form 990,	Part IV, line 7.			
1						
	Preservation of land for public use (e.g., recre	,	<u> </u>	an historical	ly important land are	а
	Protection of natural habitat	,	Preservation of a		•	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization is	neld a qualified conservation	contribution in the form	n of a conse	ervation easement or	n the
	last day of the tax year	•				
				F	leld at the End of th	ne Tax Year
	Total number of conservation easements					
ŀ	Total acreage restricted by conservation easemer	nts		2 b		
•	Number of conservation easements on a certified	historic structure included in	(a)	2 c		
(Number of conservation easements included in (c structure listed in the National Register	c) acquired after 8/17/06, and	not on a historic	2 d		
3	Number of conservation easements modified, trar tax year ►	nsferred, released, extinguish	ed, or terminated by t	he organiza	tion during the	
4	Number of states where property subject to conse	ervation easement is located	>			
5	Does the organization have a written policy regard and enforcement of the conservation easements is					No
6	Staff and volunteer hours devoted to monitoring, i				L	ليا
7	Amount of expenses incurred in monitoring, insper ►\$	ecting, and enforcing conserve	ation easements durin	ng the year		
8	Does each conservation easement reported on lin and section 170(h)(4)(B)(ii)?			70(h)(4)(B)(ı) 	No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote to the conservation easements.	conservation easements in i e organization's financial state	ts revenue and expen ements that describes	ise statemer the organiz	nt, and balance shee cation's accounting fo	t, and or
Dož	conservation easements. োল্লি Organizations Maintaining Collec	tions of Art Historics	Treasures or 6	Other Sim	nilar Assots	
rai	Complete if the organization answe	red 'Yes' to Form 990,	Part IV, line 8.		mai Assets.	
1 a	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its financial s	ld for public exhibition, educa	tion, or research in fu	ement and t rtherance of	balance sheet works f public service, provi	of ide,
t	of the organization elected, as permitted under SF historical treasures, or other similar assets held fo following amounts relating to these items	AS 116 (ASC 958), to report or public exhibition, education	in its revenue stateme , or research in furthe	ent and bala rance of pub	nce sheet works of a blic service, provide t	ırt, :he
	(i) Revenues included in Form 990, Part VIII, line	e 1			▶\$	
	(ii) Assets included in Form 990, Part X				•	
2	If the organization received or held works of art, h amounts required to be reported under SFAS 116	istorical treasures, or other si	milar assets for financ			
a	Revenues included in Form 990, Part VIII, line 1				. ▶\$	
b	Assets included in Form 990, Part X				. ▶s	

Part III Organizations Maintaining Colle	ections of Art, Hist	orical Treasures, or	r Other Similar Ass	ets (continued)
Using the organization's acquisition, accession, items (check all that apply)	and other records, check	any of the following that a	are a significant use of its	s collection
a Public exhibition	d Loan	or exchange programs		
b Scholarly research	e Othe	r		
c Preservation for future generations	_			
4 Provide a description of the organization's collect Part XIII.	tions and explain how th	ey further the organization	n's exempt purpose in	
During the year, did the organization solicit or re to be sold to raise funds rather than to be maintain.	nned as part of the organ	nization's collection?		Yes No
Part IV Escrow and Custodial Arranger line 9, or reported an amount on F	nents. Complete if form 990, Part X, lir	the organization ansvi ne 21.	wered 'Yes' to Form	990, Part IV,
1 a Is the organization an agent, trustee, custodian, on Form 990, Part X? b If 'Yes,' explain the arrangement in Part XIII and				Yes No
bit tes, explain the attangement in Fart Alli and	complete the lollowing to	able		Amount
c Beginning balance			. 1c	Allount
d Additions during the year				
e Distributions during the year				
f Ending balance				
2 a Did the organization include an amount on Form				Yes No
b If 'Yes,' explain the arrangement in Part XIII Che	eck here if the explantion	has been provided in Par	t XIII	
Part V Endowment Funds. Complete if	the organization ans	swered 'Yes' to Form	990, Part IV, line 1	
(a) Current				(e) Four years back
1 a Beginning of year balance	·		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses			_	
g End of year balance				
2 Provide the estimated percentage of the current	year end balance (line 1	g, column (a)) held as		
a Board designated or quasi-endowment				
b Permanent endowment ► %	i			
c Temporarily restricted endowment	 %			
The percentages in lines 2a, 2b, and 2c should e	equal 100%.			
3 a Are there endowment funds not in the possession organization by:	n of the organization tha	t are held and administere	ed for the	Yes No
(i) unrelated organizations				. 3a(i)
(ii) related organizations				. 3a(ii)
b If 'Yes' to 3a(ii), are the related organizations list	ed as required on Sched	lule R?		. 3b
4 Describe in Part XIII the intended uses of the org	ganization's endowment	funds.		
Part VI Land, Buildings, and Equipmen Complete if the organization answ		990, Part IV, line 11a	. See Form 990, Pa	ırt X, line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		, , ,		
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e. (Column (d) must equa	al Form 990, Part X, colu	ımn (B), lıne 10(c).)	>	
BAA	 _	<u> </u>	Sched	ule D (Form 990) 2013

Part VII' Investments — Other Securities. Complete if the organization answered	'Yes' to Form 990 F	Part IV line 11b See Form 990 F	Part X line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-or	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)	1		
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12) . ▶			
Part VIII Investments - Program Related.		2-st 1/ line 44- Cas Farm 000 F	ant V. line 40
Complete if the organization answered ' (a) Description of investment type	Yes to Form 990, F	;	
	(b) Book value	(c) Method of valuation Cost or end-	oi-year market value
	1		
(2)	 	· · · · · · · · · · · · · · · · · · ·	
(3)			
(4)			
(5)	_		
(6)			
(7)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) . ▶			
Part IX Other Assets.		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered '	'Yes' to Form 990, F escription	Part IV, line 11d. See Form 990, F	
(a) De	escription		(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	-		
	lmo 15 \		
Total. (Column (b) must equal Form 990, Part X, column (B),	iine 15.)		
Other Liabilities. Complete if the organization answered 'Yes' to F	form 990 Part IV line 1	1e or 11f. See Form 990 Part X line 25	
(a) Description of liability	(b) Book value	10 01 1111 000 1 01111 000, 1 011 1/1, 1110 20	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)		 	
(7)		 	
(8)		 	
(10)			
(11)		 	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	•		
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fool		ancial statements that reports the organization's liah	pility for uncertain
tax positions under FIN 48 (ASC 740) Check here if the text of the footnote	-	· · · · · · · · · · · · · · · · · · ·	· –

Schedule **D** (Form 990) 2013

BAA

Schedule D	(Form 990) 2013	Circle Cinem	a Foundation			05-0527339	Page 5
Part XIII	Supplementa	Circle Cinem	ntinued)				
							-
							
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TEEA3305 07/01/13

Schedule **D** (Form 990) 2013

BAA

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

at www.irs.gov/form990.

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

► Information about Schedule L (Form 990 or 990-EZ) and its instructions is

Open to Public Inspection

Name of the organization Circle Cinema Foundation Employer identification number 05-0527339

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b Part I

(a) Name of disquali	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Cor	rrected?	
		person and organization		Yes	No	
(1)						
(2)			·			
(3)						
(4)						
(5)						
(6)				1		

Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990-EZ, Page V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	organization of loan from		(d) Loan to or from the organization?		(f) Balance due	e due (g) in default?		? (h) Approved by board or committee?		(I) Wri agreen	(I) Written igreement?	
			То	From			Yes	No	Yes	No	Yes	No	
(1) Clark Wiens	President	Working Capital	Х	-	200,000.	244,087.		Х	Х		Х		
(2)													
(3)													
(4)													
(5)						-							
(6)						**							
(7)					·								
(8)					•								
(9)										-			
(10)													
Total						244,087.							

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)			·	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990 or 990-EZ) 2013

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
		organization			Yes	No	
(1)			···-				
(2)							
(3)							
(4)							
(5)						<u> </u>	
(6)							
(7) (8)							
(9)							
(10)		-				-	
Part '	V Supplemental Information	· · · · · · · · · · · · · · · · · · ·			 		
	Provide additional information for re	esponses to questions on Sche	dule L (see instructions	s).			
	-						
						-	
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					 _		
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					-		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer Identification number

05-0527339 Circle Cinema Foundation Pt VI, Line 12c Form 990, Part VI, Section B, Line 12C: Board members and staff are to complete a disclosure statement annually and if/when their circumstances change. If conflict is disclosed, it will then be reviewed by the board at _____the following meeting. Pt VI, Line 15b Form 990 Part VI, section B, Line 15: The organizations's board of directiors determines salary of its executive director by reviewing current market trends from comparable organizations. There are no other ____compenstated_officers,_directors_of_key_employees.____ Pt VI, Line 19 Form 990, Part VI, Section C, Line 19: The organization makes its ____ governing documents, conflict of interest policy and financial statements ____available to the public in writing upon request.____ Pt VI, Line 19 Per the Above Pt VI, Line 19 Copies of the Form 990 are provided to all Board Members for their review and ___comments and suggestions. Pt XI Line #5 Increase In Capital Pledges during the Year Pt VI, Line 11b After filing, the Form 990 is reviewed by the Board of Directors Pt VI, Line 11b and the Form 990 is reviewed by the President or Treasurer before filing. Pt_XI _____ Accrual to Cash_Adjustment ______ PT VI-B, Line 11-A See Above ______ Pt VI-A, Line 10 Form 990, Part IV, Section A, Line 10: The organization's form 990 is reviewed by the board of directors, and reviewed and signed by Clark ____ Wiens, the President, before filing. Continued The following questions are not applicable to the organization: Part IV: Question 5 and 24B-24D 8, Questions 3B, 5C, 6B, 7B, 9A-9B, 10A-10B, 11A-11B.

Schedule 0 (Form 990 or 990-EZ) 2013	Page 2
Name of the organization Circle Cinema Foundation	Employer identification number 05-0527339
127_120	
Part VI, Section A: Question 9E	3
Part VI, Section B: Question 20	C_and_3B
Part_XI, 2C and 3B	
Continued	
Circle Cinema Fact Sheet:	
Tulsa's Non-profit fine arts film o	rganization, offering Educating, Enlighening,
and Entertaining experiences for	or Audiences of all Ages.
Films presented in association	with high school curriculum-i.e. history,
social_studies,_language,_and_c	geography.
Partnership with Journeys in Fi	lm Intergrated Program
cross-cultural_understanding_ar	nd global education for middle-school
age children through films from	around the world.
Partnership with public and pri	vates_schools, including_higher
education institutions in the T	'ulsa area Partners in Education
program_with_Tulsa_Public_School	ols
Films created by filmaking class	ses and young filmmakers.
Films promoting an understandir	ng_of_cultural_diversity
Films with ties to Oklahoma his	tory, events and people.
Films promoting an understanding	og_of_current,_historical,
and_historical, and worldwide e	events.
Quality_independent_films_not_a	vailable_at_any_other
local theatre.	
Documentaries.	
Foreign_language_films_and_film	n_clubs.
Classic_movies, "Midnight Movie	es,"_cartoons_and_family_films
Host to film festivals.	

Schedule Q (Form 990 or 990	0-EZ) 2013	Page 2
Name of the organization Circle Cinema Fou	ndation	Employer identification number 05-0527339
CITCIE CINEMA FOU	ndacton	100 0327333
	Locally produced and directed films, often the	first_to
	premiere local films.	
	Partnerships with other local non-profit organiz	zations to
	present films addressing specific issues of impos	ortance
	to their audiences.	
	Rental facility for local clubs, organizations,	businesses,
	hold meetins, workshops, and film events.	
	Venue for local visual artists to exhibit their	works.
Pt_I,_Line_1	Form 990, Part I, Line 1, description of Organiz	ation Mission Statement.
	Experience and create community among the viewer	rs in the historic
	_Circle_CinemaProgram_activities_include_parts	nerships_and
	collaborations with other nonprofit organization	ns to use film
	as a teaching tool. Additionally, the organizat	tion is working to
	refurbish and to expand the historic movie theat	re
		
		
		·

Supporting Statement of:

Sch. A, page 3/Gifts, Grants, Fees Amt.-1

Description	Amount
Gifts, Grants, Contributions	118,710.
Membersghip Fees	15,775.
Total	134.485

Additional Information For Tax Return

Circle Cinema Foundation					05	-052	7339	
Form 990 p 1: Preparer Name				_		- —		
Preparer is a nonnaid volunteer								

Form **4562**

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2013

Attachment Sequence No 179 ► See separate instructions. ► Attach to your tax return. identifying number Circle Cinema Foundation
Business or activity to which this form relates 05-0527339

Foi	cm 990 / Form 990E								
Pa	rt I Election To Exp	ense Certain	Property Under Secondlete Part V before yo	ction 179 u complete Part I					
1	Maximum amount (see instru	. 1							
2	Total cost of section 179 pro	. 2	!						
3	Threshold cost of section 17	. 3							
4	Reduction in limitation. Subtr	. 4							
5	Dollar limitation for tax year						_ ا		
	separately, see instructions.	Description of property		(b) Cost (business		(c) Elected cos)	
6	(a) ¹								
		•	<u> </u>					╡	
7	Listed property. Enter the arr	nount from line 29			. 7			┥ ,	
8		Listed property Enter the amount from line 29							
9	Tentative deduction. Enter the smaller of line 5 or line 8							•	
10	Carryover of disallowed dedu	. 10							
11	Business income limitation.		•	•	•	•	_		
12	Section 179 expense deduct	. 12	!						
13	Carryover of disallowed dedu : Do not use Part II or Part III				P 13			<u> </u>	
		•							
Pai	rt II Special Deprecia	ation Allowan	ce and Other Depr	eciation (Do no	ot include li	sted property)	(See	instructions)	
14							۱.,	27 (01	
4-	tax year (see instructions) .	-							
15		. 15							
	Other depreciation (including						. 16	<u> </u>	
rai	tili WACKS Deprec	iation (Do not ii	nclude listed property) (S Sectio						
17	MACRS deductions for asset	to placed in conic					. 17	103,436.	
		-					'-''	103,430.	
18	If you are electing to group a asset accounts, check here.						Ì		
			in Service During 2013				Syst	em	
(a)		(b) Month and	(C) Basis for depreciation	(d)	(e)	(f)		(g) Depreciation	
	Classification of property	year placed in service	(business/investment use only — see instructions)	Recovery period	Convention	n Method		deduction	
19 a	3-year property								
b 5-year property									
c 7-year property			37,680.	7.0 yrs	HY	200 I)B	5,383.	
d 10-year property									
•	15-year property								
f	20-year property								
	25-year property			25 yrs		S/L			
ł	n Residential rental			27.5 yrs	MM			<u> </u>	
	property			27.5 yrs	MM	S/L			
i	Nonresidential real	12/13	742,784.	39 yrs	MM	S/L		794.	
	property		<u> </u>		MM	S/L			
		Assets Placed in	Service During 2013 Ta	ax Year Using th	e Alternati			stem	
20 a	Class life		<u> </u>			S/L			
	12-year			12 yrs 40 yrs	MM	S/L S/L			
	40-year		<u> </u>						
	rt IV Summary (See ins				 				
21	Listed property Enter amour						21	89.	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions							147,383.	
	The second of the same about a made	l placed in control	during the current year.	ontor [T		
23	For assets shown above and the portion of the basis attrib				23]		

Kai	recreation Note: For	Property (Indon, or amusemer or any vehicle for	nt) r which vou are	e using th	e standa	rd milea	ae rate d	r dedu	ctına leas				•	4b,		
		(a) through (c) on A — Depreciat								mite for r	22220	r autom	obiles \			
24:							X Yes		$\overline{}$					X Yes	No	
	24 a Do you have evidence to support the business/investmer (a) Type of property (list vehicles first) Date placed in service Business/investment use percentage		(d) Cost or other basis		(e) Basis for depreciation (business/investment use only)		ation	No 24b If Yes, (f) Recovery period		(g) Method/ Convention		(h) Depreciation deduction		(i) Elected section 179 cost		
25		ation allowance	for qualified lis											1 .		
26		50% in a qualifi				s) <u>.</u>	<u></u>	•••	· · · · ·	<u></u> .	25			1		
	26 Property used more than 50% in a qualified bus 1890-Equipment: Satellite System 05/01/09 100.00				2,000. 1,000.			00.	7.00 200 DB-MO				89			
	- ·					 				- 				+		
27	Property used 5	0% or less in a c	qualified busin	ess use:												
						<u> </u>										
		 	 			 										
28	Add amounts in	actume (b) trace	25 through 2	7 Ester b		on line 2	11				28		89	-		
29	Add amounts in Add amounts in		_								للتتا					
	rios anioanto in	00141111 (1), 11110 1	<u>Enter Here</u>	Section							<u> </u>	<u> </u>		.		
Com to yo	plete this section our employees, fir	for vehicles use st answer the qu	ed by a sole pro lestions in Sec	oprietor, p	artner, o	r other 'r u meet a	more tha	in 5% o	wner,' or completir	related p	person. If	you pro	ovided ve ehicles.	hicles		
30	Total business/investment miles driven during the year (do not include			Vehi	(a) Vehicle 1				(c) 'ehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31	commuting miles)								<u> </u>							
32	Total commuting miles driven during the year Total other personal (noncommuting)					_		 		<u> </u>						
-	•		•	·												
33	Total miles drive															
	ines 30 unougn	1 32		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
34	Was the vehicle available for personal use during off-duty hours?															
35	Was the vehicle used primarily by a more than 5% owner or related person?															
36	36 Is another vehicle available for personal use?						Ì									
		Section (C - Question	s for Emp	•					•						
Ansv	ver these question	ns to determine i	if you meet an	exception	n to comp	oleting S	ection E	for vet	nicles use	ed by em	ployees	who are	not moi	e than		
		'												Yes	No	
37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?									163	140					
38	Do you maintain employees? See	a written policy the instructions	statement that for vehicles u	t prohibits ised by co	persona prporate o	l use of officers,	vehicles directors	, excep s, or 1%	t commu or more	ting, by y owners	our · · · · ·					
39	Do you treat all															
40	Do you provide vehicles, and re	more than five ve tain the informati	ehicles to your ion received?.	employe	es, obtair	ınform:	ation fro	m your	employe	es about	the use	of the				
41	Do you meet the Note : If your an	e requirements of swer to 37, 38, 3	oncerning qua	lified auto 'Yes,' do	mobile d	emonstr olete Se	ation us	e? (Secorthe o	e instruct covered v	ons). ehicles					<u> </u>	
Par	t'VI's Amorti	ization				_										
	(a) Description of costs		(b) Date amortization begins		(c) Amortizable amount		le	(d) Code section		Amor per	(e) Amortization period or percentage		(f) Amortization for this year			
42	Amortization of	costs that begins	s during your 2	2013 tax y	ear (see	ınstructı	ons)						·			
				2046:					<u> </u>			T.	<u></u>			
43 44	Amortization of Total. Add amo	•								43						
	I VIGIT AUG AITIC	June III CORRINIT	.,. 000 1110 1110		WINGIC	· ·o · upo	· · · · ·	<u> </u>	<u> </u>	<u> </u>						