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DLN: 93493131011856

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 private foundations)

 \blacktriangleright Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015				
		applicable	C Name of organization CREATIVE CENTER OF LOS ALTOS		D Employ	/er ider	ntification number
Ad	dress c	hange			94-15	27497	2
ГΝа	me cha	ange	Doing business as				
┌ Inı	tıal reti	um	PINEWOOD AND OAKWOOD SCHOOL		E Telepho	ne num	her
Fir	al (Number and street (or P O box if mail is not delivered to street address) Room/suit 327 FREMONT AVENUE	e			
		rmınated			(650)	209-3	030
		return	City or town, state or province, country, and ZIP or foreign postal code LOS ALTOS, CA 940244861		G Gross re	eceints ¢	31,865,861
J Ap	plicatio	n pending	,		2 01033 10	.ccipto p	
			F Name and address of principal officer		Is this a group	return	for
			SCOTT RICHES 327 FREMONT AVENUE		subordinates?		┌ Yes 🗸 No
			LOS ALTOS,CA 940244861	H(b)	Are all subordıı	nates	┌ Yes ┌ No
			<u> </u>		ıncluded?		
I Ta	x-exer	mpt status	▼ 501(c)(3)		If "No," attach	a lıst	(see instructions)
J W	ebsit	e:► WV	WW PINEWOOD EDU	H(c)	Group exempti	on nur	mber ►
K For	m of o	rganızatıor	Corporation Trust Association Other ►	L Yea	r of formation 196	52 M	State of legal domicile CA
	rt I		nmary				
	1	Briefly d	lescribe the organization's mission or most significant activities				
	-		NDENT SCHOOLS SERVING GRADES K-12 WITH APPROXIMATELY :	1032 S	TUDENTS		
3							_
€							
E .	,	Check t	his box 🛏 if the organization discontinued its operations or disposed of	more t	han 25% of its	net as	sets
Governance	-	oneen e	ins box F If the organization discontinued its operations of disposed of		11411 23 70 01 113	net us	
25 25	3	Number	of voting members of the governing body (Part VI, line 1a)			3	5
Activities &	4	Number	of independent voting members of the governing body (Part VI, line 1b)			4	0
星	5	Total nu	mber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	296
ទ្ធ	6	Total nu	mber of volunteers (estimate if necessary)			6	250
_	7a	Total un	related business revenue from Part VIII, column (C), line 12			7a	0
	b	Net unre	elated business taxable income from Form 990-T, line 34			7b	0
					Prior Year		Current Year
-	8	Contr	ibutions and grants (Part VIII, line 1h)		2,436,5	22	5,932,848
를	9	Progr	am service revenue (Part VIII, line 2g)		23,143,2	98	24,140,020
Revenue	10	Inves	tment income (Part VIII, column (A), lines 3, 4, and 7d)		1,594,9	28	1,618,974
立	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		95,6	77	75,586
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		27,270,4	125	31,767,428
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		2,802,1		2,860,772
	14		its paid to or for members (Part IX, column (A), line 4)		2,002,1	0	0
	15		es, other compensation, employee benefits (Part IX, column (A), lines				
\$	-	5-10			13,027,0	50	14,235,013
92 35	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)			0	151,836
Expenses	Ь	Total fu	undraising expenses (Part IX, column (D), line 25) ▶304,522				
ш	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,076,5	44	9,082,191
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		23,905,7		26,329,812
	19		nue less expenses Subtract line 18 from line 12		3,364,7		5,437,616
₹ 60 30 00				+	inning of Currer	-+	· · · · · · · · · · · · · · · · · · ·
Not Assets or Fund Balances					Year	\perp	End of Year
1,55 1,55 1,55 1,55 1,55 1,55 1,55 1,55	20		assets (Part X, line 16)		85,175,0	96	90,115,816
38	21	Total	liabilities (Part X, line 26)		30,698,2	91	30,966,305
ZZ.	22	Neta	ssets or fund balances Subtract line 21 from line 20		54,476,8	0.5	59,149,511
Pa	rt II	Sigr	nature Block				
my k	nowle	dge and	perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete $$ Declaration of preparer (other than				
prepa	arer h 	as any k 	nowledge				
		***			2016-05-05		
Sign		S Ign	ature of officer		Date		
Her	е		TT RICHES PRESIDENT/DIRECTOR				
		<u> </u>	e or print name and title	to	 	DTIN	
ъ.	_1		Print/Type preparer's name Preparer's signature Da LAWRENCE S KUECHLER LAWRENCE S KUECHLER 20	te 16-05-05	Check If self-employed	PTIN P00233	3621
Pai			Firm's name ARMANINO LLP		Firm's EIN F 94	-621484	41
	pare		Firm's address ► 50 W SAN FERNANDO ST STE 500		Phone no (408)	200-64	100
US	On	ily				_00 04	- - -
			SAN JOSE, CA 95113		Ī		

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Form	1990 (2014)				Page 2
Par	t IIII Statement of P Check if Schedule		ccomplishments or note to any line in this Part II	I	্ন
1	Briefly describe the organ	nization's mission			
INTE THE THA	ELLECTUAL MATURITY, S SKILLS NECESSARY FOR	ELF-ESTEEM, AND A F SUCCESS IN SCHOO	L ENVIRONMENT WHEREBY STAIGH STANDARD OF BEHAVIOL AND BEYOND THROUGH A SG, WRITING, COMPUTATION,	R OUR GOAL IS TO PROVIE TRONG COLLEGE PREPARAT	DE STUDENTS WITH ORY CURRICULUM
2	the prior Form 990 or 990)-EZ?		which were not listed on	┌ Yes ┌ No
_	If "Yes," describe these n			4	
3	services?		ignificant changes in how it con	ducts, any program	┌ Yes ┌ No
4	Describe the organization	's program service acco (3) and 501(c)(4) orga	omplishments for each of its thre nizations are required to report to program service reported		
4a	,		,465,324 including grants of \$ GH SCHOOL, WITH APPROXIMATELY 1,03	2,860,772) (Revenue \$ 32 STUDENTS	24,140,020)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other program services	(Describe in Schedule ())		
u	(Expenses \$	including	grants of \$) (Revenue \$)
4e	Total program service ex	penses ► 23,	165,324		

Part IV	Checkli	st of	Required	Schedules

			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		N o
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 "Yes," complete Schedule C, Part II</i>	4		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	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	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	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	Yes	
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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? If "Yes," complete Schedule D, Parts XI and XII	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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
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, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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 (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "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 hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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, 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	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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person 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	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 "Yes," complete Schedule L, Part II	26	Yes	
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		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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 direct or indirect owner? If "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	Yes	
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	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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 11b and 19?	30	Yes	

Form 990 (2014)

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
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 46			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	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)?	4a		Νo
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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)			
12a	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			
13	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. See the instructions for additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		.,,

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

Check if Schedule O	contains a resi	nonce or note t	o any li	ing in this B	art VI						V
Check ii Schedule O	Contains a resi	י שנווטע שבווטע	o ally II	1116 III (1115 F	aitvi						., .

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 officer, director, trustee, or key employee?	2	Yes	
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 filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
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	Yes	
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
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	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 this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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		15a	Yes	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a 15b	Yes Yes	
	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			
b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official			No
b 16a	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b		No
b 16a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b 16a		No
b 16a b	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15b 16a		No

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply ☐ Own website. ☐ Another's website. ☐ Upon request. ☐ Other (explain in Schedule O)

- 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 during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►SHARON WHITE BOOKKEEPER

327 FREMONT AVENUE LOS ALTOS, CA 940244861 (650) 209-3030

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 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
- 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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	offic	ess er	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
(1) SCOTT RICHES PRESIDENT	65 00	х		х				264,600	0	25,660
(2) LAURA BLOTTER CURRICULUM COORDINATOR K-6	40 00	Х		х				78,882	0	0
(3) DENNIS RICHES FINANCE OFFICER	20 00	Х						46,000	0	0
(4) KATHLEEN PICKETT CURRICULUM DIRECTOR K-12	25 00	Х						52,000	0	1,800
(5) L VICTOR RICHES JR FACILITIES DIRECTOR	20 00	Х						46,000	0	0
(6) MICHELLE HELVEY OAKWOOD, HEAD OF SCHOOL	65 00			х				215,338	0	29,149
(7) MARK GARDNER PINEWOOD PRINCIPAL 7-12	55 00					х		128,996	0	12,288
(8) PATRICIA CRONE OAKWOOD PRINCIPAL 6-12	55 00					х		139,595	0	11,873
(9) MATTHEW STIMSON PINEWOOD ATHLETIC DIRECTOR	40 00					х		104,128	0	10,718
(10) ELAINA TYSON TEACHER	40 00					х		102,802	0	11,235
(11) LAURIE EICKMEIER CURRICULUM DIRECTOR 7-12	40 00					×		102,690	0	14,536

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persor and a	ion (nan o n is b	ne b oth	oox, an d	unless officer	:	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	_	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	-			
c	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	►	1,281,031	0	117,259

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►7

			Yes	No	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such				
	ındıvıdual	4	Yes		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		No	

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation		
CODY ANDERSON WASNEY 455 LAMBERT AVE PALO ALTO, CA 94306	ARCHITECT	480,029		
HINES BUILDING MAINTENANCE 91 LOST LAKE LANE CAMPBELL, CA 95008	MAINTENANCE	322,630		
WHALEY LEVAY 6 RINCON POINT LANE CARPINTERIA, CA 930133137	FUNDRAISING	153,437		
2. Total number of independent contractors (including but not limited to				

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►3

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue	2a b c d e f g 3 4 5
3evenue	3 4 5 6a b c d 7a b c d 8a
Other	b c 9a b c 10a
	11a b c d
	١.,

Form 99		· ·						Page 9
Part V	/	Statement o Check if Schedu	o f Revenue ule O contains a respons	se or note to any lir	ne in this Part VIII			
			·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
~ £	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b					
Gifts, Grants ilar Amounts	С	Fundraising eve	ents 1c	246,108				
iffs ar 4	d	Related organiz	zations 1d					
°, ⊞	e	Government grants	s (contributions) 1e					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	5,686,740				
ontrib nd Otl	g h	Noncash contribute 1a-1f \$ Total. Add lines	ons included in lines	249,850	5,932,848			
<u>ت =</u>	-"	Total. Add filles	5 1 4 - 11	•	3,332,010			
a E	2a	TUITION AND FEES	_	Business Code	22 007 209	22 007 200		
ever	b	OTHER PROGRAM		611600 611600	23,997,308	23,997,308 142,712		
ē.		- THEN TROOKS IT		011000	172,712	172,712		
7. 2.	d	-	_					
å ⊆	e							
Program Serwoe Revenue	f	All other progra	am service revenue					
Š	g	Total. Add lines	L s 2a-2f		24,140,020			
	3		ome (ıncludıng dıvıdend		890,236			890,236
	4		ar amounts) street to a contract to a	F	890,230			890,230
	5	Royalties	· · · · · · · · ·	▶				
			(ı) Real	(II) Personal				
	6a	Gross rents	7,000					
	Ь	Less rental expenses	0					
	C	Rental income or (loss)	7,000					
	d	Net rental inco	me or (loss)	· · ·	7,000			7,000
	7a	Gross amount	(ı) Securities	(II) O ther				
	'a	from sales of assets other than inventory	728,738					
	ь	Less cost or other basis and	0					
	c	sales expenses Gain or (loss)	728,738					
	d		ss)		728,738			728,738
Other Revenue	8a	of contributions	luding ,108 s reported on line 1c)					
er Re		See Part IV, lin	a	167,019				
동	b c		penses b (loss) from fundraising e	98,433	68,586			68,586
-		Gross income f	rom gaming activities le 19	Veints 1 1 p	,			,
			a					
	b c		penses b (loss) from gaming activ	ıtıes				
	10a	Gross sales of returns and allo	inventory, less					
		recurris and and	a					
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inve					
	11-	Miscellaneous	s Revenue	Business Code				
	11a b							
	c							
	d	All other reven	ue					
	e		s 11a-11d	🕨				
	12	Total revenue.	See Instructions					
	I		- ·	-1	31,767,428	24,140,020	0	1,694,560

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (A)
--	-------	-----

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,860,772	2,860,772		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	782,615	503,074	279,541	
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 salaries and wages	11,287,448	10,794,223	376,713	116,512
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	259,715	259,715		•
9	Other employee benefits	1,084,902	1,084,902		
10	Payroll taxes	820,333	820,333		
11	Fees for services (non-employees)	,	,		
а	Management				
b	Legal	36,671		36,671	
-	Accounting	90,784		90,784	
d	Lobbying	30,701		30,701	
e	Professional fundraising services See Part IV, line 17	151,836			151,836
f	Investment management fees	150,112		150,112	131,030
g g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	489,253	145,432	,	
12	Advertising and promotion	78,499	•	78,499	
13	Office expenses	267,397	192,213		284
14	Information technology	114,632	581	114,051	
15	Royalties	2,889	331	2,889	
16	Occupancy	3,160,910	3,066,430	 	6,073
17	Travel	139,632	85,212	54,420	0,073
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	133,032	03,212	31,120	
19	Conferences, conventions, and meetings				
20	Interest	253,243	245,753	7,090	400
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,511,512	1,466,718	42,322	2,472
23	Insurance	226,842		226,842	•
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	SCHOOL SUPPLIES	1,231,902	1,119,130	112,772	
b	CONTINUING EDUCATION/SE	515,701	515,397	304	
c	MISCELLANEOUS	235,046	418	234,628	
d	STUDENT ACTIVITIES	151,725	104,181	47,544	
e	All other expenses	425,441	200,840	197,656	26,945
25	Total functional expenses. Add lines 1 through 24e	26,329,812	23,465,324	 	304,522
26	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)	,,	,,	,,	

Part X Balance Sheet

Ра	rt X	Check if Schedule O contains a response or note to any line in	thıs P	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			6,958,653	1	6,349,267
	2	Savings and temporary cash investments			408,372	2	490,142
	3	Pledges and grants receivable, net			3,117,431	3	6,398,669
	4	Accounts receivable, net			224,397	4	199,490
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	art II	of	524,317	5	459,006
its	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contri mploy	buting employers	· · · · · · · · · · · · · · · · · · ·	6	439,006
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			117,014		80,050
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		59,511,030	·		<u> </u>
	ь	Less accumulated depreciation	10b	11,540,569	44,268,624	10c	47,970,461
	11	Investments—publicly traded securities	·		16,359,071	11	16,968,988
	12	Investments—other securities See Part IV, line 11			12,081,180	12	10,094,528
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets			541,250	14	481,100
	15	Other assets See Part IV, line 11			574,787	15	624,115
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			85,175,096	16	90,115,816
	17	Accounts payable and accrued expenses			1,426,418	17	1,977,376
	18	Grants payable				18	
	19	Deferred revenue			4,396,872	19	4,863,929
	20	Tax-exempt bond liabilities			24,875,001	20	24,125,000
φ.	21	Escrow or custodial account liability Complete Part IV of Sch	edule	D		21	
Liabilitie	22	Loans and other payables to current and former officers, direckey employees, highest compensated employees, and disqual	tors, tı				
æ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partic	es .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa D		25			
	26	Total liabilities. Add lines 17 through 25			30,698,291	26	30,966,305
٠ د	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			30,030,231	20	
ğ	27	Unrestricted net assets			49,389,397	27	50,386,663
<u>8</u>	28	Temporarily restricted net assets			5,087,408		8,762,848
= =	29	Permanently restricted net assets				29	
· Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check I complete lines 30 through 34.					
ō	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
45 S	32	Retained earnings, endowment, accumulated income, or other				32	
7 ★	33	Total net assets or fund balances			54,476,805		59,149,511
Net	34	Total liabilities and net assets/fund balances			85,175,096		90,115,816
	1	i otal nabilities and net assets/juna balances	<u> </u>	• •	1 00,170,090		90,115,616

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		31,	767,428
2	Total expenses (must equal Part IX, column (A), line 25)	2		26,	329,812
3	Revenue less expenses Subtract line 2 from line 1	3		5,4	437,616
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			476,805
5	Net unrealized gains (losses) on investments	5		-	
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			149,511
Par	t XII Financial Statements and Reporting	10			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
3a	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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

Open to Public Inspection

CREATIVE CENTER OF LOS ALTOS				Employer Identifica	ation number							
					94-1527492							
Pa	rt I	Reason for Publi	c Charity S	tatus (All organiza	itions must co	mplete this j	part.) See instruction	ons.				
The	organı	zation is not a private f	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)					
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).					
2	<u>~</u>	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)							
3	Γ	A hospital or a cooper	atıve hospıtal	service organization of	described in sec	tion 170(b)(1)(A)(iii).					
4	Γ	A medical research or hospital's name, city,		erated in conjunction v	vith a hospital c	lescribed in se	ction 170(b)(1)(A)(iii	i). Enter the				
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit describ							escribed in					
		section 170(b)(1)(A)	(iv). (Complet	e Part II)								
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in s e	ection 170(b)(1)(A)(v).					
7	_	An organization that n described in section 1	•		• •	om a governm	ental unit or from the q	general public				
8		A community trust de										
9	Γ	An organization that n	ormally receiv	es (1) more than 331	1/3% of its supp	ort from contr	butions, membership	fees, and gross				
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions,	and (2) no more than 3	331/3% of				
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses				
		acquired by the organ	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)					
10	Γ	An organization organ	ized and opera	ited exclusively to tes	t for public safe	ty See sectio	n 509(a)(4).					
11	Γ	An organization organ										
		one or more publicly s										
а	Г	the box in lines 11a th Type I. A supporting of										
_	'	supported organizatio										
	_	organization You mus										
b	ı	Type II. A supporting	=	•			• ' ' '	•				
		management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C.										
c	Г	Type III functionally	•		n operated in c	onnection with	, and functionally inte	grated with, its				
	•	supported organizatio	_					,				
d	Γ	Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is										
			not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement									
(see instructions) You must complete Part IV, Sections A and D, and Part e Check this box if the organization received a written determination from th						saTvneI TvneII T	vne III functionally					
•	'	integrated, or Type II					.s a 1, pc 1, 1, pc 11, 1	, pe III lancelonan,				
f		Enter the number of s	upported organ	nizations								
g		Provide the following i	nformation abo	out the supported orga	inization(s)							
	(i)N	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of				
		organization	(1)	organization (described on lines 1-9 above or IRC section (see	listed in your docume	governing	monetary support (see instructions)	other support (see instructions)				
				ınstructions))		_	†					
					Yes	No						

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	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)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organization instructions	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 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) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 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 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 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 section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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 more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

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

DLN: 93493131011856

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Inspection

ne of the organization ATIVE CENTER OF LOS ALTOS		Employer identification number
MITTE CENTER OF LOS METOS		94-1527492
Tt I Organizations Maintaining Donor Ad		
organization answered "Yes" to Form 99	- 	
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor advi funds are the organization's property, subject to the		or advised Yes No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit?		
t III Conservation Easements. Complete	<u>if the organization answered "Yes" to</u>	o Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	n or education)	historically important land area certified historic structure
Complete lines 2a through 2d if the organization held	a qualified conservation contribution in t	he form of a conservation
easement on the last day of the tax year	Г	Held at the End of the Year
Total number of conservation easements	ľ	2a
Total acreage restricted by conservation easements	ŀ	2b
Number of conservation easements on a certified his	toric structure included in (a)	2c
Number of conservation easements included in (c) as historic structure listed in the National Register	` '	2d
Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by the organization during
the tax year 🛌	, , ,	, ,
·		
Number of states where property subject to conserva		
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of violations, and Yes No
Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conservation easen	nents during the year
A mount of expenses incurred in monitoring, inspectings	ng, and enforcing conservation easements	s during the year
Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion 170(h)(4)(B)(i)
In Part XIII, describe how the organization reports c balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financial	
Organizations Maintaining Collection Complete if the organization answered '		or Other Similar Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar asservice, provide, in Part XIII, the text of the footnote	sets held for public exhibition, education,	or research in furtherance of public
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar asservice, provide the following amounts relating to the	sets held for public exhibition, education,	
(i) Revenue 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, histofollowing amounts required to be reported under SFA		or financial gain, provide the
Revenue included in Form 990, Part VIII, line 1		▶ \$
Assets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining Collections of	Art, His	tori	cal Tr	easu	ires, or Oth	<u>er S</u>	<u>imilar As</u>	sets (continued)
3	Using the organization's acquisition, accession, and other recollection items (check all that apply)	records, cl	neck	any of t	the fol	lowing that are	a sıg	nıfıcant use	of its	
а	Public exhibition	d	Γ	Loan	orexc	hange progran	าร			
b	Scholarly research e Other									
C	Preservation for future generations									
4	Provide a description of the organization's collections and ε Part XIII	explain ho	w the	y furthe	er the	organızatıon's	exem	pt purpose ı	n	
5	During the year, did the organization solicit or receive dona assets to be sold to raise funds rather than to be maintaine						ımılar		Yes	□ No
Par	t IV Escrow and Custodial Arrangements. Co Part IV, line 9, or reported an amount on Forr	mplete ıf	the	organ	ızatıo		'Yes"			110
1a	Is the organization an agent, trustee, custodian or other int included on Form 990, Part X?					or other asset	s not		Yes	
b	If "Yes," explain the arrangement in Part XIII and complete	e the follov	ving	able						
								An	ount	
С	Beginning balance					10	:			
d	Additions during the year					10	4			
е	Distributions during the year					16	1			
f	Ending balance					1f				
2a	Did the organization include an amount on Form 990, Part X	X, line 21,	for e	scrowc	rcust	odıal account	lıabılı	ty?	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIII Check here	ıf the expl	anatı	on has	been ¡	provided in Pai	t XIII			Γ
Pai	TTV Endowment Funds. Complete if the organiz	ation ans	wer	ed "Ye	s" to	Form 990, P	art I\	/, line 10.		
	(a)Current yea	ar (b) Prior	year	b (c) ⊺	wo years back (1) Thre	e years back	(e)Four	years back
1a	Beginning of year balance									
b	Contributions									
С	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 b	alance (lır	ie 1g	, colum	n (a))	held as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment ►									
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c should equal 100%	⁄o								
За	Are there endowment funds not in the possession of the org	ganızatıon	that	are hel	danda	administered fo	r the			
	organization by								Yes	s No
	(i) unrelated organizations		•		•			3a(3a(
ь	(ii) related organizations		Che	 اعلیا 2			•	<u> 3a(</u> 3b		
4	Describe in Part XIII the intended uses of the organization	•			•		•		<u> </u>	
Par	t VI Land, Buildings, and Equipment. Complet 11a. See Form 990, Part X, line 10.				n ans	wered 'Yes' t	o For	m 990, Pa	rt IV,	line
	Description of property			Cost or		(b)Cost or othe basis (other)) Accumulated depreciation	(d) E	Book value
1a l	_and		1			11,344,80	9		+	11,344,809
	Buildings					37,738,30	_	6,866,513	3	30,871,790
	_easehold improvements					3,700,50	+	1,558,918	+	2,141,590
	Equipment					311,98	+	207,072	+	104,914
	Other					6,415,42	_	2,908,066	+	3,507,358
	I. Add lines 1a through 1e (Column (d) must equal Form 990,		ımn (B), line	10(c).					47,970,461
		·						Schedule D	(Form	

See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		- Control of your manner tande
(2)Closely-held equity interests (3)Other	-	
(A) INVESTMENT IN PARTNERSHIPS	5,400,640	F
(B) REAL ESTATE INVESTMENTS	3,758,908	F
(C) REAL ESTATE PARTNERSHIP	934,980	С
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	10,094,528	
Part VIII Investments—Program Related. Co	<u>'</u>	answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990,	Part IV, line 11d See Form 990, Part X, line 15
(a) Descri		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. Complete if the orga Form 990, Part X, line 25.		Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	the text of the footnote to the	

ADJUSTMENTS

ADJUSTMENTS

PART XII, LINE 4B - OTHER

Par		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line :		nts With	n Revenue p	oer R	Return Complete If
1		r support per audited financial statements				1	28,174,830
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12					
а	Net unrealized gains (losses)	on investments	2a				
b	Donated services and use of fa	acilities	2b			1	
c	Recoveries of prior year grants	5	2c				
d	Other (Describe in Part XIII)		2d		33,084		
e	Add lines 2a through 2d .					2e	33,084
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	28,141,746
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a				
b	Other (Describe in Part XIII)		4b		3,625,682		
C	Add lines 4a and 4b					4c	3,625,682
5		l 4c. (This must equal Form 990, Part I, line				5	31,767,428
Part		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, line			h Expenses	s per	Return. Complete
1	Total expenses and losses per	audited financial statements				1	23,502,124
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25					
а	Donated services and use of fa	acılıtıes	2a				
b	Prior year adjustments		2b				
C	Otherlosses		2c				
d	Other (Describe in Part XIII)		2d		33,084		
e	Add lines 2a through 2d					2e	33,084
3	Subtract line ${f 2e}$ from line ${f 1}$.					3	23,469,040
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:					
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)		4b		2,860,772	1	
C	Add lines 4a and 4b					4c	2,860,772
5		nd 4c. (This must equal Form 990, Part I, lir	ne 18)			5	26,329,812
Part	XIII Supplemental Inf	ormation					
Part		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and					de any additional
	Return Reference	Explanation					
PART	X, LINE 2	THE SCHOOL HAS EVALUATED ITS CU AS OF JUNE 30, 2015, THE SCHOOL DO POSITIONS FOR WHICH A RESERVE W	DESNO	THAVE	ANY SIGNIFI		
	XI, LINE 2D - OTHER STMENTS	EXPENSES RELATED TO FUNDRAISE E	VENTS	33,084			
	XI, LINE 4B - OTHER STMENTS	SCHOLARSHIPS AND FINANCIAL AID	2,860,	772 UNR	EALIZED LOS	SS 764	4,910
PART	XII, LINE 2D - OTHER	EXPENSES RELATED TO FUNDRAISE E	VENTS	33,084	<u></u>		

SCHOLARSHIPS AND FINANCIAL AID 2,860,772

ouncare by (1 orm 550) 2015			
Part XIII Supplemental Information	on (continued)		
Return Reference	Explanation		
l			
-			

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493131011856

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization **Employer identification number** CREATIVE CENTER OF LOS ALTOS 94-1527492 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to Νo a Students' rights or privileges? 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? No_ 5g h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Νo h Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable Also provide any other additional information (see instructions)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	THE ORGANIZATION ANNUALLY PUBLISHES ITS RACIALLY NON- DISCRIMINATION POLICY IN THE SAN FRANCISCO CHRONICLE ALONG WITH OTHER INDEPENDENT SCHOOLS WHO ARE PART OF ISBOA THE POLICY IS ALSO LISTED ON THE ADMISSIONS SECTION OF THE ORGANIZATION'S WEBSITE AND THE POLICY IS DISTRIBUTED THROUGH ADMISSIONS AND PROMOTIONAL MATERIAL SUCH AS SCHOOL BROCHURES THE POLICY IS ALSO LISTED IN THE PARENT/STUDENT HANDBOOK, AS WELL AS THE EMPLOYEE HANDBOOK AND COMMUNICATED AS PART OF THE EMPLOYMENT APPLICATION

Schedule E (Form 990 or 990-EZ) (2014)

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DLN: 93493131011856

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization	N. T.O.C				Employer iden	tification number
CREATIVE CENTER OF LOS	ALIOS				94-1527492	
Part I Fundraising Act	tivities. Complete ured to complete the		janızatıo	on answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ
1 Indicate whether the orga	anızatıon raısed funds	through a	ny of the 1	following activities Che	ck all that apply	
a 🔽 Mail solicitations			е	Solicitation of non-	government grants	
b 🔽 Internet and email so	olicitations		f	Solicitation of gove	ernment grants	
c Phone solicitations d V In-person solicitatio	ns		g	Special fundraising	g events	
2a Did the organization have or key employees listed in	e a written or oral agre n Form 990, Part VII	ement with) or entity	n any indi in connec	vidual (including officers ction with professional fu	s, directors, trustees indraising services?	Γ _{Yes} Γ N
b If "Yes," list the ten high to be compensated at lea			fundraıse	rs) pursuant to agreeme	nts under which the fur	ndraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1 WHALEY LEVAY 6 RINCON POINT LANE CARPINTERIA, CA	CAPITAL CAMPAIGN	Yes	No No	3,500,000	151,836	3,348,164
93013						
3						
4						
5						
6						
7						
8						
9						
10						
Total			>	3,500,000	151,836	3,348,164
3 List all states in which th registration or licensing	e organization is regis	tered or lı	censed to	o solicit contributions or	has been notified it is	exempt from
CA						

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
			(a) Event #1 AUCTION 2015 (event type)	(b) Event #2 ONLINE AUCTION (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))
Φ.	_	_	270,207			413,127
Revenue	1 2	Gross receipts Less Contributions				
₩ Đ	3	Gross income (line 1 minus line 2)	190,924 79,283			246,108 167,019
	4	Cash prizes	·			·
رب د	5	Noncash prizes				
Expenses	6	Rent/facility costs	9,275	5		9,275
<u>8</u>	7	Food and beverages .	15,994	1		15,994
Direct -	8	Entertainment	595	5		595
占	9	Other direct expenses .	39,486	24,056	9,027	72,569
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(98,433)
	11	68,586				
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	L
Revenue		\$15,000 on Form 990-EZ, lır	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes% ┌ No	┌ Yes		
	7	Direct expense summary Add lines	s 2 through 5 ın column (d)	•	
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)		
9 a b	Ist	er the state(s) in which the organizathe organization licensed to conduct	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming l Yes," explain	icenses revoked, susper	nded or terminated during		

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3					
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity							
	formed to administer charitable gaming	,,		Г _{Yes} Г	— No					
13	Indicate the percentage of gaming acti		1 1	,						
а	The organization's facility		13a		%					
b	An outside facility				%					
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records							
	Name ▶									
	Address ►									
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming							
154				┌ Yes 「	– _{No}					
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the							
c	If "Yes," enter name and address of the third party									
	Name 🟲									
	Address 🏲									
16	Gaming manager information									
	Name •									
	Gaming manager compensation 🕨 \$		······							
	Description of services provided									
	Director/officer	_ Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to							
	retain the state gaming license?	retain the state gaming license?								
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent							
	ın the organization's own exempt activi		·							
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr							
	Return Reference		Explanation							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493131011856 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number CREATIVE CENTER OF LOS ALTOS 94-1527492 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Enter total number of other organizations listed in the line 1 table

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated 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) SCHOLARSHIPS	253	2,860,772			

Part IV Supplemental I	nformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
PART I, LINE 2	THE SCHOLARSHIPS ARE AWARDED IN THE FORM OF A TUITION REDUCTION AND ARE MONITORED THROUGH THE TUITION PAYABLE SYSTEM

Schedule I (Form 990) 2014

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DLN: 93493131011856

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Compensation Information

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

Open to Public Inspection

Name of the organization CREATIVE CENTER OF LOS ALTOS **Employer identification number**

94-1527492

Pai	rt I Questions Regarding Compensati	ion					
	_				Yes	No	
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part 1		ny of the following to or for a person listed in Form ide any relevant information regarding these items				
	First-class or charter travel	<u> - </u>	Housing allowance or residence for personal use				
	Travel for companions	Γ	Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees				
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes		
2	Did the organization require substantiation prior to			2	Yes		
	directors, trustees, officers, filtrading the CLO/LX	rustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all used by a related organization to establish compe	I that apply					
	Compensation committee	굣	Written employment contract				
	☐ Independent compensation consultant	굣	Compensation survey or study				
	Form 990 of other organizations	고	Approval by the board or compensation committee				
4	During the year, did any person listed in Form 990 or a related organization	0, Part VII	, Section A , line 1a with respect to the filing organization $% \left(1\right) =\left(1\right) \left(1\right$				
а	Receive a severance payment or change-of-contr	rol paymen	t?	4a		Νo	
b	Participate in, or receive payment from, a supplen	mental non	qualified retirement plan?	4b		Νo	
c	Participate in, or receive payment from, an equity	-based co	mpensation arrangement?	4c		Νo	
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e applicable amounts for each item in Part III				
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organic	izations mu	ıst complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any				
а	The organization?			5a		Νo	
b	Any related organization?			5b		Νo	
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any				
а	The organization?			6a		No	
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 payments not described in lines 5 and 6? If "Yes,			7		No	
8	Were any amounts reported in Form 990, Part VII	I, paid or a	ccured pursuant to a contract that was				
		d ın Regula	tions section 53 4958-4(a)(3)? If "Yes," describe				
	ın Part III			8		No	
9	If "Yes" to line 8, did the organization also follows section 53 4958-6(c)?	the rebutta	able presumption procedure described in Regulations	9			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown o (i) Base compensation	f W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column(B) reported as deferred in prior Form 990	
4 CCOTT DICHEC	-	264.600	33.11.	componed to				1 01111 3 3 0	
1 SCOTT RICHES,	(i) (ii)	264,600	0	0	13,059	12,601	290,260	0	
PRESIDENT									
	` 1	O	0	0	0	0	0	0	
2 MICHELLE HELVEY,	(i)	215,338	0	0	11,544	17,605	244,487	0	
OAKWOOD, HEAD OF SCHOOL									
	(ii) 0 0		0	0	0	0	0		
3 PATRICIA CRONE,	(i)	139,595	0	0	6,989	4,884	151,468	0	
OAKWOOD PRINCIPAL 6-12	(ii)		l			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	101,100	l I	
		0	0	0	0	0	0	0	

Schedule J (Form 990) 2014

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	FOR THE CONVENIENCE OF THE SCHOOL AND IN FULFILLMENT OF HIS RESPONSIBILITIES, THE PRESIDENT IS REQUIRED TO OCCUPY
	SCHOOL-OWNED HOUSING AS A CONDITION OF HIS EMPLOYMENT

Schedule J (Form 990) 2014

52-1598225

130911SA9

DLN: 93493131011856

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

BANK

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

08-27-2003

Inspection Employer identification number

Χ

Χ

Χ

CREATIVE CENTER OF LOS ALTOS 94-1527492 Part I Bond Issues (f) Description of purpose (g) Defeased (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No CALIFORNIA 63-0304653 13033WW82 11-20-2008 13,500,000 CAPITAL IMPROV TO Х Χ Х INFRASTRUCTURE AND CAMPUS AND LAND ACQUISITION ECONOMIC DEVELOPMENT

Part II **Proceeds**

COMMUNITIES DEVELOPMENT

CALIFORNIA STATEWIDE

		A	В	С	D
1	A mount of bonds retired				
2	A mount of bonds legally defeased				
3	Total proceeds of issue	13,500,000	14,100,000		
4	Gross proceeds in reserve funds				
5	Capitalized interest from proceeds				
6	Proceeds in refunding escrows				
7	Issuance costs from proceeds	270,000	568,327		
8	Credit enhancement from proceeds				
9	Working capital expenditures from proceeds	184,839			
10	Capital expenditures from proceeds	13,045,161	14,100,000		
11	Other spent proceeds				
12	Other unspent proceeds				
13	Year of substantial completion	2009	2006		

13	,	20	0 9	20	00				
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		Х		Х				
15	Were the bonds issued as part of an advance refunding issue?		х		х				
16	Has the final allocation of proceeds been made?	Х		Х					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х		Х					

Part IIII Private Business Use

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×				
_	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				

14,100,000 TO FINANCE EDUCATIONAL

COSTS

FACILITIES, BOND INTEREST

COST, AND ISSUANCE

Par	Private Business Use (Continued)									
				Ą		B		<u> </u>		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private busi of bond-financed property?		Х			X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or othe outside counsel to review any management or service contracts relating to the property?			х						
С	Are there any research agreements that may result in private business use of bond-financed property?			х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government			3 370 %				•		1
5	Enter the percentage of financed property used in a private business use as a runrelated trade or business activity carried on by your organization, another se 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5			3 370 %						
7	Does the bond issue meet the private security or payment test?			X		Х				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disp	osed of				•		•		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?			х		×				
Par	rt IV Arbitrage									
		Α	_		В		С		D	
	<u> </u>	Yes	No	Yes	No	\	'es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X					
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?	Х		Х						
b	Exception to rebate?		Х		Х					
c	No rebate due?		Х		Х					
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed		•	.	•	,	•			
3	Is the bond issue a variable rate issue?	Х		Х						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х					
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
е	Was the hedge terminated?									

-	tiv Arbitrage (Continueu)								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		×		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?		×		Х				

Part V Procedures To Undertake Corrective Action

	A		В		С		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		Х		X				

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Schedule K (Form 990) 2014

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

DLN: 93493131011856

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons ► Complete if the organization answered

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Complete	Benefit Tr	ansactions zation answere erson (b) F	ed "Yes" o Relationsh		Part IV, line lisqualified		(c)(29) r Form	orgar 990-l	Z, Part	V, line	40b (d) Corr Yes	ected No
Complete	e if the organi:	zation answere	ed "Yes" o Relationsh	n Form 990, ıp between d	Part IV, line lisqualified	25a or 25b, o	r Form	990-E	Z, Part	V, line	(d) Corr	
			Relationsh	ıp between d	lisqualified						(d) Corr	
1 (a) Name of	disqualified p	erson (b) F		•		(c) Desc	ription	of trar	nsaction	1 _	` 	
			person	and organiza	tion						Yes	No
Enter the amount of the second							ne year • .	under 	section \$ \$	n 		
				2 n to the	(e) Original principal amount	(f) Balance due	(g) defa	In	(h) Appro) ved rd or	(i)Wrı agreem	tten
			То	From			Yes	No	Yes	No	Yes	No
DENNIS BOAR CHES D LV CHES JR	RD MEMBER	BUSINESS LOAN		X	950,000	459,006		Νo	Yes		Yes	

Complete if the organization	n answered "Yes" on I	Form 990, Part IV, lin	ne 28a, 28b, or 28c.			
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) SARAH RICHES	SPOUSE OF SCOTT RICHES	56,697	COMPENSATION		No	
(2) EDWARD HELVEY	SPOUSE OF MICHELLE HELVEY	85,773	COMPENSATION		No	
(3) HEATHER MCCAULEY	DAUGHTER OF KATHLEEN PICKETT	46,846	COMPENSATION		No	

	Supplemental Intermetion
Part V	Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493131011856

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

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

Name of the organization CREATIVE CENTER OF LOS ALTOS **Employer identification number**

94-1527492

Pa	Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	nts
1	Art—Works of art			-				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	X	5	75,926	FMV			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	Other►(X	300	173,924				
	CTION ITEMS)	-						
	Other ► ()							
	O ther ► () O ther ► ()							
	Number of Forms 8283 received by th		uan during the tay year for	contributions	1			
29	for which the organization completed F				9			0
		,					Yes	No
30a	During the year, did the organization	receive by	contribution any property r	reported in Part I, lines 1	through 28, that			
	it must hold for at least three years fr							
	for exempt purposes for the entire ho					30a		Νo
Ь	If "Yes," describe the arrangement in							
31	Does the organization have a gift acc		licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
32a	Does the organization hire or use thir	d parties oi	related organizations to s	olicit, process, or sell no	ncash			
	contributions?					32a		No
h	If "Yes," describe in Part II							
	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047

DLN: 93493131011856

Inspection

Name of the organization CREATIVE CENTER OF LOS ALTOS	Employer identification number					
The state of the s	94-1527492					
990 Schedule O, Supplemental Information						
Return Reference	Explanation					
FORM 990, PART VI, SECTION A, LINE 2						
FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS GROUP CONSISTS OF 18 UNCOMPENSATED INDIVIDUALS					
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS GROUP HAS BOARD OVERSIGHT VIA THEIR POWER TO ELECT NEW GOVERNING BOARD MEMBERS					
FORM 990, PART VI, SECTION A, LINE 7B	CURRENTLY, THE MEMBERS HAVE POWER TO VOTE ON TWO MATTERS 1 THEY MAY ADD ADDITIONAL BOARD MEMBERS 2 VOTE OF THE MEMBERS IS REQUIRED TO AMEND ARTICLE THREE OF THE BY-LAWS, WHICH PERTAINS TO THE MEMBERSHIPS					
FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OF DIRECTORS ESTABLISHED A FINANCE COMMITTEE COMPOSED OF THE THREE BOARD MEMBERS AND ONE CURRENT PARENT ONE OF THEIR MANY RESPONSIBILITIES IS TO REVIEW THE FORM 990 IN I TS ENTIRETY FOR ACCURACY, ANSWERS TO QUESTIONS, AND TO GIVE INPUT TO THE CPA PRIOR TO THE FORM BEING FILED AFTER THEIR REVIEW, A FINAL COPY OF THE 990 IS DISTRIBUTED TO THE ENTIRE GOVERNING BODY					
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY WITH BOARD MEMBERS IF THERE IS A CON FLICT OF INTEREST WITH AN INDIVIDUAL BOARD MEMBER ON A PARTICULAR ISSUE, THAT BOARD MEMBER IS NOT ALLOWED TO BE A PART OF THE DISCUSSION AND MUST ABSTAIN AS PART OF THE VOTING PROC ESS IF THERE IS A CONFLICT OF INTEREST WITH THE MAJORITY OF THE BOARD MEMBERS, THEN THE P ARTICULAR ISSUE AND DISCUSSION AT HAND IS BROUGHT TO THE INDEPENDENT COMMITTEE.					
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION OF THE SCHOOL'S PRESIDENT (HEADMASTER) AND THE SCHOOL'S KEY EMPLOYEES IS APPROVED BY THE BOARD OF DIRECTORS IN ESTABLISHING THIS COMPENSATION, THE BOARD TAKES MAN Y FACTORS INTO CONSIDERATION, INCLUDING THE ROLES AND RESPONSIBILITIES OF THE POSITION ALO NG WITH THE HOURS SPENT EACH WEEK A COMPENSATION STUDY/SURVEY IS CONDUCTED EACH YEAR AND AS PART OF THE SURVEY, OTHER SALARIES OF INDIVIDUALS AT SIMILAR ORGANIZATIONS WITH THE SAM E OR SIMILAR ROLES AND RESPONSIBILITIES ARE COMPARED IN ORDER TO SET THE SALARIES OF THE PRESIDENT (HEADMASTER) AND OTHER KEY EMPLOYEES OF THE SCHOOL FORM 990 OF OTHER SIMILAR ORGANIZATIONS ARE REVIEWED AND COMPARED AS PART OF THE STUDY AS WELL EACH INDIVIDUAL IS GIVE NA WRITTEN EMPLOYMENT CONTRACT STIPULATING THEIR SALARY					
FORM 990, PART VI, SECTION C, LINE 19	THE SCHOOL MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC BY REQUEST FOR THE SCHOOL'S FINANCIAL STATEMENTS, EACH YEAR AN ANNUAL SUMMARY IS M AILED TO ALL CURRENT PARENTS, CURRENT FACULTY, AND ALUMNI					
FORM 990, PART VII, SECTION A, COMPENSATION OF DIRECTORS	THREE OF THE OFFICERS/DIRECTORS WORK ON A DAILY BASIS AT THE SCHOOL AS THEIR REGULAR JOB/P ROFESSION THE OTHER THREE DIRECTORS SPEND SIGNIFICANT HOURS ON CAMPUS OVERSEEING THE PHYS ICAL PLANT AND FINANCIAL AFFAIRS OF THE SCHOOL, AND COMMUNITY OUTREACH FOR THE SCHOOL THE DIRECTORS' COMPENSATION IS A COMBINATION OF THEIR SALARY FOR THESE SERVICES AND THEIR STI PEND AS A MEMBER OF THE BOARD OF DIRECTORS					
FORM 990, PART XII, LINE 2C	THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR					
SCHEDULE L, PART II	LOANS TO AND FROM INTERESTED PERSONS RICHES GROUP OF COMPANIES OPERATES A VERY SUCCESSFUL HOME AND GARDEN SUPPLY BUSINESS IN THE SANTA CLARA VALLEY THE COMPANY, GARDEN SUPPLY, HA S BEEN IN BUSINESS FOR OVER 40 YEARS AND CATERS TO PROFESSIONAL LANDSCAPERS AS WELL AS THE RETAIL PUBLIC IT IS MAJORITY OWNED BY TWO MEMBERS OF THE CREATIVE CENTER BOARD OF DIRECT ORS DENNIS RICHES AND LV RICHES, JR THE ORIGINAL \$300,000 AND \$650,000 LOANS TO RICHES G ROUP OF COMPANIES WERE EXECUTED IN 2003 TO INCREASE THE RETURN ON CREATIVE CENTER'S BUILDI NG FUND INVESTMENTS WHILE BANK INTEREST RATES WERE SO LOW THE RATE OF INTEREST WAS AT THE SAME RATE THAT WAS BEING OFFERED TO RICHES GROUP OF COMPANIES BY ITS MAJOR SHORT TERM LEN DING BANK THE COLLATERAL, THE BUSINESS'S INVENTORY, HAS A FAIR MARKET VALUE IN EXCESS OF \$3,000,000, OVER THREE TIMES THE FACE OF THE NOTE EFFECTIVE MAY 1, 2006, THE TWO NOTES AB OVE WERE COMBINED INTO ONE, FULLY AMORTIZED NOTE WITH AN INTEREST RATE OF 4 89% (MAY 2006 AFR) THE TERMS PROVIDE FOR A MONTHLY PAYMENT OF \$7,458 22 THAT IS					

DESIGNED TO EXTINGUISH

INTERNAL REVENUE SERVI

CE TAX EXEMPT ENTITIES GROUP IN CHICAGO, ILLINOIS

THE NOTE IN 15 YEARS THIS NEW ARRANGEMENT HAS BEEN APPROVED BY THE