Return of Organization Exempt From Income 949319519600 8 2017 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Opén to Public Do not enter social security numbers on this form as it may be made public. Department of the Trea Inspection ▶ Go to www irs.gov/Form990 for instructions and the latest information. Internal Revenue Service 20 For the 2017 calendar year, or tax year beginning , 2017, and ending P D. Employer identification of Check if applicable Name of organization Create Now, 95-4590574 Aridress change Doing business as E Telaphone number Name change Number and street for P.O. hox if mail is not delivered to street address Room/suite (213) 747-2777 Ste E indeal return 1611 South Hope Street G. Gross receipts Final return/terminates City or town, state or province, country, and ZIP or roreign postal code Los Angeles, CA 90015-4116 313,367 Amended return XYos Application pending Name and address of principal officer H(b) Are all subordinates included? X If 'No, 'altach' a list (see instructions) 5P1(c)(3) 501(c) (Tax-exempt status. Group exemption number createnow.org Website 🏞 Corporation Trust Association 1996 M State of legal domicite L. Year of formation: Form of a gangation. Part ! Summary Briefly describe the organization's mission or most significant activities To help youth find their voices through arts mentoring and education. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 9 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 1 6 Total number of volunteers (estimate if necessary) 67 7a 0 Total unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 0 Current Year 143,233 225,659 8 Contributions and grants (Part VIII line 1h) Revenue 163,211 Program service revenue (Part VIII, line 2q) 15,000 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 29 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1,650 6,894 Total revenue - add lines 8 through 11 (must equal Part VIII coli 242,319 313,367 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 44,584 64,544 Benefits paid to or for members (Part IX, column (A) line 4) 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 79,618 125,717 Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A) lines 11a-11d, 11f-24e) 77,525 137,483 17 327,744 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 201,727 18 CANNED Revenue less expenses. Subtract line 18 from line 12 40,592 (14,377)SCANNI Net Assets or Fund Balances Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 95,871 95,498 21 Total habilities (Part X, line 26) 1,240 15,244 80,254 22 Net assets or fund balances Subtract line 21 from line 20 94.631 Partill Signature Block Under penalties of peguing I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer , other than ed on all information of which preparer has any knowledge Sign Signature of office Here Type or print name and tale X . f Check Print/Type preparer's name Paid Andrew P Harwood self-employed Preparer Firm's EIN Firm's name Andrew, P. Harwood Use Only | F mr's address 1072 Casiano Road Los Angeles CA 90049-1610 213-705-4617 Yes No May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2017)

990

Form	990 (2017) Create Now, Inc	95-459057	Page 2
	t III' Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		
1	Bnefly describe the organization's mission.		
	To help youth find their voices through arts mentoring and education		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	pnor Form 990 or 990-EZ?	Yes	i ⊠ No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	☐ Yes	i ⊠ No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	-	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to ot	hers,	
	the total expenses, and revenue, if any, for each program service reported		
	400 040 1111 1111 1111		07.005
4a	(Code	\$	67,925)
	Cultural Journeys (2158 students), Visual Arts (473 students), Music (417 students)		
	<u>. </u>		
4b	(Code) (Expenses \$62,555 including grants of \$) (Revenue	\$	<u>26,125</u>)
	Performing Arts (130 students), Writing (72 students), Digital Media (35 students)		
	·		
			
		·	
4c	(Code) (Expenses \$25,022 including grants of \$) (Revenue	\$	10,450)
	Fashion (30 students), Culinary Arts (8 students)		
4d	Other program services (Describe in Schedule O)		
-	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶ 250,219		
EEA			orm 990 (2017)

Part IV'

			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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		X
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? If "Yes," complete Schedule C, Part II	4		Χ
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			<u> </u>
_	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	<u> </u>		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Χ
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	D. M. B. (A. P. A. D. L. W. P. L. W.	*		
u	complete Schedule D, Part VI	11a	Х	
b		110_		
J	of its total assets reported in Part X, line 16 ⁹ If "Yes," complete Schedule D, Part VII	11b		Х
С		110		
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	ľ	Х
А	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	Χ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110	_^_	
•		11f		Х
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	111	_	
12a	Schedule D, Parts XI and XII	12a		Х
		IZa		_
b		125		Х
42	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Ŷ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Ŷ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
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			V
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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_		X
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		X
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		X
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	<u> </u>	X
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		<u>X</u>

Page 4

Part IV'

(continued)

Checklist of Required Schedules

Yes No Х 20a 20a 20b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Χ 21 domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Χ Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III 22 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 Х 23 employees? If "Yes," complete Schedule J 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 Χ 24a through 24d and complete Schedule K. If "No," go to line 25a 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? b 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 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Χ 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 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? Χ 25b If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or Х 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled Χ entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions) Χ A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) С was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Part I..... Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 32 complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 sections 301,7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a X 35b controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 36 Х 36 related organization?If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 38 19? Note. All Form 990 filers are required to complete Schedule O

	990 (2017) Create Now, Inc	95-4590574	P	age :
Part	t 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	Nο
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	30	1	ĺ
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		.	
	reportable gaming (gambling) winnings to prize winners?	1c	X	<u> </u>
	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 2a	1		ĺ
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	···	X	
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			V
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3b</u>		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			Í
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			V
	account)?	4a		X
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			İ
_	(FBAR).	_		V
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			_
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			X
L	organization solicit any contributions that were not tax deductible as chantable contributions?	<u>6a</u>		├^
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		l
7	gifts were not tax deductible?	60		
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	i i		1
а	and services provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		$\vdash \widehat{}$
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10		
С	required to file Form 8282?	7c		X
d	If "Yes," Indicate the number of Forms 8282 filed during the year	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requi	· · · · · · · · · · · · · · · · · · ·		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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		
9	Sponsoring organizations maintaining donor advised funds			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	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 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	j		
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?	13a		
	Note See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	ĺ		
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand		L,	L
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2017) Create Now, Inc 95-4590574 Part VI Governance, Management, and Disclosure response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A Governing Body and Management	Yes	No
response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI	Yes	
Check if Schedule O contains a response or note to any line in this Part VI	Yes	
	Yes	
Section A. Governing Body and Management	Yes	No
	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 1b 9		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	ļ	\ \ \
any other officer, director, trustee, or key employee?		X
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
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?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members,		
stockholders, or persons other than the governing body?		<u>X</u>
8 Did the organization contemporaneously document the meetings held or written actions undertaken during		
the year by the following:	١	
a The governing body?	X	<u> </u>
b Each committee with authority to act on behalf of the governing body? 8b	X	<u> </u>
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		<u>X</u>
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	·-·	
	Yes	No
10a Did the organization have local chapters, branches, or affiliates? 10a	<u> </u>	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		1
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a	X	
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	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		
describe in Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy? 13	X	
14 Did the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by		
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		
with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1	
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		
organization's exempt status with respect to such arrangements?		
Section C. Disclosure	•	
17 List the states with which a copy of this Form 990 is required to be filled California	-	

17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(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)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records:

Lena Kent (213)747-2777, 1611 South Hope Street, Los Angeles, CA 90015-4116

Form 990 (2017)	Create Now, Inc								95-459057	
·	tion of Officers, Director	s, Trustees	s, Key	/ Em	ploy	ees,	Higl	hest Compens	ated Employee	s, and
Independe	nt Contractors									
Check if Sche	dule O contains a response or	note to any l	ne in th	nis Pa	rt VII		<u></u>			<u> </u>
	tors, Trustees, Key Employees								<u>. </u>	
1a Complete this table for all organization's tax year.	persons required to be listed F	Report compe	nsation	n for ti	ne ca	lendar	year	ending with or with	nin the	
List all of the organization Compensation Enter -0- in co	on's current officers, directors, lumns (D), (E), and (F) if no co				als o	r orgar	uzatio	ons), regardless of	amount of	
9	on's current key employees, if	•					-			
who received reportable com organization and any related	organizations.	and/or Box 7	of For	m 109	99-MI	ISC) of	more	e than \$100,000 fro	om the	
	on's former officers, key emplo ensation from the organization					d empk	oyees	s who received mo	re than	
	on's former directors or trustee 000 of reportable compensation								of the	
List persons in the following o compensated employees, and	rder. individual trustees or dire I former such persons	ctors, instituti	onal tru	ıstees	s, offic	cers, ke	ey en	mployees, highest		
Check this box if neither t	he organization nor any relate	d organizatıoı	comp	ensat	ed ar	ny curre	ent of	fficer, director, or tr	ustee	
					(C)					
	(A)	(B)	(do no		Positio k more	n than one)	(D)	(E)	(F)
Name	and Title	Average	box,	unless	persor	ıs both a	an	Reportable	Reportable compensation from	Estimated
		hours per week (list any	office	er and a	direct	or/trustee)	compensation from	related	amount of other
		hours for	0 =	=	<u></u>	_	1 -	the	organizations	compensation
		related	individual trustee or director	nstitutional trust	Officer	employee Key employee	ome	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
		organizations below dotted	ecto	딁	웩	empl oye	<u> </u>	(VV-2/1099-MISC)		organization and related
		line)	기원	쾰	-	٩	≦			organizations
			stee	SI SI		ğ ğ				
				8						
		1			İ	'	1			
(1) Jake Winett		7.00				+	 	,		
Board Chairperson			x		X			1 0	0	0
(2) Tracy S Clark		5.00								
Board member			X						0	0
(3) Lauren DeVillier		3.00							_	
Secretary			X	ļ				C	0	0
(4) On each 1/11-		3 00				\top	\top			-
Vice Chairperson			x		X				o	О
(5) Chelsea Armstrong	······································	3 00				1				
Board Member			x		X				o	o
(6) Lena Kent	•	4.00		_			T			
Treasurer		·	X		X			(0	0
(7) Jennifer Gunderson I	Cleven	5.00			<u> </u>	1	1			
Board Member	704011	- 2.22 -	x			-		(o	o
		4.00			\dashv	+	+	 	1	
Board Member		3.20 -	x		ł			(o	0
		3.00	 ^ 		\dashv	+	+	 		-
		2.00 -	$ \mathbf{x} $		l				0	o
Board Member		45.00		-	+		+		· · · · · ·	<u> </u>
		45 00			,	V		36,000	١ ,	
Executive Director			\vdash	\vdash	+-	<u> </u>	+-	36,000	0	0
(11)		1			1	- 1		•	1	
		.]			
(40)					\perp		-			
(12)										
(40)										

95-4590574

Page 7

	(A) Name and title		(do not check box, unless per officer and a cell of the cell of th			(C) Position I more than one erson is both an director/trustee) Officer en			(D) Reportable compensation from the	(E) Reportable compensation from related organizations	соп	(F) stimated nount of other spensation	f ion
	•	related organizations below dotted line)	Individual trustee or director	Institutional frustee	er	Кеу employее	Hignest compensated employee	161	organization (W-2/1099-MISC)	(W-2/1099-MISC)	org an	rom the panization of related anization	on ed
<u>(15)</u>													
<u>(16)</u>						-						<u>.</u>	
<u>(17)</u>			 			_							
<u>(18)</u>						_							
<u>(19)</u>						-							
(20)											-		
<u>(21)</u>						-						_	
(22)			_							, , , , , , , , , , , , , , , , , , , ,			
(23)													
<u>(24)</u>								_				*	
<u>(25)</u>											 		
1b c	Sub-total		••••					>	36,000	0			
2	Total number of individuals (including but not limited reportable compensation from the organization		ed abo	ove)	who	гес	eived	more		<u> </u>	<u> </u>		
										·		Yes	No
3	Did the organization list any former officer, director employee on line 1a? If "Yes," complete Schedule			-			_				3		X
4	For any individual listed on line 1a, is the sum of reporganization and related organizations greater than												
	ındıvıdual										4		X
5	Did any person listed on line 1a receive or accrue co for services rendered to the organization? If "Yes,"										5		X
Section	n B. Independent Contractors												_ <u></u> -
1	Complete this table for your five highest compensate compensation from the organization. Report comper year.	-											
	(A) Name and business address					_			(B) Description of	services		(C) ensation	
	410 00011000				_				2 occupion of				<u> </u>
					_						 _		
					_		-						
2	Total number of independent contractors (including received more than \$100,000 of compensation from			ose	liste	d ab	ove) v	who					

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenue excluded from tax under sections 512-514 Total revenue Related or Unrelated exempt function revenue business гечелие 1a Membership dues Contributions, Gifts, Grants and Other Similar Amounts b 1b Fundraising events 1c Related organizations 1d Government grants (contributions) ... 1e 10,600 All other contributions, gifts, grants, 1f 132,633 and similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total Add lines 1a-1f ▶ 143,233 **Business Code** 2a Corporate 611710 54,900 54,900 Program Service Revenue 611710 **b** Foundations 72,868 72,868 c Individuals 611710 35,443 35,443 f All other program service revenue 163,211 3 Investment income (including dividends, interest, and other similar amounts) 29 Income from investment of tax-exempt bond proceeds 5 (ı) Real (II) Personal 6a Gross rents b Less rental expenses c Rental income or (loss) ... d Net rental income or (loss) ... (i) Secunties (II) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising Other Revenue events (not including \$ of contributions reported on line 1c). See Part IV, line 18 6,894 а b Less direct expenses b c Net income or (loss) from fundraising events 6.894 6,894 9a Gross income from gaming activities See Part IV, line 19 а b Less direct expenses h c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances а b Less: cost of goods sold þ c Net income or (loss) from sales of inventory ... Miscellaneous Revenue **Business Code** 11a d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions 313,367 163,240 6,894

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to a ot include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	64,544	64,544		inn. n
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,	405 400	00.700	44.700	
_	trustees, and key employees	105,480	93,780	11,700	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	47.000	7.550		0.754
7	Other salaries and wages	17,303	7,552		9,751
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2 024	2.024		
10	Payroll taxes	2,934	2,934		
11	Fees for services (non-employees):				
a	Management	46		46	
b	Legal	8,367		8,367	
C C	Accounting	0,307		0,301	
d	Lobbying Professional fundraising services See Part IV, line 17 .				
e f	Investment management fees				
	_				
g	Other. (If line 11g amount exceeds 10% of line 25, column	8,208	8,208		
12	(A) amount, list line 11g expenses on Schedule O) Advertising and promotion	4,880	1,848	2,484	548
12 13	Office expenses	4,000	1,040	2,404	340
14	Information technology	5,312	1,306	4,006	
15	Royalties	3,312	1,500	4,000	
16	Occupancy	13,499		13,499	
17	Travel	8,729	5,781	2,073	875
18	Payments of travel or entertainment expenses	0,120	0,701	2,010	010
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	99			99
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,977	4,977		
23	Insurance	6,123	3,222	2,901	
24	Other expenses. Itemize expenses not covered	ĺ	,		
	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		61,785	55,334	5,627	824
ь	Postage, Printing & Copying	1,504	91	882	531
c	Fundraising	2,933	-		2,933
d					
e	All other expenses	11,021	642	10,379	
25	Total functional expenses. Add lines 1 through 24e .	327,744	250,219	61,964	15,561
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				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 75,277 1 1 Cash - non-interest-bearing 65,254 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or 10a 49.826 other basis Complete Part VI of Schedule D ... 20.673 19.501 Less accumulated depreciation 10b 10c 29,153 b 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 1.093 15 Other assets. See Part IV, line 11 15 1.091 95,871 16 95.498 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 1,240 17 5.064 18 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 10,180 1,240 Total liabilities Add lines 17 through 25 26 15,244 26 ▶ X and Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Assets or Fund Balances 121,232 27 Unrestricted net assets 27 39,501 28 Temporarily restricted net assets (26,601)28 40,753 29 Permanently restricted net assets 29 ■ and Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds é 94,631 80,254 33 Total net assets or fund balances 33 95.871 34 34 Total liabilities and net assets/fund balances 95,498

	990 (2017) Create Now, Inc	95-4590574		P	age 12
<u>Par</u>	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	· · · · · · · · · · · · · · · · · · · 			_Ц_
1	Total revenue (must equal Part VIII, column (A), line 12)	1		313,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2		3 <u>2</u> 7,7	
3	Revenue less expenses Subtract line 2 from line 1	3	(14,3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		94,6	31
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		80,2	254
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		_		
_				Yes	No
1	Accounting method used to prepare the Form 990 🛛 Cash 🗌 Accrual 🗍 Other	_ 			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		}	i	}
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
	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.				
	Separate basis Consolidated basis Both consolidated and separate basis			,	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ł	ĺ .	ĺ .
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		1	/	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1		† <u> </u>
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	1	1

·

1

•

1

1

.

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

2017 Open to Public

OMB No 1545-0047

Internal Revenue Service Name of the organization

► Go to www irs gov/Form990 for instructions and the latest information

Inspection

lame	of the	organization			_		Employer identification	tion number			
<u>Crea</u>	ate N	low, Inc					95-459057	4			
Pa	rt I	Reason for Public Charity S	Status (All orga	nizations must com	plete this	s part.) S	See instructions				
The	orgar	nization is not a private foundation bec	ause it is: (For lines	1 through 12, check onl	y one box.)					
1		A church, convention of churches, or	association of chu	rches described in secti	on 170(b)(1)(A)(ı).					
2		A school described in section 170(b)(1)(A)(ii) (Attach Schedule E (Form 990 or 990-EZ).)									
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the									
		hospital's name, city, and state									
5		An organization operated for the bene	efit of a college or u	iniversity owned or opera	ated by a g	overnment	al unit described in				
		section 170(b)(1)(A)(iv) (Complete F	Part II.)								
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)(<i>A</i>	۸)(v)					
7	X	An organization that normally receive	s a substantial part	of its support from a gov	vernmental	unit or fror	n the general public				
		described in section 170(b)(1)(A)(vi).	(Complete Part II))							
8		A community trust described in section	on 170(b)(1)(A)(vi)	(Complete Part II.)							
9		An agricultural research organization	described in section	on 170(b)(1)(A)(ix) opera	ated in con	junction w	ith a land-grant colle	ge			
		or university or a non-land-grant colle	ge of agriculture (s	ee instructions) Enter th	e name, cit	y, and stat	e of the college or				
		university.									
10		An organization that normally receive	s (1) more than 33	1/3% of its support fron	n contribution	ons, memb	ership fees, and gros	s			
		receipts from activities related to its e	exempt functions - s	subject to certain excepti	ons, and (2) no more	than 33 1/3% of its				
		support from gross investment income	e and unrelated bus	siness taxable income (le	ess section	511 tax) f	rom businesses				
		acquired by the organization after Ju	ine 30, 1975 See s	section 509(a)(2). (Comp	olete Part II	II.)	•				
11		An organization organized and opera	ated exclusively to	test for public safety. Se	e section 5	509(a)(4).					
12		An organization organized and opera	ted exclusively for t	he benefit of, to perform	the functio	ns of, or to	carry out the purpos	es			
		of one or more publicly supported or	ganizations describ	ped in section 509(a)(1)	or section	509(a)(2)	See section 509(a)(3	3)			
		Check the box in lines 12a through 12	2d that describes th	e type of supporting org	anızatıon a	nd complet	te lines 12e, 12f, and	12g			
	а	Type I. A supporting organization	n operated, supervi	ised, or controlled by its	supported	organizati	on(s), typically by giv	/ing			
		the supported organization(s) the	power to regularly	appoint or elect a major	rity of the d	rectors or	trustees of the				
		supporting organization. You mu	st complete Part IV	/, Sections A and B.							
	b	Type II A supporting organization	n supervised or co	ntrolled in connection w	ith its supp	orted orga	nization(s), by having	9			
		control or management of the su	pporting organization	on vested in the same pe	rsons that o	control or r	nanage the supporte	d			
		organization(s). You must comp	lete Part IV, Section	ns A and C							
	С	Type III functionally integrated. A	A supporting organi	zation operated in conn	ection with	, and funct	onally integrated wit	h,			
		its supported organization(s) (se	e instructions). You	ı must complete Part IV	, Sections	A, D, and I	Ē				
	ď	Type III non-functionally integrat	ed. A supporting or	rganization operated in o	connection	with its su	pported organization	(s)			
		that is not functionally integrated.	. The organization g	jenerally must satisfy a d	ı noıtud rit al	equiremer	nt and an attentivenes	S			
		requirement (see instructions). Y	ou must complete	Part IV, Sections A and	D, and Pa	rt V					
	е	Check this box if the organization	received a written	determination from the 11	RS that it is	a Type I,	Type II, Type III				
		functionally integrated, or Type II	Il non-functionally in	ntegrated supporting org	anızatıon						
	f	Enter the number of supported organ	nizations								
	g	Provide the following information about	ut the supported or	ganization(s)							
	() Name of supported organization	(II) EIN	(iii) Type of organization	(iv) is the o	-	(v) Amount of monetary	(vi) Amount of			
				(described on lines 1-10 above (see instructions))	listed in you docum		support (see instructions)	other support (see instructions)			
)	above (see instructions))	docum		instructions)	instructions)			
					Yes	No					
(A)											
					ļ <u>.</u>	ļ					
(B)					1						
(<u> </u>	<u> </u>					
(C)						!					
					<u> </u>	ļ					
(D)											
(J)			ļ		ļ	<u> </u>					
(E)					{	ł					
<u> </u>					<u> </u>		· · · · · · · · · · · · · · · · · · ·				
Tot	al	•	i	l	1	l	1				

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5. 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (d) 2016 (b) 2014 (c) 2015 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 104,284 87,885 139,865 225,659 306,444 864,137 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 104,284 87,885 139,865 225,659 306,444 864,137 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) 363.554 Public support Subtract line 5 from line 4 500.583 Section B. Total Support (c) 2015 Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (d) 2016 (e) 2017 (f) Total 104,284 87.885 139.865 225,659 Amounts from line 4 306,444 864,137 Gross income from interest, dividends. 8 payments received on securities loans, rents, royalties and income from similar sources 10 39 Net income from unrelated business activities, whether or not the business is regularly carned on Other income Do not include gain or 10 loss from the sale of capital assets 2,814 7,497 (Explain in Part VI)... 14,411 1,650 6.894 33.266 11 Total support. Add lines 7 through 10 897,442 12 Gross receipts from related activities, etc. (see instructions) 13 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 2017 (line 6, column (f) divided by line 11, column (f)) 14 55 78 % Public support percentage from 2016 Schedule A, Part II, line 14 15 15 62 12 % 33 1/3% support test - 2017 If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this X box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization П 17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported П organization 10%-facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

18

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 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 in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 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 b 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 8 Public support (Subtract line 7c from Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Amounts from line 6 10a 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 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on ... 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.)..... 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) Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) 15 % Public support percentage from 2016 Schedule A, Part III, line 15 16<u>...</u>.....<u>.</u>................. % Section D. Computation of Investment Income Percentage 17 % Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2016 Schedule A, Part III, line 17 % 19a 33 1/3% support tests - 2017 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% support tests - 2016 If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 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 in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A.	All	Supporting	Organizations
------------	-----	------------	---------------

- 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.
- 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)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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
- 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
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- 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
- 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
- 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)
 - 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?
- c Substitutions only Was the substitution the result of an event beyond the organization's control?
- 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.
- Did 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).
- 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 I of Schedule L (Form 990 or 990-EZ).
- 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
- b 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 Part VI
- c 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - 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)

	Yes	No
1_		
2	<u> </u>	
3a	·	
3b		
3c	<u> </u>	
4a]	
4b		
4c	}—	
5a		
5b		
5c	٥	
6		
	}	
7		
8		
9a		
9b	}	
9c		
10a		
	 	
10b A (Form 990 d	x 990-F:	7) 2017

	de A (Form 990 or 990-E2) 2017 Create Now, ITIC 95-4590	314	<u>-</u>	age 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?		ļ	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	44-		
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part V tion B. Type I Supporting Organizations	l. 11c	L	<u> </u>
Seci	normal Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
1	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		1	
	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	· '	ĺ
	organizations and what socialities of restrictions, it arry, applied to each period as assing the tax year	<u> </u>		
2	Did the organization operate for the benefit of any supported organization other than the supported			ļ
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		i '	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		
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 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		Ì	1
	the supported organization(s)	1		
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 the	-	1	
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior	,	,	,
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	e .		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?) <u>1</u>	<u> </u>	ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	ļ		
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI ho	w	Ì	ļ
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	}	
			<u> </u>	·
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		ļ	
	supported organizations played in this regard.	3	<u> </u>	<u></u>
	ction 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 (s	see instructi	ons)	
	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 ε 	antitu (aaa ir	otruoi	امحما
_		muty (see in	Yes	
2	Activities Test. Answer (a) and (b) below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		1 65	NU
а	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		ſ	
	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	i	ĺ
h	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		\vdash	
U	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	}	1	l
	activities but for the organization's involvement.	2b	[
3	Parent of Supported Organizations. Answer (a) and (b) below	120	\vdash	\vdash
-	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or]
d	trustees of each of the supported organizations? Provide details in Part VI.	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of ea		 	
Û	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or no supported organizations. It is so, addenied in that the following played by the organization in this regard.	100	1	ł

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi				
1 Check here if the organization satisfied the Integral Part Test as a qualifying			•	
instructions All other Type III non-functionally integrated supporting organization	tions n	nust complete Section		
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			
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)	
Aggregate fair market value of all non-exempt-use assets (see				
instructions for short tax year or assets held for part of year)				
a 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	1			
factors (explain in detail in Part VI).	}	,		
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		1	
8 Minimum Asset Amount (add line 7 to line 6)	8		<u> </u>	
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	1		
2 Enter 85% of line 1.	2			
3 Mınimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3	4			
5 Income tax imposed in prior year	5			
6 Distributable Amount Subtract line 5 from line 4, unless subject to	11			
emergency temporary reduction (see instructions).	6			
7 Check here if the current year is the organization's first as a non-functionally	-integra	ated Type III supportin	g organization (see	
instructions).		• • • • • • • • • • • • • • • • • • • •	• • •	

Page 6

and 4c.

8 Breakdown of line 7:
a Excess from 2013
b Excess from 2014
c Excess from 2015
d Excess from 2016
e Excess from 2017

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990

► Go to www irs gov/Form990 for instructions and the latest information

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization Employer identification number 95-4590574 Create Now, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts | Part I | Complete if the organization answered "Yes" on Form 990, Part IV, line 6 (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) . 3 Aggregate value of grants from (dunng year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 ☐ Yes ☐ No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ...,,..... ☐ Yes ☐ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of

a Revenue included on Form 990, Part VIII, line 1

public service, provide the following amounts relating to these items:

Assets included in Form 990, Part X ______

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items.

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

.....

Schedu	le D (Form 990) 2017 Create Now, Inc	·					95-45905		Page 2
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
3	Using the organization's acquisition, accession, an	d other records, ch	eck any of	the follow	ing that are a	signific	ant use of its		
	collection items (check all that apply).								
а	Public exhibition	d 🗌 Loar	n or exchan	ge progra	ıms				
b	Scholarly research	e Othe	er						
	Preservation for future generations		 -			~~~	 _		
4	Provide a description of the organization's collection	ons and explain ho	w they furth	er the ord	ianization's e	xempt r	ouroose in Part		
7	XIII.	one and explain no	iv and y renar	.0	,	,,,,,,,,	onposs in rain		
5	During the year, did the organization solicit or rece	un denstrone of an	t historical	trassume	or other sim	ular			
3	assets to be sold to raise funds rather than to be r							☐ Yes	☐ No
Dor	t IV Escrow and Custodial Arrangement		or the organ	IIZALIOI15	Collection			<u></u>	INO
Fai	Complete if the organization ans		Eorm 0	On Dort	IV line 0	or ror	orted an amou	nt on Earm	
		wered res or	i roiiii ə	o, ran	iv, inte 9,	or ret	Jorted all alliou	ונ טוו רטוווו	ľ
	990, Part X, line 21.								 -
1a	Is the organization an agent, trustee, custodian or o				ner assets n	ot		п	п.,
	•	•••		• • • • • • •				∐ Yes	∐ No
b	If "Yes," explain the arrangement in Part XIII and o	complete the follow	ing table:						
						<u> </u>	Amo	ount	
С	Beginning balance					10			
d	Additions during the year					10	d		
е	Distributions during the year					16	e		
f	Ending balance					11	-		
2a	Did the organization include an amount on Form 9	90, Part X, line 21,	for escrow	or custod	al account lia	ability?		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII Che	ck here if the expla	nation has I	been prov	rided on Part	XIII			
	t V Endowment Funds.								
	Complete if the organization ans	wered "Yes" or	n Form 99	90, Part	IV, line 10).			
		(a) Current year	(b) Prior		(c) Two years		(d) Three years back	(e) Four yea	rs back
1a	Beginning of year balance		\-',				(, ,	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
b	Contributions			-			<u> </u>	 	
c	Net investment earnings, gains, and							 	
·	losses								
_	-							 	
d	Grants or scholarships							 	
е	Other expenditures for facilities and								
	programs							 	
f	Administrative expenses							 	
g	End of year balance				L		L		
2	Provide the estimated percentage of the current ye	•	ne 1g, colun	nn (a)) he	ld as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment ▶ %								
С	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and 2c should equal 100%								
3a									
	organization by Yes No								
	(i) unrelated organizations								
	(ii) related organizations								
b	· · · · · · · · · · · · · · · · · · ·								
4	4 Describe in Part XIII the intended uses of the organization's endowment funds.								
Part VI Land, Buildings, and Equipment.									
<u> </u>			n Form 9	90 Parl	IV line 1	1a Se	e Form 990 Pa	rt X line 1	Λ
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value								
	Description of property	(a) Cost or other	I		other)	٠,	depreciation	(d) Book val	ue
		(mvesum	,			`			
1a	Land	<u> </u>							
b	Buildings								
С	Leasehold improvements	<u> </u>							
d	Equipment								
e	Other STMD1E	4	19,826				20,673	29	,153
Tota	I. Add lines 1a through 1e (Column (d) must equa	al Form 990, Part X	(, column (f	3), line 10	c.)	<u></u>	•	29	,153

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII......

10,180

(9)

Total (Column (b) must equal Form 990, Part X, col (B) line 25)

- Schedi	ule D-(Form 990) 2017 Create Now, Inc		95-4590574	Page 4	
	t XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per R	eturn.		
L	Complete if the organization answered "Yes" on Form 990, I	-			
1	Total revenue, gains, and other support per audited financial statements		1		
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		" ' 		
2		2-	1.		
а	Net unrealized gains (losses) on investments	2a	 		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
_		40	 4		
_ C	Add lines 4a and 4b		4c		
5_	Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12)		5		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statemen		r Return.		
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.			
1	Total expenses and losses per audited financial statements		_ 1 }		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
	Prior year adjustments	2b			
b	• •				
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
е	Add lines 2a through 2d		_2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	*		
b	Other (Describe in Part XIII)	4b	<u> </u>		
	Add lines 4a and 4b		4c		
c	- m ·		5		
5	Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)				
	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, $$ li		4, Part X, line		
2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information					
_					
	<u>.</u>				
_					

Schedule D (Form 990) 2017

EEA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990 or 990-EZ
➤ Go to www irs gov/Form990 for the latest information

Inspection Employer identification number

Create Now, Inc	95-4590574
01. Amended return information	
The originally filed form 990 had several mistakes Therefore, an amended form 990 is	
being filed	
·	
02. Form 990 governing body review (Part VI, line 11)	
The Board of Directors reviews federal form 990 prior to its filing	
03. Conflict of interest policy compliance (Part VI, line 12c)	
Annually, a conflicts question is asked of the Board Any questionable relationships or	
potential transactions are discussed and analyzed prior to proceeding	
04. CEO, executive director, top management comp (Part VI, line 15a)	
The Executive Committee researches compensation of employees at other non-profit	
organizations (similar in size to Create Now) to determine market value The Executive	
Committee then proposes compensation amounts/levels to the Board of Directors, which then	
decides via a vote. This process was undertaken for the Executive Director position in	
2017	
05. Other officer or key employee compensation (Part VI, line 15b	
The process described for top management also applies to other key employees of the	
organization.	
O Burning Control of the Control of	
On Comments at a smiletie to multi- (D-4)/Line 40)	
All such documents are available upon request. Form 990 posted on organization's website.	