

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No. 1545-0047

2012Open to Public
Inspection**A** For the 2012 calendar year, or tax year beginning **JUL 1, 2012** and ending **JUN 30, 2013****B** Check if applicable:

- ☒ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

CREATIVE CAPITAL FOUNDATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

15 MAIDEN LANE, 18TH FLOOR

Room/suite

City, town, or post office, state, and ZIP code

NEW YORK, NY 10038

F Name and address of principal officer: RUBY LERNER
SAME AS C ABOVE**D** Employer identification number

31-1605982

E Telephone number

(212) 598-9900

G Gross receipts \$ 4,826,388.**H(a)** Is this a group returnfor affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.CREATIVE-CAPITAL.ORG**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶**L** Year of formation: 1998 **M** State of legal domicile: NY**Part I Summary**

Activities & Governance	1	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 <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	22
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	21
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	31
	6	Total number of volunteers (estimate if necessary)	6	21
Revenue	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	8,831,456.	4,218,184.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	282,206.	272,330.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	110,521.	83,544.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	81,759.	141,286.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	9,305,942.	4,715,344.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	4,661,203.	3,461,967.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	2,043,551.	2,047,126.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 381,740.	0.	0.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,464,356.	1,571,063.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	8,169,110.	7,080,156.
	19	Revenue less expenses. Subtract line 18 from line 12	1,136,832.	-2,364,812.
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	15,447,607.	13,345,776.
	22	Net assets or fund balances. Subtract line 21 from line 20	654,410.	806,705.
			14,793,197.	12,539,071.

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	Signature of officer	Date
	RUBY LERNER, EXECUTIVE DIRECTOR Type or print name and title	
Paid	Print/Type preparer's name STACY CULLEN	Preparer's signature
Preparer	Firm's name ▶ TAIT, WELLER & BAKER LLP	Date 04/03/14
Use Only	Firm's address ▶ 1818 MARKET STREET; SUITE 2400 PHILADELPHIA, PA 19103	Check <input type="checkbox"/> self-employed PTIN P00974308
		Firm's EIN ▶ 23-1144520
		Phone no. 215.979.8800

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III Statement of Program Service AccomplishmentsCheck 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? ☐ Yes ☒ No
 If "Yes," describe these new services on Schedule O.
- 3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ 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 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 \$ 4,617,574. including grants of \$ 3,461,967.) (Revenue \$)
GRANTMAKING:
 IN FY 12-13 AS CREATIVE CAPITAL FUNDED A NEW CYCLE OF GRANTEEES WHILE CONTINUING TO INVEST IN MULTI-YEAR RELATIONSHIPS WITH GRANTEEES 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. 43 GRANTS WERE ALSO AWARDED THROUGH THE MULTI-ARTS PRODUCTIONS FUND AND 21 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 \$ 1,124,443. including grants of \$) (Revenue \$)
ARTIST SERVICES:
 CREATIVE CAPITAL PROVIDES NON-MONETARY SUPPORT TO GRANTEEES IN THE FORM OF CONSULTATIONS AND MEETINGS AT KEY MOMENTS IN THE LIVES OF FUNDED PROJECTS, ASSISTING WITH PLANNING, MARKETING AND DISTRIBUTION. IN FY 12-13, THE CREATIVE CAPITAL CORE PROGRAM HOSTED THEIR GRANTEE RETREAT WITH OVER 300 PARTICIPANTS. PLANNING ALSO BEGAN ON THE GRANTEE RETREAT TO BE HOSTED AT THE BEGINNING OF FY 13-14. 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 MAP FUND AND DDPA PROGRAMS ALSO PROVIDED PLANNING, MARKETING AND DISTRIBUTION ASSISTANCE TO THEIR GRANTEEES AS WELL.
- 4c** (Code:) (Expenses \$ 696,300. including grants of \$) (Revenue \$ 272,330.)
ARTIST CAREER DEVELOPMENT:
 THE ARTIST CAREER DEVELOPMENT PROGRAM OFFERS SKILLS BUILDING WORKSHOPS AND WEBINARS TO CREATIVE CAPITAL GRANTEEES 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 12-13, 55 OF THESE WORKSHOPS AND WEBINARS WERE OFFERED, REACHING OVER 1,008 ARTISTS.
- 4d** Other program services (Describe in Schedule O.)
 (Expenses \$ including grants of \$) (Revenue \$)
- 4e** Total program service expenses **6,438,317.**

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	X	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		

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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		X
25b 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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
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? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

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Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 270		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 31		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	X	
3a 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 authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a 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:			
a 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.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

☒**Section 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	22	
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b	Enter the number of voting members included in line 1a, above, who are independent	21	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a		X
b		
11a	X	
b		
12a	X	
b	X	
c	X	
13	X	
14	X	
15		
a	X	
b	X	
16a		X
b		

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **LESLIE SINGER - (212) 598-9900**
15 MAIDEN LANE, 18TH FLOOR, NEW YORK, NY 10038

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CATHARINE R. STIMPSON DIRECTOR	1.00	X						0.	0.	0.
(2) SUNNY BATES VICE CHAIR	1.00	X		X				0.	0.	0.
(3) ED COLLOTON TREASURER	1.00	X		X				0.	0.	0.
(4) RONALD FELDMAN SECRETARY	1.00	X		X				0.	0.	0.
(5) ARCHIBALD L. GILLIES DIRECTOR EMERITUS	1.00	X						0.	0.	0.
(6) LISA HELLER DIRECTOR	1.00	X						0.	0.	0.
(7) LEWIS HYDE DIRECTOR	1.00	X						0.	0.	0.
(8) COLLEEN JENNINGS-ROGGENSACK DIRECTOR	1.00	X						0.	0.	0.
(9) LYDA KUTH CHAIR	1.00	X		X				0.	0.	0.
(10) RICHARD LINKLATER DIRECTOR	1.00	X						0.	0.	0.
(11) JAMES SCHAMUS DIRECTOR	1.00	X						0.	0.	0.
(12) PETER GELLES DIRECTOR	1.00	X						0.	0.	0.
(13) JEFFREY SOROS DIRECTOR	1.00	X						0.	0.	0.
(14) FRED WILSON DIRECTOR	1.00	X						0.	0.	0.
(15) JOEL WACHS EX-OFFICIO	1.00	X						0.	0.	0.
(16) WILLIAM K. BOWES DIRECTOR	1.00	X						0.	0.	0.
(17) SUZI KEATS CORDISH DIRECTOR	1.00	X		X				0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) EVE STEELE DIRECTOR	1.00	X						0.	0.	0.
(19) RUBY LERNER EX-OFFICIO	40.00	X		X				203,047.	0.	22,776.
(20) DEBORAH RAPPAPORT DIRECTOR	1.00	X						0.	0.	0.
(21) STEPHEN REILY DIRECTOR	1.00	X						0.	0.	0.
(22) PAIGE WEST DIRECTOR	1.00	X						0.	0.	0.
(23) LESLIE SINGER CHIEF FINANCIAL OFFICER	40.00			X				133,352.	0.	16,494.
(24) FRANCES ALYSON POU DIRECTOR OF PDP PROGRAM	40.00					X		150,198.	0.	17,673.
(25) SOPHIE HENDERSON DIR OF EXTERNAL AFFAIRS	40.00					X		116,623.	0.	11,743.
(26) SEAN ELWOOD DIR. OF PROGRAMS & INITIAT	40.00					X		126,000.	0.	15,979.
1b Sub-total								729,220.	0.	84,665.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								729,220.	0.	84,665.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	43,786.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	55,000.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,119,398.			
	g	Noncash contributions included in lines 1a-1f \$		8,118.			
	h	Total. Add lines 1a-1f		4,218,184.			
	Program Service Revenue	2 a	PROGRAM FEES	Business Code 711300	272,330.	272,330.	
b							
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		272,330.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		83,396.			83,396.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		148.		148.	
	8 a	Gross income from fundraising events (not including \$ 43,786. of contributions reported on line 1c). See Part IV, line 18	a	154,227.			
	b	Less: direct expenses	b	88,531.			
	c	Net income or (loss) from fundraising events		65,696.		65,696.	
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue							
11 a	ADMINISTRATION FEE	Business Code 900099	70,000.	70,000.			
b	OTHER INCOME	900099	5,590.	5,590.			
c							
d	All other revenue						
e	Total. Add lines 11a-11d		75,590.				
12	Total revenue. See instructions.		4,715,344.	347,920.	0.	149,240.	

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).

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,565,000.	1,565,000.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	1,841,967.	1,841,967.		
3 Grants and other assistance to governments, organizations, and individuals outside the 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, trustees, and key employees	382,651.	292,227.	33,551.	56,873.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,368,410.	1,045,043.	119,984.	203,383.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	49,028.	37,458.	4,293.	7,277.
9 Other employee benefits	115,294.	88,077.	10,099.	17,118.
10 Payroll taxes	131,743.	100,639.	11,541.	19,563.
11 Fees for services (non-employees):				
a Management				
b Legal	14,215.	10,357.	1,929.	1,929.
c Accounting	31,375.	22,859.	4,258.	4,258.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	22,289.		22,289.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	536,119.	505,529.	24,275.	6,315.
12 Advertising and promotion	11,274.	10,107.	389.	778.
13 Office expenses	102,517.	82,777.	9,336.	10,404.
14 Information technology	22,072.	19,691.	794.	1,587.
15 Royalties				
16 Occupancy	50,450.	39,462.	5,494.	5,494.
17 Travel	180,936.	168,641.	90.	12,205.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	83,529.	70,603.	9,468.	3,458.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	16,351.	13,378.	1,486.	1,487.
23 Insurance	9,056.	7,410.	823.	823.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a GRANTEE CONFERENCE	273,400.	273,400.		
b HONORARIUMS	116,485.	116,485.		
c ADMINISTRATION FEES	70,000.	70,000.		
d MISCELLANEOUS	30,995.	2,207.		28,788.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	7,080,156.	6,438,317.	260,099.	381,740.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,544,505.	1	708,547.
	2 Savings and temporary cash investments	6,210,045.	2	6,984,537.
	3 Pledges and grants receivable, net	5,770,392.	3	3,325,043.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	90,118.	9	83,691.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 198,747.		
	b Less: accumulated depreciation	10b 170,945.	10c	27,802.
	11 Investments - publicly traded securities	1,784,343.	11	2,197,756.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	18,400.	15	18,400.
16 Total assets. Add lines 1 through 15 (must equal line 34)	15,447,607.	16	13,345,776.	
Liabilities	17 Accounts payable and accrued expenses	479,410.	17	504,835.
	18 Grants payable	175,000.	18	301,870.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	654,410.	26	806,705.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,177,668.	27	2,862,377.
	28 Temporarily restricted net assets	11,589,529.	28	8,650,694.
	29 Permanently restricted net assets	1,026,000.	29	1,026,000.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	14,793,197.	33	12,539,071.
34 Total liabilities and net assets/fund balances	15,447,607.	34	13,345,776.	

Form 990 (2012)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,715,344.
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,080,156.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,364,812.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	14,793,197.
5	Net unrealized gains (losses) on investments	5	110,686.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,539,071.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? _____	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____	3b	

Form 990 (2012)

Department of the Treasury
Internal Revenue Service

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

2012

Open to Public
Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number

31-1605982

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions.
1	<p>1. Section 501(c)(3) organization. Complete this section if the organization is a 501(c)(3) organization.</p> <p>2. Section 501(c)(29) organization. Complete this section if the organization is a 501(c)(29) organization.</p> <p>3. Section 501(c)(6) organization. Complete this section if the organization is a 501(c)(6) organization.</p> <p>4. Section 501(c)(29) organization. Complete this section if the organization is a 501(c)(29) organization.</p> <p>5. Section 501(c)(6) organization. Complete this section if the organization is a 501(c)(6) organization.</p>

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____

(ii) A family member of a person described in (i) above? _____

(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

h Provide the following information about the supported organization(s).

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2012

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8921971.	5314707.	6034804.	8831456.	4218184.	33321122.
2 Tax revenues levied for the organization'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	8921971.	5314707.	6034804.	8831456.	4218184.	33321122.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						23905394.
6 Public support. Subtract line 5 from line 4.						9415728.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	8921971.	5314707.	6034804.	8831456.	4218184.	33321122.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	100,276.	48,110.	90,107.	88,418.	83,396.	410,307.
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.)	39,792.	36,355.	30,908.	71,610.	75,590.	254,255.
11 Total support. Add lines 7 through 10						33985684.
12 Gross receipts from related activities, etc. (see instructions)					12	895,234.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	27.70 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	27.88 %
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2012

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐

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 27.70% FOR THE YEAR ENDED 6/30/13 BASED ON AGGREGATE FINANCIAL INFORMATION FOR THE YEARS ENDED 6/30/08 THROUGH 6/30/13. THIS AMOUNT IS IN EXCESS OF THE 10% REQUIRED BY REGULATION SECTION 1.170A-(9)(E)(3)(I).

ATTRACTION OF ADDITIONAL 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%.

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).

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, LAW, 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 GRANTEEES.

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).

PROGRAM FOR ACCOMPLISHING CHARITABLE WORK: CREATIVE CAPITAL IS COMMITTED TO MAINTAINING OUR SIGNATURE GRANTMAKING PROGRAM, WHICH PROVIDES INDIVIDUAL ARTISTS WITH PROJECT GRANTS OF UP TO \$50,000, COMPLEMENTED BY AN IN-DEPTH PROGRAM OF ADVISORY SERVICES THAT HELP OUR GRANTEEES ACHIEVE THEIR GOALS. CREATIVE CAPITAL ALSO CONTINUES TO DEVELOP NEW WAYS TO OFFER CAREER DEVELOPMENT SERVICES TO ARTISTS BEYOND OUR GRANTEEES, THROUGH OUR PROFESSIONAL DEVELOPMENT PROGRAM WORKSHOPS AND THE NEW ONLINE LEARNING PROGRAM WEBINARS.

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number

31-1605982

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

CREATIVE CAPITAL FOUNDATION

31-1605982

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANDY WARHOL FOUNDATION FOR THE VISUAL ARTS 65 BLEECKER ST, 7TH FLOOR NEW YORK, NY 10012	\$ 1,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	DORIS DUKE CHARITABLE FOUNDATION 650 FIFTH AVENUE, 19TH FLOOR NEW YORK, NY 10019	\$ 1,057,032.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	TOBY FUND 1422 EUCLID CLEVELAND, OH 44115	\$ 225,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	TIDES FOUNDATION/LAMBENT FOUNDATION 55 EXCHANGE PLACE SUITE 402 NEW YORK, NY 10005	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	TWO SISTERS AND A WIFE 10 BLUEBERRY CIRCLE NEWTON, MA 02462	\$ 150,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	ESTATE OF THEO WESTENBERGER 200 CENTRAL PARK SOUTH, #12J NEW YORK, NY 10019	\$ 350,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

CREATIVE CAPITAL FOUNDATION

31-1605982

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

CREATIVE CAPITAL FOUNDATION

31-1605982

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

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.

OMB No. 1545-0047

2012

Open to Public
Inspection

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CREATIVE CAPITAL FOUNDATION

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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 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 funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other 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 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

0.

15,000.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☒ Other HELD FOR INVESTMENT

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,148,578.	1,137,928.	1,026,000.	1,026,000.	1,026,000.
b Contributions					
c Net investment earnings, gains, and losses	129,904.	10,650.	111,928.		
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,278,482.	1,148,578.	1,137,928.	1,026,000.	1,026,000.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☒ 80.25 %

c Temporarily restricted endowment ☒ 19.75 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		198,747.	170,945.	27,802.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				27,802.

Schedule D (Form 990) 2012

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(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. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(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) line 15.) ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	4,959,192.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	110,686.
b	Donated services and use of facilities	2b	155,451.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	266,137.
3	Subtract line 2e from line 1	3	4,693,055.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	22,289.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	22,289.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	4,715,344.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	7,213,318.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	155,451.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	155,451.
3	Subtract line 2e from line 1	3	7,057,867.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	22,289.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	22,289.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	7,080,156.

Part XIII 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, lines 2d and 4b; and Part XII, 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 (2010-2012) OR EXPECTED TO BE TAKEN IN CCF'S 2013 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)Department of the Treasury
Internal Revenue Service**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

2012Open to Public
Inspection

Name of the organization

Employer identification number

CREATIVE CAPITAL FOUNDATION

31-1605982

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes"
to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is 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)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION.		52,000.
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION.		3,000.
3 a Sub-total	0	0			55,000.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			55,000.

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

Schedule F (Form 990) 2012

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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ 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 ☒ No

Schedule F (Form 990) 2012

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.

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.

OMB No. 1545-0047

2012

Open To Public Inspection

CREATIVE CAPITAL FOUNDATION

31-1605982

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

[illegible]

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		PULSE ART FAIR (event type)	MAY 14 BENEFIT AUCT (event type)	NONE (total number)	
Revenue	1 Gross receipts	32,904.	165,109.		198,013.
	2 Less: Contributions		43,786.		43,786.
	3 Gross income (line 1 minus line 2)	32,904.	121,323.		154,227.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment		500.		500.
	9 Other direct expenses	7,366.	80,665.		88,031.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				88,531.
	11 Net income summary. Combine line 3, column (d), and line 10				65,696.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? _____

☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? _____

☐ Yes ☐ No

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 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? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 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? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

- 16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor

- 17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ 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 ▶ \$ _____

Part 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 information (see instructions).

**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

2012

Open to Public
inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number
31-1605982

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (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
BETH MORRISON PROJECTS 305 E 93RD ST APT 4B NEW YORK, NY 10128	20-8422447	501(C)(3)	37,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
WAKKA WAKKA PRODUCTIONS INC. 1 NORTH SIDE PIERS, #3G BROOKLYN, NY 11249	73-1697723	501(C)(3)	15,000.	0.			INITIAL/INFRASTRUCTURE PROJECT SUPPORT.
WCV, INC. 175 PROSPECT PARK SW, #2A BROOKLYN, NY 11218	11-3400678	501(C)(3)	15,000.	0.			INITIAL/INFRASTRUCTURE PROJECT SUPPORT.
THE TEAM INC., 138 S. OXFORD ST, #1C BROOKLYN, NY 11217	26-2183790	501(C)(3)	15,000.	0.			INITIAL/INFRASTRUCTURE PROJECT SUPPORT.
HAKEAKALA INC. DBA THE KITCHEN 512 WEST 19TH STREET NEW YORK, NY 10011	13-2829756	501(C)(3)	40,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
HEADLONG DANCE THEATER 1170 S BROAD ST PHILADELPHIA, PA 19146	23-2803557	501(C)(3)	35,000.	0.	THROUGH PANEL		MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.

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

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

49

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

Schedule I (Form 990) (2012)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
ACCINOSCO INC. 85 SOUTH 6TH STREET BROOKLYN, NY 11249	20-3479432	501(C)(3)	10,000.	0.			MAP CREATIVE EXPLORATION / FOLLOW UP SUPPORT.
ON THE BOARDS PO BOX 19515 SEATTLE, WA 98109-1515	91-1081983	501(C)(3)	82,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
ALARM WILL SOUND, INC. 51 WOOSTER ST, FL 2 NEW YORK, NY 10013	20-1125609	501(C)(3)	45,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
ARS NOVA THEATER, INC. 511 WEST 54TH STREET, 2ND FL NEW YORK, NY 10019	80-0339038	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
BANG ON A CAN 80 HANSON PLACE, STE 701 BROOKLYN, NY 11217	13-3392963	501(C)(3)	22,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
BIG DANCE THEATER, INC. 303 CLINTON ST BROOKLYN, NY 11231	52-2143843	501(C)(3)	40,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
ARTSPORT PRODUCTIONS 609 SAINT FERDINAND ST NEW ORLEANS, LA 70117	72-1499547	501(C)(3)	15,000.	0.			INITIAL/INFRASTRUCTURE PROJECT SUPPORT.
AUTOMATA 3805 LOS FELIZ BLVD, #5 LOS ANGELES, CA 90027	30-0259101	501(C)(3)	26,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG./GEN OPP SUPPORT TO ARTIST.
CENTER FOR TRADITIONAL MUSIC AND DANCE - 32 BROADWAY, STE 1314 - NEW YORK, NY 10004	23-7379877	501(C)(3)	27,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
CHILDREN'S THEATRE COMPANY 2400 THIRD AVENUE SOUTH MINNEAPOLIS, MN 55404	41-1254553	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
THE CIVILIANS 138 S. OXFORD ST., STE 3C BROOKLYN, NY 11217	11-3621605	501(C)(3)	40,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
COLUMBIA MUSIC FESTIVAL ASSOCIATION - 914 PULASKI ST - COLUMBIA, SC 29201	57-0327881	501(C)(3)	38,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
COUNTER PULSE 1310 MISSION ST SAN FRANCISCO, CA 94103	94-2986114	501(C)(3)	21,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
DANCERS' GROUP 44 GOUGH ST, STE 201 SAN FRANCISCO, CA 94103	94-2879185	501(C)(3)	36,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
FORKLIFT DANCEWORKS PO BOX 1304 AUSTIN, TX 78767	01-0812720	501(C)(3)	25,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
FRACTURED ATLAS, INC. 248 WEST 35TH ST., 10TH FL NEW YORK, NY 10001	11-3451703	501(C)(3)	67,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
FRENCH INSTITUTE ALLIANCE FRANCHISE - 22 EAST 60TH STREET, - NEW YORK, NY 10022	13-1624099	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
FRINGE ARTS PO BOX 30393 PHILADELPHIA, PA 19103	23-2936188	501(C)(3)	31,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
HARLEM STAGE/AARON DAVIS HALL, INC. - 150 CONVENT AVE - NEW YORK, NY 10031	13-3166308	501(C)(3)	38,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
HOME FOR CONTEMPORARY THEATRE & ART DBA HERE - 145 SIXTH AVE - NEW YORK, NY 10013	13-3449416	501(C)(3)	15,000.	0.			MAP INITIAL PROJECT FUNDING.
ILAND, INC. 140 SECOND AVE. #401 NEW YORK, NY 10003	20-1900264	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
INTERSECTION FOR THE ARTS 925 MISSION ST., STE 109 SAN FRANCISCO, CA 94103	94-1593216	501(C)(3)	43,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
KRONOS QUARTET 1242 NINTH AVE SAN FRANCISCO, CA 94122	23-7444956	501(C)(3)	45,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
LOS ANGELES POVERTY DEPARTMENT PO BOX 26190 LOS ANGELES, CA 90026	95-4174562	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
THE NEW GROUP 410 WEST 42ND ST NEW YORK, NY 10036	13-3613115	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
NEW YORK CITY PLAYERS, INC. 138 SOUTH OXFORD ST, #4C BROOKLYN, NY 11217	13-4087832	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
NEW YORK LIVE ARTS 219 WEST 19TH STREET NEW YORK, NY 10011	13-6206608	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
THE HUMAN FUTURE DANCE CORP. 140 SECOND AVE STE #404 NEW YORK, NY 10003	11-3757378	501(C)(3)	15,000.	0.			INITIAL / INFRASTRUCTURE PROJECT SUPPORT.
NORTHWEST FILM FORUM 1515 12TH AVE SEATTLE, WA 98122	91-1702331	501(C)(3)	15,000.	0.			MAP INITIAL PROJECT FUNDING.
MIAMI LIGHT PROJECT, INC. PO BOX 1048 MIAMI, FL 33137-2028	65-0107810	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
PERFORMANCE ZONE, INC. DBA THE FIELD - 161 SIXTH AVE., 14TH FLOOR - NEW YORK, NY 10013	13-3357408	501(C)(3)	36,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
THE PLAY COMPANY 321 WEST 44TH ST, STE 802 NEW YORK, NY 10036	31-1630052	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
PROVIDENCE PRODUCTIONS INTERNATIONAL, INC. - 115 MONTAGUE ST, 8C - BROOKLYN, NY 11201	11-2532555	501(C)(3)	25,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
RAGAMALA DANCE 711 WEST LAKE ST, STE 309 MINNEAPOLIS, MN 55408	41-1747144	501(C)(3)	40,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
REGENTS OF THE UNIVERSITY OF MINNESOTA NORTHROP CONCERTS & LECTURES - 200 OAK STREET SE - MINNEAPOLIS, MN 55455-2070	41-6007513	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
SALVAGE VANGUARD THEATER 2803 MANOR RD AUSTIN, TX 78722	74-2759503	501(C)(3)	30,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part 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
NEW YORK FOUNDATION FOR THE ARTS 20 JAY ST BROOKLYN, NY 11201	23-7129564	501(C)(3)	41,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG/GEN OPP SUPPORT TO ARTIST.
SOJOURN THEATRE PO BOX 5348 EVANSTON, IL 60204	31-1738930	501(C)(3)	45,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
YERBA BUENA GARDENS FESTIVAL 760 HOWARD ST SAN FRANCISCO, CA 94103	94-3368964	501(C)(3)	20,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
YOUNG JEAN LEE'S THEATER COMPANY 138 SOUTH OXFORD ST, STE 1D BROOKLYN, NY 11217	20-8603288	501(C)(3)	35,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
THE REBUILD FOUNDATION 6918 S.DORCHESTER AVE CHICAGO, IL 60637	27-1308845	501(C)(3)	10,000.	0.			PROJECT/ FOLLOW UP SUPPORT.
THIN MAN DANCE INC 140 SECOND AVE, #501 NEW YORK, NY 10003	13-3922974	501(C)(3)	45,000.	0.			MAP INITIAL PROJECT FUNDING/GEN OPP SUPPORT TO ORG.
TICKLE THE SLEEPING GIANT 140 SECOND AVE, #404 NEW YORK, NY 10003	33-1020155	501(C)(3)	25,000.	0.			INITIAL/INFRASTRUCTURE PROJECT SUPPORT/ PROJECT FOLLOW UP SUPPORT.

Schedule I (Form 990)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) 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	63	971,500.	0.		
INFRASTRUCTURE GRANTS	40	200,000.	0.		
FOLLOW UP GRANTS	80	670,467.	0.		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, 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 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

2012

Open to Public Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number
31-1605982

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

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:

a The organization?

b Any related organization?

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:

a The organization?

b Any related organization?

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4A: SOPHIE HENDERSON RECEIVED A SEVERANCE PAYMENT OF

\$23,796.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

CREATIVE CAPITAL FOUNDATION

Employer identification number
31-1605982

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS REVIEWED AND
APPROVED BY FINANCE/INVESTMENT COMMITTEE AND BOARD BEFORE FILING WITH THE
IRS. IT IS ALSO REVIEWED BY LEGAL COUNSEL FOR RECOMMENDATIONS. THE
EXECUTIVE DIRECTOR/PRESIDENT SIGNS THE FORM 990 AND ENSURES THAT IT IS
FILED IN A TIMELY AND ACCURATE MANNER.

FORM 990, PART VI, SECTION B, LINE 12C: ANY CONFLICT OF INTEREST IS
DISCLOSED TO THE GOVERNING BODY AND MANAGEMENT WHO TAKE APPROPRIATE
DISCIPLINE AND CORRECTIVE ACTION. THE 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 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: THE GOVERNING DOCUMENTS, CONFLICT
OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE
ORGANIZATION'S WEBSITE.

THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR
OVERSIGHT OF THE AUDIT, ITS FINANCIAL STATEMENTS AND SELECTION OF AN
INDEPENDENT ACCOUNTANT.