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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

2015

OMB No 1545-0047

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CRE	AM CITY FO	OUNDATION IN	זר				39-1416063	·····				
				ganizations must o	omnle	ta thic						
1	The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1											
2	_	•										
3	—	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	—	-	-					ntar the beenitete				
4												
5	An organiza	name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section										
e		170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
6 7			- ·	art of its support from a				lic described				
•	in section	170(b)(1)(A)(vl). (Complete Part II.)	,,	-	cities with	t or norm the general pos	inc described				
8	=	•		A)(vi). (Complete Part I	-							
9	from activity investment June 30, 1	es related to its ext income and unre 1975. See section!	empt functions — subject lated business taxable 509(a)(2). (Complete F		and (2) n 511 tax)	o more t from bi	han 33-1/3% of its suppo usinesses acquired by t	ross receipts irt from gross he organization after				
10	An organiz	ation organized a	nd operated exclusive	ly to test for public safe	ety. See	section	509(a)(4).					
11	An organizer or more pure lines 11a t	ation organized a iblicly supported o hrough 11d that de	nd operated exclusive rganizations describe escribes the type of si	ly for the benefit of, to d in section 509(a)(1) o upporting organization	perform or section and com	the fun n 509(a) plete lir	ctions of, or to carry ou ((2) . See section 509(a) nes 11e, 11f, and 11g.	t the purposes of one (3). Check the box in				
8	a Type 1. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.											
b	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or 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				ion operated in connection plete Part IV, Sections								
d	Type III nor functionally	n-functionally integrated. The o	rated. A supporting orgoganization generally	anization operated in cor must satisfy a distribute A and D, and Part V.	nection	with ite e	amonded organization(s)	that is not				
•	Check this	box if the organiz or Type III non-fu	ation received a writte inctionally integrated	en determination from t supporting organization	he IRS	that it is	a Type I, Type II, Type	III functionally				
f	Enter the nun	ber of supported	organizations									
ç	Provide the fo	illowing informatio	n about the supported	d organization(s).				1				
	(I) Nan o	ne of supported ganization	(I) EIN	(III) Type of organization (described on lines 1-9 above (see instructions))	(iv) i organizat in your g docur	ion listed	(v) Amount of monetary support (see instructions)	(M) Amount of other support (see instructions)				
					Yes	No						
		••••										
<u>(A)</u>												
<u>(B)</u>												
(C)												
<u>(D)</u>												
(E)						l .						
	_											
Tota						·						
BAA	For Paperwor	k Reduction Act N	lotice, see the instruc	tions for Form 990 or !	750-EZ.		Schedule A (Form	990 or 990-EZ) 2015				

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

Sec	tion A. Public Support						
Calendar year (or fiscal year beginning in) ►		(a) 2011	(p) 5015	(c) 2013	(ർ) 2014	(e) 2015	(1) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	246,308.	195,109.	365,616.	299,536.	293,116.	1,399,685.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	246,308.	195, 109.	365,616.	299,536.	293,116.	1,399,685.
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						450 405
-	shown on line 11, column (f) Public support. Subtract line 5						450,135.
	from line 4					<u> </u>	949,550.
	tion B. Total Support	1					
Cale begi	ndar year (or fiscal year nning in) 🗠	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	246,308.	195,109.	365,616.	299,536.	293,116.	1,399,685.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	11,773.	12,908.	16,436.	17,665.	15,717.	74,499.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI.	36,986.	39,638.	81,663.	31,492.	36,245.	226,024.
11	Total support. Add lines 7 through 10		,				1,700,208.
12	Gross receipts from related activ	nties, etc. (see in	structions)		. 	12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	ard, fourth, or fifth t	ax year as a section	on 501(c)(3)	······ □
	tion C. Computation of Pu						
	Public support percentage for 20						55.85%
	Public support percentage from						58.10%
162	33-1/3% support test — 2015. If and stop here. The organization	the organization of qualifies as a put	did not check the olicly supported o	box on line 13, ai rganization	nd line 14 is 33-1/	/3% or more, che	ck this box
ŧ	33-1/3% support test - 2014. If and stop here. The organization	the organization d qualifies as a pu	lid not check a bo blicly supported o	x on line 13 or 16 rganization	ia, and line 15 is	33-1/3% or more,	check this box
	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the facts-a s-and-circumstanc	and-circumstance: es' test. The orga	s' test, check this inization qualifies	box and stop her as a publicly sup	e. Explain in Part ported organization	i VI how on►
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an Private foundation. If the organi	meets the 'facts-a d-circumstances'	and-circumstance: test. The organiza	s' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Part ed organization .	VI how the □
		ZZ.IOT GIU TIOL CHE	en a LOA UII IIIIle	15, 166, 160, 178,			
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| Partill | 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.)

	4'						
	tion A. Public Support	(0) 2011	6) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	dar year (or fiscal year beginning in) > Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	(a) 2011	(p) 5015	(6)2013	(0) 2014	(e) 2010	(i) rotal
3	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						
	that are not an unrelated trade or business under section 513. Tax revenues levied for the						
5	organization's benefit and either paid to or expended on its behalf						
•	facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Armounts included on lines 1, 2, and 3 received from disqualified persons				<u> </u>		
t	and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
•	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	ndar year (or fiscal year beginning in) 🟲	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6				l		
102	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
	b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					-	
	c Add lines 10a and 10b						,
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and	d stop here	<u> </u>				
Sec	tion C. Computation of Pu	blic Support P	ercentage	13		1 1	<u> </u>
	Public support percentage for 2	•	• • •				
16					•••••	16	8
	ction D. Computation of Inv				(0)		
	Investment income percentage						<u> </u>
18							
	a 33-1/3% support tests — 2015. I is not more than 33-1/3%, chec	k this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	• 🖿 📙
1	b 33-1/3% support tests - 2014. I fine 18 is not more than 33-1/39	%, check this box	and stop here. Th	ne organization qi	alifies as a public	ly supported organ	nization 🏲 📘
20		ization did not che					
BAA	· — — — — — — — — — — — — — — — — — — —		TEEA0403L	10/12/15	S	hedule A (Form 990	or 990-E20 2015

Partify Supporting Organizations

Section A. All Supporting Organizations

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

		,	Yes	OM
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		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)			
	and (c) below	3a		
t	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	·	
	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		
4 8	a 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		
		, <u> </u>		
ł	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)? 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		
Ε.	a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b)			
36	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		
t	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		
	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI	6		:
_				
7	Oid the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		
R	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If Yes,			_
•	complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9 8	a 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		
Ł	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Pert VI	9b		
	1			
•	Did a disqualified person (as defined in line 9a) 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	9с		
10 a	Was the organization subject to the excess business heldings allos of section 4043 horses of section 4043(h (considing			
	certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If Yes,' answer 10b below	10a		
t	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		
		500		

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Par	tilV Supporting Organizations (continued)		T	
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, to	he in		
_	governing body of a supported organization?	11a	<u> </u>	
b	A family member of a person described in (a) above?	11ь		
c	A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in I	Part V1 11c	Γ	
Sec	tion 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 ap or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' desc Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization if the organization had more than one supported organization, describe how the powers to appoint and/or directors or trustees were allocated among the supported organizations and what conditions or restriction applied to such powers during the tax year.	ribe in 's activities. Ir remove is, if any,		
2	Did the organization operate for the benefit of any supported organization other than the supported organization other than the supported organization? If 'Yes,' explain in Part VI how providentic carried out the purposes of the supported organization(s) that operated, supervised, or controlled supporting organization.	iding such		
Sec	tion 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 tro deach of the organization's supported organization(s)? If 'No,' describe in Part VI how control or manage supporting organization was vested in the same persons that controlled or managed the supported organization.	ement of the		
Sec	tion 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 torganization's tax year, (i) a written notice describing the type and amount of support provided during the year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copie organization's governing documents in effect on the date of notification, to the extent not previously provided the provided that the p	e prior tax s of the		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part the organization maintained a close and continuous working relationship with the supported organization	VI how		
3	By reason of the relationship described in (2), did the organization's supported organizations have a sign voice in the organization's investment policies and in directing the use of the organization's income or as all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization in this regard.	ssets at ions played		?
Sec	tion 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	inetractions):		
		mad actionsy.		
•	The organization satisfied the Activities Test. Complete line 2 below.			
1	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 enti-	ty (see instructions).		
2	Activities Test. Answer (e) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purpose supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supportions and explain how these activities directly furthered their exempt purposes, how the organizations and explain these activities of substantially all of its activities.	orted vation was constituted		
I	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the the organization's position that its supported organization(s) would have engaged in these activities but organization's involvement.	reasons for for the		
,	Parent of Supported Organizations: Anguar (a) and (b) helow		Ĭ:	i e
_	Parent of Supported Organizations. Answer (a) and (b) below.			1
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or leach of the supported organizations? Provide details in Part VI		,	
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	of its 3t		
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Par	tiVal Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No other Type III non-functionally integrated supporting organizations must complete	ovemb Sect	per 20, 1970. See instructions A through E.	tions, Ali	
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Curre (optio	ent Year onal)
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			
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Curre (option	ent Year onal)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				;,
8	Average monthly value of securities	1a			
	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets.	1c			
	Total (add lines 1a, 1b, and 1c)	1d			
-	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 tine 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			
Sec	tion C — Distributable Amount			Curren	t Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
	Enter 85% of line 1	2			
_3	The state of the s	3	an etamone en con		
	Enter greater of line 2 or line 3	4			
5_		5	ವಿನಾಯ ವಿಶೇಷ ಎಂದು ಆ ಕರ್ಮಾಡಿಯಾಗುತ್ತಿದ್ದಾರೆ. ಕನ್ನಡ	<u> </u>	
-6 	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	:		
7	Check here if the current year is the organization's first as a non-functionally-inte (see instructions).	grate	d Type III supporting or	ganization	
BAA			Schedule A (Fo	rm 990 or 990-	EZ) 2015

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Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 10 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.)

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	- —	2015	_	2014	_	2013	 2012		2011
OTHER INCOME SPECIAL EVENTS TOTAL	\$. <u>\$</u>	6,533. 29,712. 36,245.	\$ \$	10,088. 21,404. 31,492.	-	725. 80,938. 81,663.	\$ 1,850. 37,788. 39,638.	\$ \$	4,426. 32,560. 36,986.