Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

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

Open to Public Inspection

CRRATIVE CAPITAL FOUNDATION CREATIVE FOUNDATION	Α	For the	2011 calendar year, or tax year beginning $$	JUN 30, 2012	
CREATIVE CAPITAL FOUNDATION 311-1605982	_			D Employer identifi	cation number
CRAFTIVE CAPITAL FOUNDATION 31-1605982	_	applicable:	- · · · · · · · · · · · · · · · · · · ·		
Comp Business As STREET, 7TH FLOOR Realisment distinct distinct address) Street address Street (or Pt.), bow it mails not distincted address) Room/builts E Telephone number of country, and ZIP + 4 Real YORK, NY 10012 F Name and address of principal officer/RUBY LERNER F Name and address of princip		Address	CREATIVE CAPITAL FOUNDATION		
Murriber and street (or P.0. host final is not delivered to street address) Boom/sulfs E Telephone number (212) 598-9900		Name			605982
Segretary	F	Initial			
City or town, state or country, and ZIP + 4 City or town, state or country, and ZIP + 4 City or town, state or country, and ZIP + 4 City or town New YORK, NY 10012 Finance and address of principal orficer.RUBY LERNER Finance and address of principal orficer.RUBY LERNER H(a) is this a group return Yes XI No H(b) Are all affiliates included?	F				
Second Content Seco	F	Jated			-
Farme and address of principal officer/RUBY LERNER Farme and address of principal officer/RUBY LERNER Farme and address of principal officer/RUBY LERNER High art hall affiliates include? Yee No	F	lreturn	City or town, state or country, and ZIP + 4		
Fivame and address of principal officer.RUB1 EARNER SABOYE No and address of principal officer.RUB1 SARNER SAS CABOYE No and address of principal officer.RUB1 Solicio Market No. attach a list. (see instructions) Tax-exempt status: XJ 501(c)3 Solicio Market Solicio Market Solicio Market Solicio Market Solicio Market Solicio Market Market Solicio Market Solicio Market Market Market Solicio Market		Ition			eturn
Tax-exempt status: XI 501(c)(3)			F Name and address of principal officer: RUBY LERNER		
Website WWW. CREATIVE CAPITAL.ORG High Group exemption number From or organization: Corporation Trust Association X Other Vear of formation: 1998 Mistate or legal domicile: NY Part Summary	_			— ` '	luded? Yes Mo
Part Summary				527 If "No," attach a	list. (see instructions)
Part Summary	_				
Briefly describe the organization's mission or most significant activities: CREATIVE CAPITAL SUPPORTS INDIVIDUAL ARTISTS' PROJECTS THROUGH GRANT AND CAREER DEVELOPMENT. 2 Check this box	<u>K</u>	Form of o	rganization: Corporation Trust Association _X_ Other ▶ L \	/ear of formation: 1998 $_{ extsf{N}}$	🛮 State of legal domicile: NY
INDIVIDUAL ARTISTS' PROJECTS THROUGH GRANT AND CAREER DEVELOPMENT. 2 Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1a)	P				
INDIVIDUAL ARTISTS' PROJECTS THROUGH GRANT AND CAREER DEVELOPMENT. 2 Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of independent voting members of the governing body (Part VI, line 1a)	Φ.	1 B	riefly describe the organization's mission or most significant activities: CREATIVE	CAPITAL SUPP	ORTS
Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (A), line 12 b Net unrelated business taxable income from Form 990-T, line 34 8 Contributions and grants (Part VIII, line 1h) 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, line 2g) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 13) 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 14 Benefits paid to or for members (Part IX, column (A), lines 13) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising ese (Part IX, column (A), lines 11e) 17 Other expenses (Part IX, column (A), lines 11e) 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), lines 5-10) 17 Other expenses (Part IX, column (A), lines 11e) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 18 from line 20 11 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 13 A 684, 105. 14 A 169, 582. 15 A 47, 607. 16 A 79 A 18 A 18 B MARKET STREET; SUITE 2400 Printry per preparer same Preparer Firm's address PART WELLER & BAKER LLP Firm's address PART PART	ŭ	I	NDIVIDUAL ARTISTS' PROJECTS THROUGH GRANT A	ND CAREER DEV	ELOPMENT.
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B Net unrelated business taxable income from Form 990-T, line 34 Trb O .	- დ	5 T			
B Net unrelated business taxable income from Form 990-T, line 34 Trb O .	iŧie	6 7			
B Net unrelated business taxable income from Form 990-T, line 34 Trb O .	₹	7 - T			
Revenue less expenses. Subtract line 18 Total assets (Part X, column (A), line 19 Revenue less expenses. Subtract line 18 from line 12 Total assets (Part X, line 16) Revenue less expenses. Subtract line 18 from line 12 Total assets (Part X, line 16) Revenue less expenses. Subtract line 21 from line 20 Rully LERNER, EXECUTIVE DIRECTOR Pinntr Saddress Times and sin Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr Saddress Pinntr Saddress Pinntr Saddress Pinntr Saddress Pinntr N MAUCH Pinntr Saddress Pinntr N MAUCH Pinntr Saddress	Ă	/a i			
8	_	I D IV	et unrelated business taxable income from Form 990-1, line 34	T	
9		1			
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ne	8 0			
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	/en	9 P			
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 6 , 617 , 507 . 9 , 305 , 942 . 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2 , 446 , 273 . 4 , 661 , 203 . 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 . 0 . 0 . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1 , 728 , 515 . 2 , 043 , 551 . 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 . 0 . 0 . 17 Other expenses (Part IX, column (D), line 25) 449 , 480 . 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1 , 268 , 175 . 1 , 464 , 356 . 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5 , 442 , 963 . 8 , 169 , 110 . 19 Revenue less expenses. Subtract line 18 from line 12 1 , 174 , 544 . 1 , 136 , 832 . 20 Total assets (Part X, line 16) 8 eignining of Current Year End of Year 14 , 169 , 582 . 15 , 447 , 607 . 21 Total liabilities (Part X, line 26) 485 , 477 . 654 , 410 . 19 Tart II Signature Block 13 , 684 , 105 . 14 , 793 , 197 . Part II Signature of officer Date Print/Type preparer's name Preparer's signature Preparer's signature Print/Type preparer's name Preparer's signature Preparer's signature Print/Type preparer's name Print	Ŗ	10 Ir			
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2 , 446 , 273 .					
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15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,728,515. 2,043,551. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0.		13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)		4,661,203.
16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) b 449,480 . 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,268,175 . 1,464,356 . 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 5,442,963 . 19 Revenue less expenses. Subtract line 18 from line 12 1,174,544 . 1,136,832 . 1		14 B	enefits paid to or for members (Part IX, column (A), line 4)		0.
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19 Revenue less expenses. Subtract line 18 from line 12 1,174,544. 1,136,832.				5,442,963.	8,169,110.
Beginning of Current Year End of Year 14,169,582. 15,447,607. 21 Total liabilities (Part X, line 26) 485,477. 654,410. 22 Net assets or fund balances. Subtract line 21 from line 20 13,684,105. 14,793,197. Part II Signature Block Under penalties of perjury, 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 officer) is based on all information of which preparer has any knowledge. Sign Here RUBY LERNER, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer Firm's name TAIT, WELLER & BAKER LLP Firm's name TAIT, WELLER & BAKER LLP Firm's address 1818 MARKET STREET; SUITE 2400 PHILADELPHIA, PA 19103 Phone no. (215) 979-8800		19 R		1,174,544.	1,136,832.
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Sign Here RUBY LERNER, EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name MARTIN MAUCH Preparer Use Only Firm's address 1818 MARKET STREET; SUITE 2400 PHILADELPHIA, PA 19103 Pate 03/28/13 Check PTIN 03/28/13 Firm's Check PTIN 03/28/13 Firm's EIN 23-1144520 Phone no. (215) 979-8800		-			y knowledge and belief, it is
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PHILADELPHIA, PA 19103 Phone no. (215) 979-8800				Firm's EIN	23-1144520
	Use	e Only F			045 050
May the IRS discuss this return with the preparer shown above? (see instructions)	_		PHILADELPHIA, PA 19103	Phone no. (
	Ма	y the IRS	S discuss this return with the preparer shown above? (see instructions)		X Yes No

Pal	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: CREATIVE CAPITAL SUPPORTS INDIVIDUAL ARTISTS' PROJECTS THROUGH GRANTS
	AND CAREER DEVELOPMENT SERVICES.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 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 measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 5,794,432. including grants of \$ 4,661,203.) (Revenue \$
	GRANTMAKING:
	IN FY 11-12 CREATIVE CAPITAL FUNDED A NEW CYCLE OF GRANTEES WHILE
	CONTINUING TO INVEST IN MULTI-YEAR RELATIONSHIPS WITH GRANTEES WHO WERE
	AWARDED GRANTS IN PAST YEARS. FUNDS USED IN THIS CATEGORY REPRESENT
	DIRECT SUPPORT TO ARTISTS, IN ADDITION TO THE COSTS ASSOCIATED WITH
	GRANTMAKING AND THE ADMINISTRATION OF GRANT FUNDS. THE ORGANIZATION
	ALSO OPENED THE SUBMISSION PROCESS FOR ANOTHER NEW ROUND OF GRANTEES IN
	THE AREAS OF PERFORMING ARTS, EMERGING FIELDS, AND LITERATURE.81 GRANTS
	WERE ALSO AWARDED THROUGH THE MULTI-ARTS PRODUCTIONS FUND AND 20
	THROUGH THE ARTS WRITERS GRANT PROGRAM. BOTH OF THESE PROGRAMS GAVE
	FOLLOW UP FUNDS TO ARTISTS AND WRITERS AWARDED GRANTS IN PAST YEARS AS
	WELL.
4b	(Code:) (Expenses \$ 842,344 • including grants of \$) (Revenue \$)
	ARTIST SERVICES:
	CREATIVE CAPITAL PROVIDES NON-MONETARY SUPPORT TO GRANTEES IN THE FORM
	OF CONSULTATIONS AND MEETINGS AT KEY MOMENTS IN THE LIVES OF FUNDED
	PROJECTS, ASSISTING WITH PLANNING, MARKETING AND DISTRIBUTION. IN FY 11-12, THE CREATIVE CAPITAL CORE PROGRAM HOSTED THEIR GRANTEE RETREAT
	WITH OVER 300 PARTICIPANTS. THE ARTS WRITERS GRANT PROGRAM CONTINUED TO
	PROVIDE A GROUP OF THEIR GRANT APPLICANTS WITH THE OPPORTUNITY TO MEET
	WITH ARTS WRITINGS PROFESSIONALS FOR ADVICE AND CONSULTATIONS ON THEIR
	WORK. THE ARTS WRITERS GRANT PROGRAM CONVENED A CONFERENCE FOR THEIR
	GRANTEES IN AUGUST 2011.
	GRANIEED IN AUGUSI 2011:
40	(Code:) (Expenses \$859,814 •including grants of \$) (Revenue \$
	ARTIST CAREER DEVELOPMENT:
	THE ARTIST CAREER DEVELOPMENT PROGRAM OFFERS SKILLS BUILDING WORKSHOPS
	TO CREATIVE CAPITAL GRANTEES IN THE SUBJECTS OF FUNDRAISING, PUBLIC
	RELATIONS, MARKETING, STRATEGIC PLANNING AND INTERNET SKILLS. THE
	PROGRAM ALSO OFFERS WORKSHOPS AND WEBINARS NATIONWIDE IN PARTNERSHIP
	WITH ARTS AGENCIES FOR NON-GRANTEE ARTISTS. IN FY 11-12, 56 OF THESE
	WORKSHOPS AND WEBINARS WERE OFFERED, REACHING OVER 1,232 ARTISTS.
	·
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► 7,496,590.
	Form 990 (2011)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		х
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8	X	
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	טדו		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? 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,			37
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
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	х	
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		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20 a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	000	

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			Х
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	LI		
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			37
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			Х
25-	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	Did the organization raceive any payment from or engage in any transaction with a controlled entity within the meaning of	35a		21
Б	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		\ _V	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	238			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
	(gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	30			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		Х
b	If "Yes," enter the name of the foreign country: ▶	_				
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A			_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		•	5b		_^
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
Va	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible?			6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contribut			- Ou		
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		i	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		· · · · · · · · · · · · · · · · · · ·	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		The state of the s	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, boats, airplanes, or other vehicles, did the organization of cars, airplanes, or other vehicles, did the organization of cars, airplanes, airp		1	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Di organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at a			0		
9	Sponsoring organizations maintaining donor advised funds.	arry tirr	ie during the year:	8		
	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
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:					
	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
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	12b				
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.					
a	Enter the amount of reserves the organization is required to maintain by the states in which the	125				
_	organization is licensed to issue qualified health plans	13b 13c				
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b		 -
			·····		990 (2011)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to mile eq. es, or rest serior, decerned the circumstances, proceeded, or changes in contended or commented to			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			х
	of officers, directors, or trustees, or key employees to a management company or other person?	3 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	-		
7a		7a		х
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7 4		
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	15		
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion 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		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С		ا ا	Х	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent	14	22	
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
h	Other officers or key employees of the organization	15b	X	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.0.0		
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?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure		-	
17	List the states with which a copy of this Form 990 is required to be filed ► NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) and 990-T (Section 501(c)(3)s only) are	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
00	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza LESLIE SINGER - (212) 598-9900	tion:	_	

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Form **990** (2011)

NY

7TH FL., NEW YORK,

10012

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

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

(A) Name and Title	(B) Average hours per week	box	not c , unle cer an	Pos heck ss pe	more rson	than	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) CATHARINE R. STIMPSON DIRECTOR	1.00	х						0.	0.	0.
(2) SUNNY BATES	1.00	^						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(3) ED COLLOTON	1.00	122						0.	•	<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
(4) RONALD FELDMAN	1100							•	•	
SECRETARY	1.00	x		х				0.	0.	0.
(5) ARCHIBALD L. GILLIES		 								
DIRECTOR EMERITUS	1.00	X						0.	0.	0.
(6) LISA HELLER										
DIRECTOR	1.00	Х						0.	0.	0.
(7) LEWIS HYDE										
DIRECTOR	1.00	Х						0.	0.	0.
(8) COLLEEN JENNINGS-ROGGENSACK										
DIRECTOR	1.00	Х						0.	0.	0.
(9) LYDA KUTH								_	_	_
INTERIM CHAIR & TREASURER	1.00	Х		Х				0.	0.	0.
(10) RICHARD LINKLATER	1	l								
DIRECTOR	1.00	Х						0.	0.	0.
(11) JOHN MORNING	1 00							_		•
DIRECTOR	1.00	Х						0.	0.	0.
(12) JAMES SCHAMUS DIRECTOR	1.00	x						0.	0.	0.
(13) PETER GELLES	1.00	^						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(14) JEFFREY SOROS	1.00	^						0.	0.	<u></u>
DIRECTOR	1.00	x						0.	0.	0.
(15) MICHAEL STIPE	1.50	+						•		
DIRECTOR	1.00	x						0.	0.	0.
(16) FRED WILSON	1	 								
DIRECTOR	1.00	x						0.	0.	0.
(17) JOEL WACHS										
EX-OFFICIO	1.00	Х						0.	0.	0.

132007 01-23-12

	VE CAPITA.								31-1003	904	P	age c
Part VII Section A. Officers, Directors		mple	oyee			ligh	est	Compensated Employ	ees (continued)			
(A)	(B)			•	C)			(D)	(E)		(F)	
Name and title	Average	(do	not c	Pos heck	itior more	than	one	Reportable	Reportable	Es	stimate	∍d
	hours per	box	, unle cer ar	ss pe	rson	is bot	h an	compensation	compensation	an	nount	of
	week (describe	\vdash	T		1)	T	from	from related		other	
	hours for	or director						the organization	organizations (W-2/1099-MISC)		pensa om th	
	related	e or d	tee			sated		(W-2/1099-MISC)	(***2/1099*****130)		anizat	
	organizations	truste	al trus		,ee	m per		(** 2/ 1000 1/1100)			d relat	
	in Schedule	Individual t	Institutional trustee	<u>~</u>	oldm	est co oyee	er			orga	anizati	ons
	O)	Indiv	Instit	Officer	Key employee	Highest compensated employee	Former					
(18) WILLIAM K. BOWES												
DIRECTOR	1.00	X						0.	0.			0 .
(19) SUZI KEATS CORDISH												
CHAIRPERSON	1.00	X		Х				0.	0.			0 .
(20) EVE STEELE												
DIRECTOR	1.00	X						0.	0.			0
(21) DEBORAH RAPPAPORT												
DIRECTOR	1.00	X						0.	0.			0
(22) STEPHEN REILY												
DIRECTOR	1.00	X						0.	0.			0
(23) PAIGE WEST												
DIRECTOR	1.00	X						0.	0.			0
(24) RUBY LERNER									_	_		
EX-OFFICIO	40.00			Х				198,190.	0.	2	0,7	00
(25) LESLIE SINGER									_			
CHIEF FINANCIAL OFFICER	40.00			Х				121,679.	0.	1	5,3	45
(26) FRANCES ALYSON POU									_			
DIRECTOR OF PDP PROGRAM	40.00					Х		145,276.	0.		6,9	
1b Sub-total								465,145.	0.		3,0	
c Total from continuation sheets to Pa	rt VII, Section A							238,201.	0.		0,3	
d Total (add lines 1b and 1c)								703,346.	0.	8	3,3	<u>69</u>
2 Total number of individuals (including b	out not limited to th	nose	liste	ed a	bove	e) wl	no re	eceived more than \$100	,000 of reportable			_
compensation from the organization	>											!
											Yes	No
3 Did the organization list any former off				-	-	-		-	• •			
line 1a? If "Yes," complete Schedule J										3		Х
4 For any individual listed on line 1a, is the												
and related organizations greater than										4	Х	
5 Did any person listed on line 1a receive					-			-				
rendered to the organization? If "Yes,"	complete Schedu	le J t	for s	uch	pers	son				5		X
Section B. Independent Contractors												
1 Complete this table for your five highes	st compensated in	dene	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of compens	ation t	from	

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

	(A) Name and business address	NONE	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including bu \$100,000 of compensation from the organization	ut not limited to those liste	ed above) who received more than	

\$100,000 of compensation from the organization ► 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2011) CREATIVE									31-160	5982
Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(0				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	=				loyee		the	organizations	compensation
		lirect				l emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		e or c	stee			satec		(***2/1099*****130)		and related
		truste	al tru		iyee	ımpeı				organizations
		Individual trustee or director	In stitutional trustee	er	Key employee	Highest compensated employee	ıer			
		lnd	Insti	Officer	Key	High	Former			
(27) SOPHIE HENDERSON										
DIR OF EXTERNAL AFFAIRS	40.00					Х		128,725.	0.	15,838.
(28) SEAN ELWOOD										
DIR. OF PROGRAMS & INITIAT	40.00					X		109,476.	0.	14,490.
			L							
Total to Part VII, Section A, line 1c								238,201.		30,328.

Pa	rt VII	I Statement of Reven	iue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributi All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines Total. Add lines 1a-1f	1b 1c 1d ons) 1e s, and // 1a-1f: \$	70,449. 50,000. 711,007.	8,831,456.			
Program Service Revenue	2 a b c	PROGRAM FEES		Business Code 711300		282,206.		
Progra Re	g	All other program service reve	nue)	282,206.			
	3 4 5	Investment income (including other similar amounts) Income from investment of tax Royalties	-exempt bond p	proceeds	88,418.			88,418.
	b b	Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities 22,103.	(ii) Other				
	d	and sales expenses Gain or (loss) Net gain or (loss) Gross income from fundraising			22,103.			22,103.
Other Revenue		including \$ 70, 4 contributions reported on line Part IV, line 18 Less: direct expenses	49 • of 1c). See a	44,201. 34,052.				
ğ	с 9 а	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	raising events tivities. See a	>	10,149.			10,149.
	c 10 a	Less: direct expenses Net income or (loss) from gam Gross sales of inventory, less and allowances	ing activities returns a	>				
	11 a	Net income or (loss) from sales Miscellaneous Revenue ADMINISTRATION	s of inventory	Business Code 900099	70,000.	70,000.		
	b c d			900099	71,610.	1,610.		
	12	Total revenue. See instructions.			9,305,942.	353,816.	0.	120,670.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	plete columns (B), (C), and (D). Check if Schedule O contains a response	se to any question in thi	s Part IX		
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	2,885,479.	2,885,479.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	1,720,724.	1,720,724.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	FF 000	FF 000		
	United States. See Part IV, lines 15 and 16	55,000.	55,000.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	252 255	066.060	20 610	FF 001
	trustees, and key employees	372,875.	266,268.	30,612.	75,995
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 200	002 016	112 027	000 611
7	Other salaries and wages	1,376,868.	983,216.	113,037.	280,615
8	Pension plan accruals and contributions (include	FF 100	20 217	4 555	11 211
	section 401(k) and section 403(b) employer contributions)	55,183.	39,317.	4,555.	11,311
9	Other employee benefits	100,434.	71,590.	8,281.	20,563
10	Payroll taxes	138,191.	98,525.	11,388.	28,278
11	Fees for services (non-employees):				
а	Management	14 405	12 206	200	705
b	Legal	14,495.	13,396.	302.	79
С	Accounting	52,278.	48,313.	1,091.	2,874
d	, <u> </u>				
е	Professional fundraising services. See Part IV, line 17	10 554		10 554	
f	Investment management fees	19,554.	F00 404	19,554.	477
g	Other	614,674.	598,494.	15,708.	472 886
12	Advertising and promotion	10,595.	9,265.	444.	
13	Office expenses	76,397.	65,426.	5,648.	5,323
14	Information technology	17,682.	15,463.	740.	1,479
15	Royalties	46 642	40 015	2 142	4 201
16	Occupancy	46,643.	40,215.	2,143.	4,285
17	Travel	197,493.	191,326.		6,167
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	00 600	00 007	7 607	1 740
19	Conferences, conventions, and meetings	89,682.	80,237.	7,697.	1,748
20	Interest				
21	Payments to affiliates	16 600	12 000	1 200	1 200
22	Depreciation, depletion, and amortization	16,682.	13,902.	1,390.	1,390 450
23	Insurance	4,948.	4,048.	450.	450
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	HONORARIUMS	114,882.	114,882.		
b	GRANTEE CONFERENCE	110,470.	110,470.		
c	ADMINISTRATION FEES	70,000.	70,000.		
d	SPECIAL EVENTS	6,847.	-		6,847
	All other expenses	1,034.	1,034.		-
25	Total functional expenses. Add lines 1 through 24e	8,169,110.	7,496,590.	223,040.	449,480
<u> </u>	Joint costs. Complete this line only if the organization		-		-
-	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,549,083.	1	1,544,505.
	2	Savings and temporary cash investments			4,818,751.	2	6,210,045.
	3	Pledges and grants receivable, net			5,942,538.	3	5,770,392.
	4	Accounts receivable, net			7,200.	4	0.
	5	Receivables from current and former officers, di					
		employees, and highest compensated employee	es. Com	plete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sections		-			
		employees' beneficiary organizations (see instru		·		6	
əts	7	Notes and loans receivable, net		T		7	
Assets	8	Inventories for sale or use				8	
⋖	9				34,921.	9	90,118.
		Land, buildings, and equipment: cost or other	I I		<u> </u>		5 6 7 = = 5 1
		basis. Complete Part VI of Schedule D	102	184,398.			
	b	Less: accumulated depreciation		154,594.	21.523.	10c	29,804.
	11	Investments - publicly traded securities			21,523. 1,777,366.	11	1,784,343.
	12	Investments - other securities. See Part IV, line			2777775000	12	2770173131
	13	Investments - other securities. See Part IV, line Investments - program-related. See Part IV, line				13	
	14			IT.		14	
		Intangible assets			18,200.	15	18,400.
	15 16	Other assets. See Part IV, line 11			14,169,582.	16	15,447,607.
	17	Total assets. Add lines 1 through 15 (must equ			485,477.	17	479,410.
	l	Accounts payable and accrued expenses	103,111	18	175,000.		
	18 19	Grants payable		19	173,000.		
	20	Deferred revenue				20	
"	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete			21		
Liabilities	22	Payables to current and former officers, director				21	
ij	22	highest compensated employees, and disqualifi					
E.		of Coloradula I	-			20	
	22					22	
	23 24	Secured mortgages and notes payable to unrela				24	
	25	Unsecured notes and loans payable to unrelate Other liabilities (including federal income tax, pa				24	
	23	parties, and other liabilities not included on lines	,				
		0 1 1 1 5				25	
	26	Total liabilities. Add lines 17 through 25			485,477.	26	654,410.
		Organizations that follow SFAS 117, check he	are 🕨	X and complete	200,2111	20	001/1100
s		lines 27 through 29, and lines 33 and 34.		and complete			
ဥ	27	Unrestricted net assets			1,934,737.	27	2,177,668.
alar	28	Temporarily restricted net assets		T	10,723,368.	28	11,589,529.
Ä	29				1,026,000.	29	1,026,000.
Ē		Organizations that do not follow SFAS 117, c	heck he	re D and	=,==,,		=,:=:,::0:
Ĕ		complete lines 30 through 34.	neek ne				
ts c	30	Capital stock or trust principal, or current funds				30	
SSe	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	l	Retained earnings, endowment, accumulated in				32	
Ne.	32				13,684,105.	33	14,793,197.
	33	Total liabilities and not assets/fund balances			14,169,582.	34	15,447,607.
	34	Total liabilities and net assets/fund balances			T-1107,304.	J 4	

OIII	1990 (2011)				ıα	ye •-	
Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI					X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,30			
2	Total expenses (must equal Part IX, column (A), line 25)	2		8,169,110 1,136,832			
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	13	,68		$\frac{05.}{40.}$	
5							
6							
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII					LX	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	<u> </u>	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule ().				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	ıdit				
	Act and OMB Circular A-133?			За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	dit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b			
				Form	990	2011)	

SCHEDULE A

Department of the Treasury Internal Revenue Service

(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. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number 31-1605982

Pa	rt I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this parl	t.) See inst	tructions.				
The o	organ			because it is: (For lines 1									
1				s, or association of churc).				
2		A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Scl	hedule E.)								
3				tal service organization of		in section	170(b)(1)	A)(iii).					
4		A medical res	search organization	operated in conjunction	with a hos	pital descr	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter th	ne hospital's	nam	e,
		city, and state	e:										
5		An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governi	mental uni	t describe	ed in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6		A federal, sta	te, or local governm	ent or governmental unit	describe	d in sectio	n 170(b)(1	I)(A)(v).					
7	X	An organizati	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ental unit o	or from the	general p	oublic describ	oed ir	n
			b)(1)(A)(vi). (Comple										
8				ection 170(b)(1)(A)(vi). (Complete	Part II.)							
9		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from											
				nctions - subject to certa									
				axable income (less sect									
			509(a)(2). (Complete			•		•	,				
10		An organizati	on organized and op	perated exclusively to tes	st for publ	ic safety. S	See sectio	n 509(a)(4	1).				
11		An organizati	on organized and op	perated exclusively for th	ne benefit (of, to perfo	rm the fur	nctions of,	or to carry	y out the	purposes of	one c	or
		more publicly	supported organiza	tions described in section	on 509(a)(1) or section	n 509(a)(2	2). See sec	ction 509(a	a)(3). Che	ck the box th	nat	
		describes the	type of supporting	organization and comple	ete lines 1	1e through	11h.						
		a Type I	b	☐ Type II c	: 🔲 тур	e III - Func	tionally int	egrated		d 🗀	Type III - Ot	her	
е		By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified p	ersons othe	r thai	n
		foundation m	anagers and other t	han one or more publicly	supporte	d organiza	tions desc	cribed in s	ection 509	9(a)(1) or s	section 509(a	a)(2).	
f		If the organiza	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
		supporting or	rganization, check th	nis box									
g		Since August	17, 2006, has the o	rganization accepted an									
		(i) A persor	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	lescribed i	in (ii) and (i	iii) below,		Yes	No
		the gove	erning body of the su	upported organization?							. 11g(i)		
		(ii) A family	member of a persor	described in (i) above?							. 11g(ii)		
		(iii) A 35% c	controlled entity of a	person described in (i) o	or (ii) above	∍?					. 11g(iii)		
h		Provide the fo	ollowing information	about the supported org	ganization	(s).							
(i)	Name	of supported	(ii) EIN	(iii) Type of	r ,	rganization			(vi) Is organizatio		(vii) Amo	unt of	f
	orga	inization	, ,	organization (described on lines 1-9	. ,	sted in your	organizat		(i) organiza U.S.	ed in the	suppo	ort	
				above or IRC section	governing	document?	(i) of your	Supports	U.S.	.?			
				(see instructions))	Yes	No	Yes	No	Yes	No			
Гotа	I												

 $\ensuremath{\mathsf{LHA}}$ For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-1

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	, ,	, ,	, ,	, ,	, ,	, ,
	membership fees received. (Do not						
	include any "unusual grants.")	10123071.	8921971.	5314707.	6034804.	8831456.	39226009.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	10123071.	8921971.	5314707.	6034804.	8831456.	39226009.
	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)						28043777.
6	Public support. Subtract line 5 from line 4.						11182232.
	ction B. Total Support						<u>I</u>
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	10123071.	8921971.	5314707.	6034804.	8831456.	(f) Total 39226009 •
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	290,217.	100,276.	48,110.	90,107.	88,418.	617,128.
9	Net income from unrelated business	,	,	· · · · · · · · · · · · · · · · · · ·	,	· · · · · · · · · · · · · · · · · · ·	•
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	82,688.	39,792.	36,355.	30,908.	71.610.	261,353.
11	Total support. Add lines 7 through 10	, , , , ,	7,10	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			40104490.
	Gross receipts from related activities	etc (see instruction	ons)			12	
	First five years. If the Form 990 is fo						
	organization, check this box and sto	~			•		
Sec	ction C. Computation of Pub						
14	Public support percentage for 2011 (line 6, column (f) di	vided by line 11, c	olumn (f))		14	27.88 %
	Public support percentage from 2010					15	29.76 %
	33 1/3% support test - 2011. If the					nore, check this bo	ox and
	stop here. The organization qualifies	-					
b	33 1/3% support test - 2010. If the						
	and stop here. The organization qua						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets t						
	organization meets the "facts-and-cir		•				
18	Private foundation. If the organization						
	ato iodiidationi ii tile organizatio	and the chicon a	10, 10, 10	a, 100, 170, 01 17k	, 51100K 1110 DUX 4		o

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

qualify under the tests listed be Section A. Public Support	low, please com	piete Part II.)				
	(-) 0007	(h) 0000	(=) 0000	(4) 004 0	(6) 0044	(6) T-1-1
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose					1	
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 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 line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 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						
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 IV.)						
13 Total support (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax year as a secti	on 501(c)(3) organiz	zation,
	· ·					
-						
check this box and stop here	c Support Pe	rcentage				
check this box and stop here	c Support Pe	rcentage				%
check this box and stop here	c Support Pe ne 8, column (f) d	rcentage ivided by line 13, o	column (f))			<u>%</u>
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (line	c Support Pe ne 8, column (f) d Schedule A, Part	rcentage livided by line 13, o III, line 15	column (f))		15	
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves	c Support Pe ne 8, column (f) d Schedule A, Part tment Incom	rcentage livided by line 13, o III, line 15 e Percentage	column (f))		15 16	%
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves 17 Investment income percentage for 20	c Support Pe ne 8, column (f) d Schedule A, Part tment Incom 11 (line 10c, colur	rcentage livided by line 13, of III, line 15 e Percentage mn (f) divided by line	column (f))ne 13, column (f))		15 16	
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves 17 Investment income percentage from 2018 18 Investment income percentage from 2019	c Support Pe ne 8, column (f) d Schedule A, Part tment Incom 11 (line 10c, colur 010 Schedule A,	rcentage livided by line 13, of lill, line 15 e Percentage mn (f) divided by line Part III, line 17	ne 13, column (f))		15 16 17 18	% % %
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves 17 Investment income percentage from 2 18 Investment income percentage from 2 19a 33 1/3% support tests - 2011. If the computation of the section 2 19a 33 1/3% support tests - 2011.	c Support Pe ne 8, column (f) d Schedule A, Part tment Incom 11 (line 10c, colur 010 Schedule A, organization did r	ivided by line 13, on the line 15 in the line 15 in the line 15 in the line 17 in	ne 13, column (f))	e 15 is more than	15 16 17 18 33 1/3%, and line	% % %
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves 17 Investment income percentage for 201 18 Investment income percentage from 2 19a 33 1/3% support tests - 2011. If the comore than 33 1/3%, check this box an	c Support Pe ne 8, column (f) d Schedule A, Part tment Incom 11 (line 10c, colur 010 Schedule A, organization did r d stop here. The	ivided by line 13, of III, line 15 e Percentage mn (f) divided by line 17 not check the box a organization qual	ne 13, column (f)) on line 14, and line ifies as a publicly	e 15 is more than supported organi	15 16 17 18 33 1/3%, and line relation	% % % 17 is not
check this box and stop here Section C. Computation of Public 15 Public support percentage for 2011 (lin 16 Public support percentage from 2010 Section D. Computation of Inves 17 Investment income percentage from 2 18 Investment income percentage from 2 19a 33 1/3% support tests - 2011. If the computation of the section 2 19a 33 1/3% support tests - 2011.	ne 8, column (f) d Schedule A, Part tment Incom 11 (line 10c, colur 010 Schedule A, organization did r d stop here. The organization did r	ivided by line 13, or lill, line 15 e Percentage mn (f) divided by line 17 not check the box as organization quality or check a box or	on line 14, and line ifies as a publicly so line 14 or line 19a	e 15 is more than supported organi a, and line 16 is m	15 16 17 18 33 1/3%, and line reation 17 18 17 18 17 18 17 18 18	%

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

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

THE ORGANIZATION MEETS THE 10% FACTS AND CIRCUMSTANCES TEST FOR THE

FOLLOWING REASONS: (1) IT HAS A PUBLIC SUPPORT PERCENTAGE IN EXCESS OF THE

10% OF SUPPORT LIMITATION; (2) IT IS ORGANIZED AND OPERATED TO ATTRACT NEW

AND ADDITIONAL PUBLIC OR GOVERNMENTAL SUPPORT ON A CONTINUOUS BASIS; (3)

IT HAS A REPRESENTATIVE GOVERNING BODY; (4) IT PROVIDES FACILITIES OR

SERVICES DIRECTLY FOR THE BENEFIT OF THE GENERAL PUBLIC ON CONTINUOUS

BASIS; (5) MEMBERS OF THE PUBLIC HAVING SPECIAL KNOWLEDGE OR EXPERTISE,

PUBLIC OFFICIALS OR COMMUNITY LEADERS PARTICIPATE IN OR SPONSOR PROGRAMS

OF THE ORGANIZATION AND (6) IT MAINTAINS A DEFINITIVE PROGRAM FOR

ACCOMPLISHING ITS CHARITABLE WORK IN THE COMMUNITY.

10% OF SUPPORT LIMITATION: THE ORGANIZATION HAS A PUBLIC SUPPORT PERCENTAGE
OF 27.88% FOR THE YEAR ENDED 6/30/12 BASED ON AGGREGATE FINANCIAL
INFORMATION FOR THE YEARS ENDED 6/30/08 THROUGH 6/30/12. THIS AMOUNT IS IN
EXCESS OF THE 10% REQUIRED BY REGULATION SECTION 1.170A-(9)(E)(3)(I).

ATTRACTION OF ADDITONAL PUBLIC SUPPORT: CREATIVE CAPITAL HAS A DEDICATED DEVELOPMENT DEPARTMENT OF THREE FULL-TIME STAFF MEMBERS WHO WORK ON FUNDRAISING AND SOLICITATIONS FROM A DIVERSE BASE OF DONORS, IN ADDITION TO THE ONGOING DONOR CULTIVATION WORK OF OUR EXECUTIVE DIRECTOR.

FUNDRAISING ACTIVITIES INCLUDE SPECIAL EVENTS, GRANT SUBMISSIONS TO FOUNDING FUNDERS, CULTIVATION OF INDIVIDUAL DONORS, ANNUAL FUNDRAISING APPEAL, AND OUR NEW COMMUNITY-SUPPORTED ARTIST CAMPAIGN. OUR DONORS INCLUDE MAJOR FOUNDATIONS, FAMILY FOUNDATIONS, MAJOR INDIVIDUAL GIFTS, AND SMALL CONTRIBUTIONS FROM OUR COMMUNITY OF ARTISTS. SINCE FISCAL YEAR 2008-09, OUR GIVING FROM THE BOARD OF DIRECTORS, INDIVIDUALS AND FAMILY FOUNDATIONS HAS GROWN 71%. IN 2012, OUR BENEFIT AUCTION WAS OUR MOST

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

SUCCESSFUL ANNUAL FUNDRAISING EVENT TO DATE.

REPRESENTATIVE GOVERNING BODY: CREATIVE CAPITAL'S BOARD OF DIRECTORS IS

COMPRISED OF SOME 20 INDIVIDUALS FROM ACROSS THE COUNTRY WHO HAVE

SPECIALIZED KNOWLEDGE IN A WIDE VARIETY OF ARTISTIC DISCIPLINES
INCLUDING FILM, VISUAL AND PERFORMING ARTS, AND LITERATURE - AS WELL AS

OTHER PROFESSIONS, SUCH AS HIGHER EDUCATION, BUSINESS, MARKETING AND

VENTURE CAPITAL INVESTMENTS. ALL OF OUR BOARD MEMBERS SUPPORT CREATIVE

CAPITAL'S MISSION OF PROVIDING FUNDING AND SERVICES TO A BROAD ARRAY OF

ARTISTS ACROSS THE COUNTRY, BUT BOARD MEMBERS DO NOT MAKE THE SELECTION OF

THE ARTIST SUPPORTED.

PROVISION OF FACILITIES OR SERVICES: CREATIVE CAPITAL'S PROFESSIONAL

DEVELOPMENT PROGRAM, WHICH INCLUDES OUR ONGOING SERIES OF AFFORDABLE

ONLINE WEBINARS, PROVIDES ARTISTS ACROSS THE COUNTRY WITH TRAINING IN

BUSINESS PLANNING, BUDGETING, MARKETING, PROMOTION AND OTHER SKILLS THAT

SUPPORT THEIR ENTREPRENEURSHIP AND CAREER DEVELOPMENT.

PARTICIPATION IN AND SPONSORING OF PROGRAMS: CREATIVE CAPITAL IS ONE OF
THE FEW NATIONAL ORGANIZATIONS THAT AWARDS GRANTS TO INDIVIDUAL ARTISTS
THROUGH AN OPEN APPLICATION PROCESS, AND WE RECEIVE 2,700-3,200
APPLICATIONS FROM ARTISTS FOR EACH GRANT DEADLINE. CREATIVE CAPITAL
INVITES ARTS PROFESSIONALS AND SPECIALISTS IN CONTEMPORARY ARTISTIC
PRACTICE TO PARTICIPATE IN OUR GRANTMAKING PROCESS. THESE OUTSIDE ART
PROFESSIONALS REVIEW THE APPLICATIONS AND ULTIMATELY RECOMMEND THE GRANT
RECIPIENTS FROM AMONG THESE SUBMISSIONS. WE ALSO INVITE MORE THAN 150
PROFESSIONALS IN THE ARTS AND OTHER FIELDS TO PARTICIPATE IN OUR ARTIST
RETREAT, WHERE THEY SHARE THEIR KNOWLEDGE, SKILLS AND ADVICE WITH OUR

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

 $\begin{array}{c} \textbf{Employer identification number} \\ 31-1605982 \end{array}$

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	unds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Pai			
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied 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
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		anization during the tax
	year▶	, , , ,	9
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	· · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	• • •	
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizar		
	conservation easements.		
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	hibition, education, or research in furtherance	of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ea	ducation, or research in furtherance of public s	service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		• \$
2	If the organization received or held works of art, historical tre		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$0.
b	Assets included in Form 990, Part X		

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CDDNTTTD	CXDTMXT	FOUNDATION
LKEATIVE	CAPITAL	FUUNIJAT LUN

	t III Organizations Maintaining C	collections of Ar			r Oth	er Simil		ts (cont			
3	Using the organization's acquisition, accessi										
Ū	(check all that apply):	on, and other record	s, check any or the	Tollowing that	arcas	igimicant	use of its	CONCCIO	II ILCII	13	
а	Public exhibition	d	I can or excl	hange prograi	me						
b	Scholarly research	e	77 777	TiD FOR	TNV	ESTME	NΤ				
C	Preservation for future generations	e	CIL Other	<u> </u>							
4	Provide a description of the organization's co	allections and evaluin	n how they further th	he organizatio	n'e ava	mnt nurn	osa in Par	+ YIV			
5	During the year, did the organization solicit o						ose iii ai	L XIV.			
3	to be sold to raise funds rather than to be ma							Yes	X	☐ No	
Par	t IV Escrow and Custodial Arran									<u> </u>	
1 0	reported an amount on Form 990, Par		ote ii trie organizatio	ii answered	103 10	1 01111 330), i ait iv,	J, OI			
	Is the organization an agent, trustee, custodi		liary for contribution	s or other ass	sets not	included					
	on Form 990, Part X?		•					Yes		□No	
h	If "Yes," explain the arrangement in Part XIV							_ 100		_ 110	
~	Too, explain the arrangement in rail 74.	and complete the re	noving table.					Amoun			
c	Beginning balance					1c		7 4110 411			
	d Additions during the year 1d e Distributions during the year 1e										
f Ending balance 1f											
	Did the organization include an amount on Fe	orm 990 Part X line	217					Yes	$\neg \Box$	No	
	If "Yes," explain the arrangement in Part XIV.										
	t V Endowment Funds. Complete it		swered "Yes" to Fo	rm 990, Part I	V, line 1	10.					
	·	(a) Current year	(b) Prior year	(c) Two years		(d) Three	years back	(e) Four	years	back	
1a	Beginning of year balance	1,137,928.	1,026,000.	1,026		1,0	26,000.	` ′			
	Contributions										
	Net investment earnings, gains, and losses	10,650.	111,928.								
	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance	1,148,578.	1,137,928.	1,026	,000.	1,0	26,000.				
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	a)) held as:							
а	Board designated or quasi-endowment		%								
	Permanent endowment > 89.33	%	_								
	Temporarily restricted endowment ▶ 1	0.6 7 %									
	The percentages in lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administer	ed for t	he organi	zation	_			
	by:								Yes	No	
	(i) unrelated organizations							3a(i)		Х	
	(ii) related organizations							3a(ii)		Х	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedule R?					3b			
4	Describe in Part XIV the intended uses of the										
Par	t VI Land, Buildings, and Equipm	nent. See Form 990	, Part X, line 10.								
	Description of property	(a) Cost or of basis (investment)	1 ' '			ccumulate preciation		(d) Boo	k valu	е	
	Land										
	Buildings										
	Leasehold improvements										
	Equipment		18	4,398.		154,5	94.	2	9,8	04.	
	Other										
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0(c).)				2	9,8	04.	

Part VIII III Vestillerits - Other Securities.	see Form 990, Part X, III	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valua	
			or ond or your mar	Not value
(1) Financial derivatives				
(2) Closely-held equity interests(3) Other	•			
(A) (B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	Soo Form 000 Dort V I	ino 12		
			(c) Method of valua	ution:
(a) Description of investment type	(b) Book value	Cos	st or end-of-year mar	
(1)				
(1)				
(2)				
(3)				
(4)				
<u>(5)</u> (6)				
<u>(7)</u> (8)				
<u>(9)</u> (10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, lir				
	a) Description			(b) Book value
(1)	, ,			()
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) li	ine 15)			
Part X Other Liabilities. See Form 990, Part X				
1. (a) Description of liability	,	(b) Book value		
(1) Federal income taxes		. ,		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11) Tatal (Column (b) must equal Form 990, Part V, col (P) (ii	ino 25)			
Total. (Column (b) must equal Form 990, Part X, col (B) li	e to the organization's financial	statements that reports the organi	zation's liability for uncertain	in tax positions under

2. FIN 48 (ASC 740). 132053 01-23-12

Sche	dule D (Form 990) 2011 CREATIVE CAPITAL FOUNDATION	[31-	1605982 _{Page} 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audite	ed Financial	State	ment	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			9,305,942.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			8,169,110.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			1,136,832.
4	Net unrealized gains (losses) on investments		4			-27,740.
5	Donated services and use of facilities		5			
6	Investment expenses					
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		_			
9	Total adjustments (net). Add lines 4 through 8		9			-27,740.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and					1,109,092.
Pa	t XII Reconciliation of Revenue per Audited Financial Statemer				eturr	
1	Total revenue, gains, and other support per audited financial statements				1	9,409,417.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
	Net unrealized gains on investments	2a	-27,7	/40.		
b	Donated services and use of facilities	2b	150,7	769.		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d				
е	Add lines 2a through 2d				2e	123,029.
3	Subtract line 2e from line 1				3	9,286,388.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,5	554.		
b	Other (Describe in Part XIV.)	4b				
	Add lines 4a and 4b				4c	19,554.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	9,305,942.
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme					
1	Total expenses and losses per audited financial statements				1	8,300,325.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		450 5	7.60		
а	Donated services and use of facilities	2a	150,7	/69.		
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				150 560
е	Add lines 2a through 2d				2e	150,769.
3	Subtract line 2e from line 1				3	8,149,556.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	10 -	4		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	19,5	054.		
	Other (Describe in Part XIV.)	4b				10 554
	Add lines 4a and 4b				4c	19,554.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		<u></u>		5	8,169,110.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information. PART V, LINE 4: TO GENERATE INCOME TO SUPPORT ARTISTS' PROGRAMS

PART X, LINE 2: MANAGEMENT HAS REVIEWED THE TAX POSITIONS FOR EACH OF THE OPEN TAX YEARS (2009-2011) OR EXPECTED TO BE TAKEN IN CCF'S 2012 TAX RETURN AND HAS CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization					Employer identi	fication number
CREATIVE CAPITA	L FOUNDA	TION			31-160598	32
			tside the United States. Comple	ete if the orgar		
to Form 990, Par						
			ds to substantiate the amount of its gra			
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	grants or ass	istance?LX	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and o	ther assistance ou	tside the
United States.		J		J		
3 Activities per Region. (T	he following Parl	t I, line 3 table ca	an be duplicated if additional space is r	needed.)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION			52,000.
						1 - 7
EAST ASIA AND THE			GRANTS TO RECIPIENTS			
PACIFIC	0	0	LOCATED IN REGION			3,000.
0 - 0 - 1 - 1 - 1	0	0				EE 000
3 a Sub-total	⁰	l				55,000.
b Total from continuation sheets to Part I	0	0				0.
c Totals (add lines 3a	0	0				55 000.

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recipient who rec	ceived more than \$5,0	000. Check this box if no	Outside the United States. o one recipient received more		rganization answered	d "Yes" to Form 9	90, Part IV, line 15, fo	r any
Part II can be du 1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Pagion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
the IRS, or for which t	the grantee or counse	el has provided a section	recognized as charities by th n 501(c)(3) equivalency letter					
3 Enter total number of	other organizations of	or entities				<u> </u>	Scher	tule F (Form 990) 2011

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

Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (d) Amount of (g) Description of (c) Number of (e) Manner of (f) Amount of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement non-cash non-cash assistance assistance EAST ASIA AND THE FOLLOW UP GRANTS PACIFIC 1 3,000 CHECK PAYMENT 0. 3 INITIAL GRANTS EUROPE 52,000 CHECK PAYMENT 0.

Part IV | Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

CREATIVE CAPITAL FOUNDATION Schedule F (Form 990) 2011 Part V **Supplemental Information** Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column

(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. SCHEDULE F, PART I, LINE 2: WE MONITOR THE USE OF GRANT FUNDS THROUGH THE FUNDING REQUESTS AND FINAL REPORTS THAT WE RECEIVE FROM GRANTEES. IN ADDITION, THE ORGANIZATION RECEIVES INFORMATION ON A REGULAR BASIS FROM GRANTEES REGARDING THE STATUS OF THE FUNDED PROJECTS FROM THE INITIAL PHASE THROUGH PREMIERE AND BEYOND.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization							ntification number
	E CAPITAL FOUNDATI					31-1605	
Part I Fundraising Activities required to complete this par	 Complete if the organization answer t. 	ered "\	'es" to	Form 990, Part IV,	line 1	7. Form 990-EZ	Ifilers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid ind compensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual tart VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-govern govern dising of ding of ional f	overnment grants nment grants events fficers, directors, tru- fundraising services?	stees	Yes Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
			_				
Total List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	utions	 s or has been notified	d it is	exempt from re	egistration

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

Schedule G (Form 990 or 990-EZ) 2011

		le G (Form 990 or 990-EZ) 2011 CREATIV				-1605982 Page 2
Pa	ITT I					
—		of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	pis greater than \$5,000.
			MAY 10	(b) Everit #2	NONE	(d) Total events
			BENEFIT AUCT		NONE	(add col. (a) through
					(total number)	col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	114,650.			114,650.
	2	Less: Charitable contributions	70,449.			70,449.
	3	Gross income (line 1 minus line 2)	44,201.			44,201.
	4	Cash prizes				
ses	5	Noncash prizes				
Expen	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	24 252			34,052.
	10	Direct expense summary. Add lines 4 throug			•	(34,052
		Net income summary. Combine line 3, colum	n (d) and line 10			10,149.
Pa			answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	· · · · · ·
		\$15,000 on Form 990-EZ, line 6a.			•	
4		,	() D:	(b) Pull tabs/instant	() () ()	(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
۳ ا	1	Gross revenue				
ses	2	Cash prizes				
ect Expenses	3	Noncash prizes				
ig E	_	-				
Dir	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	└── No	└── No	No No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		>	(
	8	Net gaming income summary. Combine line	1, column d, and line 7		>	
		ter the state(s) in which the organization opera	_			
		he organization licensed to operate gaming a	ctivities in each of these s	states?		L Yes No
b	14 111	No," explain:				
	_					
	 We	ere any of the organization's gaming licenses r			/ear?	Yes No

Schedule G (Form 990 or 990-EZ) 2011

Sch	edule G (Form 990 or 990-EZ) 2011 CREATIVE CAPITAL FOUNDATION 31-	T002	982	Page 3
11	Does the organization operate gaming activities with nonmembers?	. LJ1	′ es	└── No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		′ es	☐ No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		%
	An outside facility			<u></u> %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	D	′ es	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$\bigs\\$ and the amount			
С	of gaming revenue retained by the third party ▶\$ If "Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	L \	′ es	└─ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year ▶ \$			
Pa	rt IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v)	, and	Part III,
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional informati	on (see ir	struc	tions).
		•		,

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

➤ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	E CAPITAL I	TOTINDATTON					Employer identification number 31-1605982
Part I General Information on Grant		OUNDITION					31 1003302
Does the organization maintain record	ds to substantiate th	ne amount of the grant	s or assistance. the	e grantees' eligibilit	tv for the grants or ass	sistance, and the selec	
criteria used to award the grants or a							X Yes No
2 Describe in Part IV the organization's	procedures for mon	itoring the use of gran	t funds in the Unite	d States.			
Part II Grants and Other Assistance	to Governments ar	d Organizations in th	ne United States. C	Complete if the org	anization answered "\	es" to Form 990, Parl	: IV, line 21, for any
recipient that received more that	an \$5,000. Check th	is box if no one recipie	ent received more th	nan \$5,000. Part I	I can be duplicated if	additional space is nee	eded ▶
1 (a) Name and address of organization or government	n (b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
BETH MORRISON PROJECTS							PROJECT /ORGANIZATION
305 E 93RD ST APT 4B							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10128	20-8422447	501(C)(3)	43,811.	0.			FUNDING
							PERFORMING ARTISTS
CROSS PERFORMANCE, INC.							PROJECT /ORGANIZATION
140 SECOND AVENUE							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10003	13-3335670	501(C)(3)	50,788.	0.			FUNDING
							PERFORMING ARTISTS
DANCE THEATER WORKSHOP							PROJECT /ORGANIZATION
219 WEST 19TH STREET							INFRASTRUCTURE SUPPORT
NEW YORK, NY 11232	13-6206608	501(C)(3)	95,788.	0.			FUNDING
							PERFORMING ARTISTS
FRACTURED ATLAS PRODUCTIONS, INC	•						PROJECT /ORGANIZATION
248 W 35TH ST, 10TH FLOOR							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10001-2505	11-3451703	501(C)(3)	102,000.	0.			FUNDING
HAKEAKALA INC.							
512 WEST 19TH STREET							PERFORMING ARTISTS
NEW YORK, NY 10011	13-2803557	501(C)(3)	37,553.	0.			PROJECT FUNDING
							PERFORMING ARTISTS
HEADLONG DANCE THEATER							PROJECT /ORGANIZATION
1170 S BROAD ST							INFRASTRUCTURE SUPPORT
PHILADELPHIA, PA 19146	23-2803557	501(C)(3)	28,790.	0.			FUNDING
2 Enter total number of section 501(c)(3	3) and government o	rganizations listed in t	he line 1 table				<u>71.</u>
3 Enter total number of other organizati	ons listed in the line	1 table					

Part II Continuation of Grants and Other	er Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
HERE ARTS CENTER							PROJECT /ORGANIZATION
145 SIXTH AVE							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10013	13-3449416	501(C)(3)	40,500.	0.			FUNDING
							PERFORMING ARTISTS
ON THE BOARDS							PROJECT /ORGANIZATION
100 WEST ROY ST							INFRASTRUCTURE SUPPORT
SEATTLE , WA 98105	91-1081983	501(C)(3)	50,788.	0.			FUNDING
							PERFORMING ARTISTS
RUDE MECHANICALS							PROJECT /ORGANIZATION
2211A HIDALGO ST							INFRASTRUCTURE SUPPORT
AUSTIN, TX 78702	74-2885150	501(C)(3)	34,282.	0.			FUNDING
							PERFORMING ARTISTS
SPRINGBOARD FOR THE ARTS							PROJECT /ORGANIZATION
308 PRINCE ST, STE 270							INFRASTRUCTURE SUPPORT
ST. PAUL, MN 55101	41-1690483	501(C)(3)	50,600.	0.			FUNDING
							PERFORMING ARTISTS
A CONTEMPORARY THEATRE INC.							PROJECT /ORGANIZATION
700 UNION ST							INFRASTRUCTURE SUPPORT
SEATTLE, WA 98101	91-0787792	501(C)(3)	25,035.	0.			FUNDING
							PERFORMING ARTISTS
ALLIED MEDIA							PROJECT /ORGANIZATION
4126 THIRD STREET							INFRASTRUCTURE SUPPORT
DETROIT, MI 48201	01-0559608	501(C)(3)	44,440.	0.			FUNDING
·			<u> </u>				PERFORMING ARTISTS
ARTSPORT PRODUCTIONS							PROJECT /ORGANIZATION
6100 CANAL BLVD							INFRASTRUCTURE SUPPORT
NEW ORLEANS, LA 70124	72-1499547	501(C)(3)	27,500.	0.			FUNDING
<u> </u>			, , , , , , , , , , , , , , , , , , ,				PERFORMING ARTISTS
AUTOMATA							PROJECT /ORGANIZATION
1920 N. HILLHURST AVE#400							INFRASTRUCTURE SUPPORT
LOS ANGELES, CA 90027	30-0259101	501(C)(3)	34,282.	0.			FUNDING
,				- •			PERFORMING ARTISTS
BIG TREE							PROJECT /ORGANIZATION
402 HORATIO ST. #46							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10014	13-4200666	501(C)(3)	38,091.	0.			FUNDING

Part II Continuation of Grants and Other	er Assistance to Go		nizations in the U	nited States (Sch	edule I (Form 990), Pa		1 100000 Fage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
BRAVA							PROJECT /ORGANIZATION
2781 24TH STREET							INFRASTRUCTURE SUPPORT
SAN FRANCISCO, CA 94110	94-2609353	501(C)(3)	29,203.	0.			FUNDING
							PERFORMING ARTISTS
CBD MUSIC INC							PROJECT /ORGANIZATION
552 RIVERSIDE DRIVE # 3H							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10027	84-1688812	501(C)(3)	22,500.	0.			FUNDING
							PERFORMING ARTISTS
CENTRUM							PROJECT /ORGANIZATION
PO BOX 1158							INFRASTRUCTURE SUPPORT
PORT TOWNSEND, WA 98368	23-7348302	501(C)(3)	37,553.	0.			FUNDING
·							PERFORMING ARTISTS
CIRCUIT NETWORK							PROJECT /ORGANIZATION
499 ALABAMA ST#203							INFRASTRUCTURE SUPPORT
SAN FRANCISCO, CA 94110	94-2917575	501(C)(3)	55,000.	0.			FUNDING
·			,				PERFORMING ARTISTS
CIRCUS AMOK							PROJECT /ORGANIZATION
190 BEDFORD AVE #213							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11201	11-3485125	501(C)(3)	31,294.	0.			FUNDING
·			,				PERFORMING ARTISTS
COLLAPSABLE GIRAFFE							PROJECT /ORGANIZATION
251 PACIFIC ST # 25							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11201	11-3279675	501(C)(3)	86,297.	0.			FUNDING
•			<u> </u>				PERFORMING ARTISTS
CONTRATIEMPO							PROJECT /ORGANIZATION
1702 SOUTH HALSTED							INFRASTRUCTURE SUPPORT
CHICAGO, IL 60608	35-2237428	501(C)(3)	17,550.	0.			FUNDING
,							PERFORMING ARTISTS
CORNERSTONE							PROJECT /ORGANIZATION
708 TRACTION AVE							INFRASTRUCTURE SUPPORT
LOS ANGELES, CA 90013	95-4493498	501(C)(3)	57,137.	0.			FUNDING
	73 1173170		37,137.	, ·			PERFORMING ARTISTS
DANCING IN THE STREETS							PROJECT /ORGANIZATION
928 SIMPSON STREET 6TH FLR							INFRASTRUCTURE SUPPORT
BRONX, NY 10459	11-2706055	501(C)(3)	31,743.	0.			FUNDING
DUCHY, MI IO433	11-2/00033	Por(C)(3)	JI,/43.	١.		1	T. OMPTING

Part II Continuation of Grants and Other			nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	71 1003302
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
DANSOLOGY, INC.							PROJECT /ORGANIZATION
1540 SECOND AVE # 501							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10003	13-4080133	501(C)(3)	53,327.	0.			FUNDING
UNIVERSITY OF CALIFORNIA-SAN DIEGO							
GILMAN DR.,MC0099							PERFORMING ARTISTS
SAN DIEGO, CA 92093	95-6006144	501(C)(3)	34,125.	0.			PROJECT FUNDING
							PERFORMING ARTISTS
EIGHT BLACKBIRD PERFORMING ARTS							PROJECT /ORGANIZATION
ASSOCIATION - 5315 N.CLARK ST#104							INFRASTRUCTURE SUPPORT
- CHICAGO, IL 60640	41-2081766	501(C)(3)	20,000.	0.			FUNDING
							PERFORMING ARTISTS
FIJI THEATER COMPANY, DBA PING							PROJECT /ORGANIZATION
CHONG & CO - 47 GREAT JONES ST 6TH							INFRASTRUCTURE SUPPORT
FL - NEW YORK, NY 10012	13-2874863	501(C)(3)	31,294.	0.			FUNDING
							PERFORMING ARTISTS
FUSEBOX FESTIVAL							PROJECT /ORGANIZATION
400 B.W ALPINE RD							INFRASTRUCTURE SUPPORT
AUSTIN , TX 78704	26-3676365	501(C)(3)	31,294.	0.			FUNDING
							PERFORMING ARTISTS
GAMETOPHYTE, INC							PROJECT /ORGANIZATION
383 CLINTON ST,#1C							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11231	01-0632725	501(C)(3)	10,000.	0.			FUNDING
COMMAN DANCE INC							
GOTHAM DANCE, INC.							DEDECEMENT ADDITION
140 SECOND AVE STE 404	42 264 25 77	504 (5) (2)	12.011	•			PERFORMING ARTISTS
NEW OYORK, NY 10003	13-3618577	501(C)(3)	43,811.	0.			PROJECT FUNDING
HARVESTWORKS OF HANS TAMMEN							
596 BROADWAY #602							PERFORMING ARTISTS
NEW YORK, NY 10012	13-2891159	501(C)(3)	25,500.	0.			PROJECT FUNDING
·			,	<u> </u>			PERFORMING ARTISTS
HEADLANDS CENTER FOR THE ARTS							PROJECT /ORGANIZATION
944 FORT BARRY							INFRASTRUCTURE SUPPORT
SAUSALITO, CA 94965	94-2817843	501(C)(3)	38,091.	0.			FUNDING

Part II Continuation of Grants and Other		overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa		1 1003302 Fage
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE HUMAN FUTURE DANCE CORP.							
140 SECOND AVE STE 404							PERFORMING ARTISTS
NEW YORK, NY 10003	11-3757378	501(C)(3)	50,788.	0.			PROJECT FUNDING
NEW TORK, NT 10005	11 3/3/3/0	501(0/(3/	30,700.	0.			I ROUECT FUNDING
INTERNATIONAL CONTEMPORARY							
ENSEMBLE FDN - 4306 3RD AVE, 4TH							PERFORMING ARTISTS
FLR - BROOKLYN, NY 11232	13-4192400	501(C)(3)	71,803.	0.			PROJECT FUNDING
			,	- •			PERFORMING ARTISTS
INTERNATIONAL WOW COMPANY							PROJECT /ORGANIZATION
324 WEST 71 ST							INFRASTRUCTURE SUPPORT
NEW YORK , NY 10023	13-3931803	501(C)(3)	50,788.	0.			FUNDING
Telli , NI 10025	13 3331003	501(0)(3)	30,700.	,			PERFORMING ARTISTS
KHMER ARTS ACADEMY							PROJECT /ORGANIZATION
375 REDONDO AVE #156							INFRASTRUCTURE SUPPORT
LONG BEACH, CA 90814	01-0740113	501(C)(3)	50,788.	0.			FUNDING
	01 0710110	552(5)(5)	00,7001				PERFORMING ARTISTS
LA POCHA NOSTRA							PROJECT /ORGANIZATION
2857 24TH ST							INFRASTRUCTURE SUPPORT
SAN FRANCISCO, CA 94110	94-3371729	501(C)(3)	20,000.	0.			FUNDING
	71 00/1/25	562(6)(6)	20,000.				PERFORMING ARTISTS
MAPP INTERNATIONAL PRODUCTIONS							PROJECT /ORGANIZATION
140 SECOND AVE #502							INFRASTRUCTURE SUPPORT
NEW YORK , NY 10003	20-4725265	501(C)(3)	90,053.	0.			FUNDING
			1				PERFORMING ARTISTS
MARLBORO COLLEGE							PROJECT /ORGANIZATION
2582 SOUTH ROAD							INFRASTRUCTURE SUPPORT
MARLBORO, VT 05344	03-0179593	501(C)(3)	40,630.	0.			FUNDING
,			, , , , ,				PERFORMING ARTISTS
MUSIC AT THE ANTHOLOGY							PROJECT /ORGANIZATION
260 WEST BROADWAY #5							INFRASTRUCTURE SUPPORT
BNEW YORK, NY 10013	13-4114492	501(C)(3)	38,500.	0.			FUNDING
·			, , ,				PERFORMING ARTISTS
NEW SOUNDS MUSIC(A.K.A PRISIM							PROJECT /ORGANIZATION
QUARTET) - 257 W.HARVEY ST -							INFRASTRUCTURE SUPPORT
PHILADELPHIA, PA 19144	38-2996081	501(C)(3)	22,000.	0.			FUNDING

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	T Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
NEW YORK FOUNDATION FOR THE ARTS							PROJECT /ORGANIZATION
20 JAY ST							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11201	23-7129564	501(C)(3)	60,000.	0.			FUNDING
							PERFORMING ARTISTS
NEW YORK SHAKESPEARE FESTIVEAL/THE							PROJECT /ORGANIZATION
PUBLIC THEATER - 425 LAFAYETTE -							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10003	13-1844852	501(C)(3)	31,743.	0.			FUNDING
							PERFORMING ARTISTS
PAN LEFT PRODUCTIONS							PROJECT /ORGANIZATION
631 S.6TH AVE							INFRASTRUCTURE SUPPORT
TUCSON, AZ 85701	86-0762169	501(C)(3)	20,000.	0.			FUNDING
							PERFORMING ARTISTS
PERFORMANCE SPACE 122							PROJECT /ORGANIZATION
67 WEST ST,#315							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11222	13-3522283	501(C)(3)	27,933.	0.			FUNDING
-							PERFORMING ARTISTS
PIG IRON THEATRE COMPANY							PROJECT /ORGANIZATION
234 HARRIET ST							INFRASTRUCTURE SUPPORT
SOUTH PORTLAND, ME 04106	13-3874192	501(C)(3)	31,294.	0.			FUNDING
							PERFORMING ARTISTS
PILSBURY HOUSE & THEATER							PROJECT /ORGANIZATION
3501 CHICAGO AVE							INFRASTRUCTURE SUPPORT
SOUTH MINNEAPOLIS, MN 55407	41-0916478	501(C)(3)	25,394.	0.			FUNDING
-							PERFORMING ARTISTS
POETRY IN REVIEW FOUNDATION							PROJECT /ORGANIZATION
205 W.89TH STREET #8F							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10024	23-7453274	501(C)(3)	35,500.	0.			FUNDING
·			,				PERFORMING ARTISTS
REGGIE WILSON/FIST AND HEEL							PROJECT /ORGANIZATION
PERFORMANCE GROUP - 476 DEAN ST,#2							INFRASTRUCTURE SUPPORT
- BROOKLYN, NY 11217	04-3702601	501(C)(3)	57,137.	0.			FUNDING
		, , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-			PERFORMING ARTISTS
RUSSIAN RIVERKEEPER							PROJECT /ORGANIZATION
PO BOX 1335							INFRASTRUCTURE SUPPORT
HEALDSBURG, CA 95448	68-0321117	501(C)(3)	21,000.	0.			FUNDING

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PERFORMING ARTISTS
SENS PRODUCTION							PROJECT /ORGANIZATION
140 METROPOLITAN AVE#3							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11211	11-3603090	501(C)(3)	37,553.	0.			FUNDING
							PERFORMING ARTISTS
SHADOWLIGHT PRODUCTIONS							PROJECT /ORGANIZATION
22 CHATTANOOGA ST							INFRASTRUCTURE SUPPORT
SAN FRANCISCO, CA 94114	94-3216800	501(C)(3)	65,053.	0.			FUNDING
							PERFORMING ARTISTS
SOUTHWEST CHAMBER MUSIC							PROJECT /ORGANIZATION
638 E. COLORADO BLVD. SUITE 201							INFRASTRUCTURE SUPPORT
PASADENA , CA 91101	95-4030386	501(C)(3)	37,553.	0.			FUNDING
<i>,</i>			,				PERFORMING ARTISTS
ST. ANN'S WAREHOUSE							PROJECT /ORGANIZATION
45 MAIN ST,#315							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11201	11-2665242	501(C)(3)	43,811.	0.			FUNDING
•			,				PERFORMING ARTISTS
THE CATASTROPHIC THEATRE							PROJECT /ORGANIZATION
1540 SUL ROSS							INFRASTRUCTURE SUPPORT
HOUSTON, TX 77006	75-3244892	501(C)(3)	28,790.	0.			FUNDING
,			,				PERFORMING ARTISTS
THE EDUCATIONAL ALLIANCE							PROJECT /ORGANIZATION
14 ST Y, 344 EAST 14TH STREET							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10003	13-5562210	501(C)(3)	42,500.	0.			FUNDING
•			,				PERFORMING ARTISTS
THE FIELD							PROJECT /ORGANIZATION
161 SIXTH AVE, 14TH FLR							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10013	13-4457408	501(C)(3)	102,500.	0.			FUNDING
•			,				PERFORMING ARTISTS
THE REBUILD FOUNDATION							PROJECT /ORGANIZATION
6918 S.DORCHESTER AVE							INFRASTRUCTURE SUPPORT
CHICAGO, IL 60637	27-1308845	501(C)(3)	10,000.	0.			FUNDING
THE UNIVERSITY CORPORATION, SF	1	1					PERFORMING ARTISTS
STATE UNIVERSITY - 1600 HOLLOWAY							PROJECT /ORGANIZATION
AVE, ADM 361 - SAN FRANCISCO, CA							INFRASTRUCTURE SUPPORT
94132	94-1384645	501(C)(3)	18,000.	0.			FUNDING

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	(5) 2.114	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
							PERFORMING ARTISTS
THEATER ET AL INC/THE CHOCOLATE							PROJECT /ORGANIZATION
FACTORY - 5-49 49TH AVE - LONG							INFRASTRUCTURE SUPPORT
ISLAND, NY 11101	13-4038993	501(C)(3)	25,035.	0.			FUNDING
							PERFORMING ARTISTS
THEATRE MITU							PROJECT /ORGANIZATION
PO BOX 1114,OLD CHELSEA STATION							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10113	03-0539644	501(C)(3)	53,327.	0.			FUNDING
							PERFORMING ARTISTS
THEATRE OF YUGEN							PROJECT /ORGANIZATION
2840 MARIPOSA ST							INFRASTRUCTURE SUPPORT
SAN FRANCISCO, CA 94110	94-2800477	501(C)(3)	44,440.	0.			FUNDING
•			,				PERFORMING ARTISTS
THIN MAN DANCE INC							PROJECT /ORGANIZATION
140 SECOND AVE, #501							INFRASTRUCTURE SUPPORT
NEW YORK, NY 10003	13-3922974	501(C)(3)	53,811.	0.			FUNDING
•			,				PERFORMING ARTISTS
TICKLE THE SLEEPING GIANT							PROJECT /ORGANIZATION
600 FIFTH ST							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11215	33-1020155	501(C)(3)	10,000.	0.			FUNDING
•			,				PERFORMING ARTISTS
TOFTE LAKE CENTER							PROJECT /ORGANIZATION
2209 FERNBERG RD							INFRASTRUCTURE SUPPORT
ELY, MN 55731	13-4359561	501(C)(3)	27,500.	0.			FUNDING
•			, ,				PERFORMING ARTISTS
TOUCHSTONE THEATRE							PROJECT /ORGANIZATION
321 E. 4TH STREET							INFRASTRUCTURE SUPPORT
BETHLEHEM, PA 18015	23-2073331	501(C)(3)	31,294.	0.			FUNDING
,							PERFORMING ARTISTS
TRI-CENTRIC FOUNDATION							PROJECT /ORGANIZATION
1218 CORTELYOU RD 2ND FLR							INFRASTRUCTURE SUPPORT
BROOKLYN, NY 11218	13-3772881	501(C)(3)	33,647.	0.			FUNDING
	10 0//2002	101(0)(0)					PERFORMING ARTISTS
WALKER ART CENTER							PROJECT /ORGANIZATION
1750 HENNEPIN AVE							INFRASTRUCTURE SUPPORT
T/JO HENNEFIN AVE	1	1	1		I	1	THE WYDIKOCIOKE BOLLOKI

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Scho	edule I (Form 990), Pa	art II.)	Т
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUNG JEAN LEE'S THEATRE COMPANY							
38 SOUTH OXFORD ST,#1D							PERFORMING ARTISTS
ROOKLYN, NY 11217	20-8603288	501(C)(3)	31,294.	0.			PROJECT FUNDING
MOONDIN, NI 11217	20 0000200	301(0)(3)	31,231.	· ·			PERFORMING ARTISTS
OUTH SPEAKS, INC							PROJECT /ORGANIZATION
663 MISSION ST, #604							INFRASTRUCTURE SUPPORT
AN FRANCISCO, CA 94103	91-2134499	501(C)(3)	37,553.	0.			FUNDING

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
INITIAL GRANT	70	963,000.	0.		
FOLLOW UP SUPPORT	86	519,224.	. 0.		
SPECIAL OPPORTUNITY	5	8,500.	. 0.		
INFRASTRUCTURE GRANTS	46	230,000.	0.		
Part IV Supplemental Information. Complete this part to pro	vide the information	n required in Part I,	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: WE MC	NITOR THE	USE OF GR	RANT FUNDS	THROUGH THE	
FUNDING REQUESTS AND FINAL REPORT	'S THAT WE	RECEIVE F	ROM GRANTE	ES. IN	
ADDITION, THE ORGANIZATION RECEIV	ES INFORM	ATION ON A	A REGULAR B	ASIS FROM	
GRANTEES REGARDING THE STATUS OF	THE FUNDE	D PROJECTS	FROM THE	INITIAL PHASE	
THROUGH PREMIERE AND BEYOND.					

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Part I Questions Regarding Compensation

CREATIVE CAPITAL FOUNDATION

Employer identification number 31-1605982

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			77
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			_
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C)	(D)	(E)	(F)	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(i)-(D)	Compensation reported as deferred in prior Form 990	
	(i)	198,190.	0.	0.	13,873.	6,827.	218,890.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)	144,976.	300.	0.	10,169.	6,827.	162,272.	0.	
	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii) (i)								
	(') (ii)								
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	(i) (i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
16	(ii)								

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number 31-1605982

FORM 990, PART VI, SECTION B, LINE 11: IRS FORM 990 IS REVIEWED AND APPROVED BY FINANCE/INVESTMENT COMMITTEE AND BOARD BEFORE FILING. IT IS ALSO REVIEWED BY LEGAL COUNSEL FOR RECOMMENDATIONS. THE EXECUTIVE DIRECTOR/PRESIDENT SIGNS AND ENSURES IT IS FILED IN A TIMELY AND ACCURATE MANNER. THE IRS FORM 990 IS DISTRIBUTED TO THE BOARD AND THE COMMITTEE AND DISCLOSED TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE.

FORM 990, PART VI, SECTION B, LINE 12C: ANY CONFLICT OF INTEREST IS

DISCLOSED TO GOVERNING BODY AND MANAGEMENT WHO TAKE APPROPRIATE DISCIPLINE

AND CORRECTIVE ACTION. DIRECTORS, OFFICERS AND GOVERNING BODY MEMBERS SIGN

CONFLICT INTEREST ACKNOWLEDGEMENT FORMS.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD MEMBERS REVIEW AND APPROVE OF COMPENSATION OF DIRECTORS, OFFICERS AND KEY EMPLOYEES BY TAKING INTO CONSIDERATION CASH AND NONCASH COMPENSATION, PERFORMANCE EVALUATION, EXPERIENCE, AND MARKET DATA.

FORM 990, PART VI, SECTION C, LINE 19: ALL GOVERNING DOCUMENTS, CONFLICT

OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE

ORGANIZATION'S WEBSITE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-27,740.

THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR

OVERSIGHT OF THE AUDIT, ITS FINANCIAL STATEMENTS AND SELECTION OF AN

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

Schedule O (Form 990 or 990-EZ) (2011)

132211 01-23-12