

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
2010
Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07/01/10, and ending 06/30/11

B Check if applicable:		C Name of organization THE CENTER FOR CREATIVE EDUCATION,	
☐ Address change	D Employer identification number 65-0594599		
☐ Name change	E Telephone number 561-805-9927		
☐ Initial return	Room/suite 425 24TH STREET		
☐ Terminated	City or town, state or country, and ZIP + 4 WEST PALM BEACH FL 33407		
☐ Amended return	F Name and address of principal officer: WILLIAM W. PARROTT 425 24TH STREET WEST PALM BEACH FL 33407		
☐ Application pending	G Gross receipts \$ 1,385,915		
H(a) Is this a group return for affiliates? ☒ Yes ☐ No			
H(b) Are all affiliates included? ☐ Yes ☐ No			
H(c) Group exemption number 1994			
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ☐ 527 (insert no.) ☐ 4947(a)(1) or ☐ 527			
J Website: N/A			
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other			
L Year of formation: 1994			
M State of legal domicile: FL			

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
See Schedule C

2 Check this box ☐ 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) **10**

4 Number of independent voting members of the governing body (Part VI, line 1b) **10**

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) **7**

6 Total number of volunteers (estimate if necessary) **6**

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a**

7b Net unrelated business taxable income from Form 990-T, line 34 **0**

Revenue		Expenses	
8	Contributions and grants (Part VIII, line 1h)	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)
9	Program service revenue (Part VIII, line 2g)	14	Benefits paid to or for members (Part IX, column (A), line 4)
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	16a	Professional fundraising fees (Part IX, column (A), line 11e)
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	b	Total fundraising expenses (Part IX, column (D), line 25) 212,202
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-124f)
14	Benefits paid to or for members (Part IX, column (A), line 4)	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	19	Revenue less expenses. Subtract line 18 from line 12
16a	Professional fundraising fees (Part IX, column (A), line 11e)	20	Total assets (Part X, line 16)
b	Total fundraising expenses (Part IX, column (D), line 25) 212,202	21	Total liabilities (Part X, line 26)
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-124f)	22	Net assets or fund balances. Subtract line 21 from line 20
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		
19	Revenue less expenses. Subtract line 18 from line 12		

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: **WILLIAM W. PARROTT**
Type or print name and title: **BOARD TREASURER**

Paid Preparer
Print/Type preparer's name: **Evelyn F Parkes**
Preparer's signature: 
Firm's name: **PARKES & BUTNER, CPAs**
Firm's address: **420 CLEMATIS ST, 2ND FLOOR
WEST PALM BEACH, FL 33401**
Firm's EIN: **65-1063964**
Phone no.: **561-366-9250**

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
See Schedule O

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

3 If "Yes," describe these new services on Schedule O.

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

4 If "Yes," describe these changes on Schedule O.

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 948,998 including grants of \$) (Revenue \$)

BLEND THE TALENTS OF PROFESSIONAL ARTISTS AND CLASSROOM TEACHERS TO DEVELOP AND IMPLEMENT IN-SCHOOL CURRICULUM TO TEACH TRADITIONAL ACADEMIC SUBJECTS THROUGH THE ARTS. PROVIDES YOUTH WITH CREATIVE ALTERNATIVES TO DEVELOP AN APPRECIATION FOR ART AND CULTURE AS WELL AS THEIR OWN ARTISTIC AND CREATIVE TALENTS DURING THE CRITICAL AFTER SCHOOL HOURS. THE ORGANIZATION SERVES MORE THAN 8,000 STUDENTS, TEACHERS AND COMMUNITY MEMBERS IN PALM BEACH COUNTY, FLORIDA.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 47,175 including grants of \$)

4e Total program service expenses 996,173

Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	No
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	X	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	X	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11a	X	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	X	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then complete Schedule D, Parts XI, XII, and XIII is optional	12b	X	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	No
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? If "Yes," complete Schedule F, Parts II and IV	15	X	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	X	No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	X	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X	No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	X	No
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		No

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	46	1b	0
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	7	1c	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	3a	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3b		4a	X
b	If "Yes," enter the name of the foreign country:	4b		5a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X	6a	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8866-T?	5c		6b	
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?	6b		7a	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7b		7c	
7	Organizations that may receive deductible contributions under section 170(c).	7d		7e	
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?	7f		7g	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7h		7i	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7j		7k	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7l		7m	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7n		7o	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7p		7q	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7r		7s	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7t		7u	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	7v		7w	
a	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	7x		7y	
9	Sponsoring organizations maintaining donor advised funds.	7z		8a	
a	Did the organization make any taxable distributions under section 4965?	8b		8b	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	8c		8c	
10	Section 501(c)(7) organizations. Enter:	8d		8d	
a	Initiation fees and capital contributions included on Part VIII, line 12	8e		8e	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	8f		8f	
a	Gross income from members or shareholders	8g		8g	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	8h		8h	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	8i		8i	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	8j		8j	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	8k		8k	
a	Is the organization licensed to issue qualified health plans in more than one state?	8l		8l	
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	8m		8m	
c	Enter the amount of reserves on hand	8n		8n	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	8o		8o	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	8p		8p	

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

1a		b	
Enter the number of voting members of the governing body at the end of the tax year	1a	1b	
Enter the number of voting members included in line 1a, above, who are independent	10	10	
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			
Does the organization have members or stockholders?	X		
7a			
Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X		
b			
Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	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.)

10a		10b		10c		10d		10e		10f		10g		10h		10i		10j		10k		10l		10m		10n		10o		10p		10q		10r		10s		10t		10u		10v		10w		10x		10y		10z	
10a	X	10b		10c		10d		10e		10f		10g		10h		10i		10j		10k		10l		10m		10n		10o		10p		10q		10r		10s		10t		10u		10v		10w		10x		10y		10z	
Does the organization have local chapters, branches, or affiliates?		If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		Describe in Schedule O the process, if any, used by the organization to review this Form 990.		Does the organization have a written conflict of interest policy? If "No," go to line 13		Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		Does the organization have a written whistleblower policy?		Does the organization have a written document retention and destruction policy?		Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		The organization's CEO, Executive Director, or top management official		Other officers or key employees of the organization		If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?																							

Section C. Disclosure

- | | | |
|----|--|----|
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ | FL |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. | |

19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, ☐ Own website ☐ Another's website ☒ Upon request

20 State the name, physical address, and telephone number of the person who possesses the books and records of the

organization: ▶ THE CENTER FOR CREATIVE EDUCATION, 425 24TH STREET
WEST PALM BEACH FL 33407

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

(A) Name and Title	(B) Average hours per week (describe hours for organizations related in Schedule O)	(C) Position (check all that apply) Former Highest compensated employee Key employee Officer Institutional trustee Individual trustee or director	(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
(1) BEAU BRECKENRIDGE VICE CHAIR	0.00	X	0	0	0
(2) PAM MILLER CHAIR	0.00	X	0	0	0
(3) MARGIE LARKIN	0.00	X	0	0	0
(4) WILLIAM W. PARROTT BOARD TREASURER	0.00	X	0	0	0
(5) KENN KARAKUL HONORARY CHAIR	0.00	X	0	0	0
(6) THOMAS PILECKI DIRECTOR/OFFICER	40.00	X	120,178	0	0
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					

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

(A) Name and Title	(B) Average hours per week for organizations related in Schedule O	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of compensation from the organization and related organizations
		Former	Highest compensated employee	Key employee	Officer	Institutional trustee			

(17)									
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)									
(25)									
(26)									
(27)									
(28)									
1b	Sub-total						120,178		
c	Total from continuation sheets to Part VII, Section A								
d	Total (add lines 1b and 1c)						120,178		

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

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	No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X	No
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	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

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

Statement of Revenue

	(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				
1a Federated campaigns	1a			
b Membership dues	1b			
c Fundraising events	1c			
d Related organizations	1d			
e Government grants (contributions)	1e			
f All other contributions, gifts, grants, and similar amounts not included above	1f			
g Norcash contributions included in lines 1a-1f.	\$			
Total. Add lines 1a-1f	1,171,383			
Program Service Revenue				
2a Busn. Code				
b				
c				
d				
e				
f All other program service revenue				
Total. Add lines 2a-2f				
3 Investment income (including dividends, interest, and other similar amounts)				
4 Income from investment of tax-exempt bond proceeds				
5 Royalties				
Gross Rents				
a Real (i) Personal				
b Less: rental exps.				
c Rental inc. or (loss)				
d Net rental income or (loss)				
7a Gross amount from:				
i Securities				
j Other (ii) Other				
b Less: cost or other				
c Gain or (loss)				
d Net gain or (loss)				
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).				
a See Part IV, line 18	214,324			
b Less: direct expenses				
c Net income or (loss) from fundraising events				
9a Gross income from gaming activities.				
a See Part IV, line 19				
b Less: direct expenses				
c Net income or (loss) from gaming activities				
10a Gross sales of inventory, less returns and allowances				
a				
b Less: cost of goods sold				
c Net income or (loss) from sales of inventory				
Miscellaneous Revenue				
Busn. Code				
11a				
b				
c				
d All other revenue				
Total. Add lines 11a-11d	1,385,915			
Other Revenue				
12 Total. Add lines 11a-11d	214,532			

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 5b, 7b, 8b, 9b, and 10b of Part VIII.			
(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses

1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
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	250,469	150,686	62,314	37,469
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,723	3,023	1,039	661
9	Other employee benefits	5,843	3,740	1,285	818
10	Payroll taxes	10,228	6,546	2,250	1,432
11	Fees for services (non-employees):				
a	Management				
b	Legal				
c	Accounting	13,187		13,187	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	572,449	569,749		2,700
12	Advertising and promotion				
13	Office expenses	38,865	23,671	7,236	7,958
14	Information technology				
15	Royalties				
16	Occupancy	50,400	32,256	11,088	7,056
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	7,482		7,482	
20	Interest	6,951		6,951	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	47,175	47,175		
23	Insurance	102,249	63,362	29,125	9,762
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a	CATERING AND RENTAL	122,620			122,620
b	OTHER DEVELOPMENT	36,597	32,610		3,987
c	UTILITIES	11,381	7,284	2,504	1,593
d	TELEPHONE	10,996	7,038	2,419	1,539
e	PHOTOGRAPHY & MKT	8,598			8,598
f	All other expenses	9,188	962	8,226	
25	Total functional expenses. Add lines 1 through 24f	1,369,490	996,173	161,115	212,202
26	Joint costs. Check here ☐ if following only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet		(A) Beginning of year		(B) End of year	
Assets					
1	Cash—non-interest bearing	128,360	1	12,402	
2	Savings and temporary cash investments	2,384	2	1,352	
3	Pledges and grants receivable, net	1,316,734	3	1,507,398	
4	Accounts receivable, net		4		
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5		
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6		
7	Notes and loans receivable, net		7		
8	Inventories for sale or use		8		
9	Prepaid expenses and deferred charges		9		
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	3,490,211	10a		
b	Less: accumulated depreciation	274,131	10b		
11	Investments—publicly traded securities		11		
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		15		
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,610,159	16	4,737,232	
Liabilities					
17	Accounts payable and accrued expenses	24,460	17	135,682	
18	Grants payable		18		
19	Deferred revenue		19		
20	Tax-exempt bond liabilities		20		
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21		
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.		22		
23	Complete Part II of Schedule L		23		
24	Secured mortgages and notes payable to unrelated third parties	699,283	24	698,709	
25	Other liabilities. Complete Part X of Schedule D		25		
26	Total liabilities. Add lines 17 through 25	723,743	26	834,391	
Net Assets or Fund Balances					
27	Unrestricted net assets	255,058	27	364,775	
28	Temporarily restricted net assets	3,631,358	28	3,538,066	
29	Permanently restricted net assets		29		
Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
Organizations that do not follow SFAS 117, check here ☐ 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	3,886,416	33	3,902,841	
34	Total liabilities and net assets/fund balances	4,610,159	34	4,737,232	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1,385,915
2	Total expenses (must equal Part IX, column (A), line 25)	1,369,490
3	Revenue less expenses. Subtract line 2 from line 1	16,425
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3,886,416
5	Other changes in net assets or fund balances (explain in Schedule O)	
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	3,902,841

Part XII Financial Statements and Reporting

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

1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other ☐ Other explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant? ☒ Yes ☐ No

b Were the organization's financial statements audited by an independent accountant? ☒ Yes ☐ No

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? ☒ Yes ☐ No

d If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

e If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

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? ☒ Yes ☐ No

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b ☐ Yes ☒ No

SCHEDULE A
 (Form 990 or 990-EZ)

 Department of the Treasury
 Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

 Employer identification number
65-0594599
Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

- The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)
- ☐ 1 A church, 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)(iii). (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 ☐ Type II ☐ Type III—Functionally integrated ☐ d ☐ Type III—Other
- 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?

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?	(v) Did you notify the organization in col. (i) of your support?	(vi) Is the organization in col. (i) organized in the U.S.?	(vii) Amount of support
(A)			Yes	No	Yes	No
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	3,529,845	2,923,250	1,680,530	1,208,929	1,171,383	10,513,937
2						
3						
4	3,529,845	2,923,250	1,680,530	1,208,929	1,171,383	10,513,937
5						
6						
Public support. Subtract line 5 from line 4 shown on line 11, column (f)						
7	3,529,845	2,923,250	1,680,530	1,208,929	1,171,383	10,513,937
8						
9						
10						
11						
12						
13						
14						
15						
16a						
16b						
17a						
17b						
18						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	3,529,845	2,923,250	1,680,530	1,208,929	1,171,383	10,513,937
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16a						
16b						
17a						
17b						
18						

Section C. Computation of Public Support Percentage

14	Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	97.28 %
15	Public support percentage from 2009 Schedule A, Part II, line 14	99.23 %

- 16a** 33 1/3% support test—2010. 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.
- 16b** 33 1/3% support test—2009. 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.
- 17a** 10%-facts-and-circumstances test—2010. 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.
- 17b** 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, 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.
- 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.

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) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1						
2						
3						
4						
5						
6						
7a						
b						
c						
8						
Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9						
10a						
b						
c						
11						
12						
13						
14						

Section C. Computation of Public Support Percentage

15	Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2009 Schedule A, Part III, line 17	18	%

19a	33 1/3% support tests—2010. 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—2009. 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, Line 10 - Other Income Detail

Fundraising Event \$ 73,295

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

2010

OMB No. 1545-0047

Name of the organization

THE CENTER FOR CREATIVE EDUCATION

65-0594599

Employer identification number

Organization type (check one):

Filers of:

Form 990 or 990-EZ

☒ 501(c)(3)

3

(enter number) organization

☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐ 527 political organization

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check 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)(v), 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, aggregate 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 aggregate 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 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).

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) (2010)

Name of organization
THE CENTER FOR CREATIVE EDUCATION,
 Employer identification number
65-0594599

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☒ Payroll ☐ Noncash ☐
1	PRIMETIME PALM BEACH PRIME TIME PALM BEACH COUNTY 2300 HIGH RIDGE RD BOYNTON BEACH FL 33426	\$ 648,679	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☒ Payroll ☐ Noncash ☐
2	CONRAD H. HILTON CONRAD H HILTON FOUNDATION 10100 SANTA MONICA BLVD SUITE 1000 LOS ANGELES CA 90067	\$ 300,000	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☐ Payroll ☐ Noncash ☐
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☐ Payroll ☐ Noncash ☐
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☐ Payroll ☐ Noncash ☐
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution (Complete Part II if there is a noncash contribution.) Person ☐ Payroll ☐ Noncash ☐

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):

- | | |
|-------------------------------------|--------------------------|
| Public exhibition | ☐ |
| Scholarly research | ☐ |
| Preservation for future generations | ☐ |
| Other | ☐ |
| Loan or exchange programs | ☐ |

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

XIV.

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

Alfred

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?

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

c Beginning balance

d Additions during the year

Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

b. If "Yes," explain the arrangement in Part XIV.

Affected

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

1a Beginning of year balance .

b Contributions

c Net investment earnings, gains, and

losses

- Other responsibilities for

program

f. Administrator

9 End of year balance

2 Provide the estimated percentage of the year end balance held as:

► a Board designated or quasi-endowment

b Permanent endowment ▶

Term endowment

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

organization by:

(i) $\lim_{n \rightarrow \infty} \frac{1}{n} \sum_{k=1}^n f\left(\frac{k}{n}\right) = \int_0^1 f(x) dx$

(ii) $\lim_{n \rightarrow \infty} \frac{1}{n} \sum_{k=0}^{n-1} f(T^k x)$

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

Part VI Land, Buildings, and Equipment. See Form 990, Pa.

Description of investment	(a) Cost or other basis	(b) Cost or other basis
---------------------------	-------------------------	-------------------------

Description of investment

(HOURS)	
---------	--

11/20/2011	11/20/2011	11/20/2011
------------	------------	------------

[illegible]

1

• •

total. Add line

total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

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. (Column (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. (Column (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.

(a) Description of liability	(b) Amount
------------------------------	------------

(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 XIV, 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).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1,385,915	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,369,490	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	16,425	3
4	Net unrealized gains (losses) on investments		4
5	Donated services and use of facilities		5
6	Investment expenses		6
7	Prior period adjustments		7
8	Other (Describe in Part XIV.)		8
9	Total adjustments (net). Add lines 4 through 8		9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	16,425	10

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

1	Total revenue, gains, and other support per audited financial statements	1,385,915	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		2
a	Net unrealized gains on investments		a
b	Donated services and use of facilities		b
c	Recoveries of prior year grants		c
d	Other (Describe in Part XIV.)		d
e	Add lines 2a through 2d		e
3	Subtract line 2e from line 1	1,385,915	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		4
a	Investment expenses not included on Form 990, Part VIII, line 7b		a
b	Other (Describe in Part XIV.)		b
c	Add lines 4a and 4b		c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	1,385,915	5

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

1	Total expenses and losses per audited financial statements	1,369,490	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		2
a	Donated services and use of facilities		a
b	Prior year adjustments		b
c	Other losses		c
d	Other (Describe in Part XIV.)		d
e	Add lines 2a through 2d		e
3	Subtract line 2e from line 1	1,369,490	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		4
a	Investment expenses not included on Form 990, Part VIII, line 7b		a
b	Other (Describe in Part XIV.)		b
c	Add lines 4a and 4b		c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	1,369,490	5

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV - Supplemental Financial Information

CERTAIN FUNCTIONAL EXPENSES WERE CAPITALIZED TO THE CAPITAL CONSTRUCTION ACCOUNT ON THE BALANCE SHEET AS ALLOWED DURING PRE-CONSTRUCTION PHASES OF PROJECT IMPLEMENTATION. THIS AMOUNT INCLUDED \$63,090 OF SALARIES AND WAGES, AND \$33,202 OF OTHER ORGANIZATIONAL EXPENSES RELATED TO THE CONSTRUCTION PROJECT.

Supplemental information (continued)

SCHEDULE G
(Form 990 or 990-EZ)

 Department of the Treasury
 Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ. See separate instructions.

THE CENTER FOR CREATIVE EDUCATION,

 Employer identification number
65-0594599
Part I 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.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- ☐ a Mail solicitations
☐ b Internet and email solicitations
☐ c Phone solicitations
☐ d In-person solicitations
☐ e Solicitation of non-government grants
☐ f Solicitation of government grants
☐ g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No
 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.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes No			

1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total					

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.

Revenue		Direct Expenses			
1	Gross receipts	214,324			
2	Less: Charitable contributions				
3	Gross income (line 1 minus line 2)	214,324			
4	Cash prizes				
5	Noncash prizes				
6	Rent/facility costs				
7	Food and beverages				
8	Entertainment				
9	Other direct expenses				
10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Combine line 3, column (d), and line 10				214,324

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.

Revenue		Direct Expenses			
1	Gross revenue				
2	Cash prizes				
3	Noncash prizes				
4	Rent/facility costs				
5	Other direct expenses				
6	Volunteer labor				
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:

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).

spent in the organization's own exempt activities during the tax year \$

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or

Yes ☐ No ☐

a Is the organization required under state law to make charitable distributions from the gaming proceeds to

17 Mandatory distributions:

☐ Director/officer ☐ Employee ☐ Independent contractor

Description of services provided

Gaming manager compensation \$

Name

16 Gaming manager information:

Address

Name

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

amount of gaming revenue retained by the third party \$

b If "Yes," enter the amount of gaming revenue received by the organization \$ and the

Yes ☐ No ☐

15a Does the organization have a contract with a third party from whom the organization receives gaming

Address

Name

records:

14 Enter the name and address of the person who prepares the organization's gaming/special events books and

b An outside facility

a The organization's facility

13 Indicate the percentage of gaming activity operated in:

formed to administer charitable gaming?

Yes ☐ No ☐

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity

Yes ☐ No ☐

11 Does the organization operate gaming activities with nonmembers?

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

THE CENTER FOR CREATIVE EDUCATION,

Employer identification number
65-0594599

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.

Open to Public Inspection

2010

OMB No. 1545-0047

Form 990 - Organization's Mission or Most Significant Activities

THE ORGANIZATION APPLIES THE ARTS AND HUMANITIES TO IMPROVE THE LIVES OF

CHILDREN WHERE THEY LIVE, LEARN AND PLAY. THE ORGANIZATION BELIEVES

SUSTAINED, HIGH-QUALITY AND HANDS-ON CREATIVE LEARNING WILL IMPROVE EACH

CHILD'S LEARNING POTENTIAL, INCREASE ENTHUSIASM ABOUT SCHOOL, SHAPE MORE

PRODUCTIVE COMMUNITY MEMBERS, AND ENCOURAGE YOUNG PEOPLE TO EXERCISE

CREATIVE PROBLEM SOLVING IN LIFE AND LEARNING.

Form 990, Part III, Line 4d - All Other Achievements

BLENDS THE TALENTS OF PROFESSIONAL ARTISTS AND CLASSROOM

TEACHERS TO DEVELOP AND IMPLEMENT IN-SCHOOL CURRICULUM TO

TEACH TRADITIONAL ACADEMIC SUBJECTS THROUGH THE ARTS.

PROVIDES YOUTH WITH CREATIVE ALTERNATIVES TO DEVELOP AN

APPRECIATION FOR ART AND CULTURE AS WELL AS THEIR OWN

ARTISTIC AND CREATIVE TALENTS DURING THE CRITICAL AFTER

SCHOOL HOURS. THE ORGANIZATION SERVES MORE THAN 8,000

STUDENTS, TEACHERS AND COMMUNITY MEMBERS IN PALM BEACH

COUNTY, FLORIDA.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

THE BOARD OF DIRECTORS NOMINATES MEMBERS AND THE EXECUTIVE COMMITTEE

APPROVES

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members

SUBJECT TO APPROVAL BY EXECUTIVE COMMITTEE AND/OR BOARD OF DIRECTORS

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
 UPON REQUEST, GOVERNING DOCUMENTS ARE HOUSED AT THE ADMINISTRATIVE OFFICES
 AND CAN BE REVIEWED DURING BUSINESS HOURS

DIRECTORS

Form 990, Part VI, Line 15b - Compensation Process for Officers
 KEY EMPLOYEE COMPENSATION IS SUBJECT TO REVIEW AND APPROVAL BY THE BOARD OF

APPROVAL

Form 990, Part VI, Line 15a - Compensation Process for Top Official
 EXECUTIVE DIRECTOR AND ALL DIRECTORS COMPENSATION ARE SUBJECT TO COMMITTEE

DOCUMENTED POLICIES AND PROCEDURES

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
 ONGOING CERTIFICATION FOR NOT-FOR-PROFIT STATUS INCLUDING COMPLIANCE WITH

ACCURACY OR SIGNIFICANT OMISSIONS PRIOR TO FILING

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990
 MANAGEMENT AND BOARD OF DIRECTORS REVIEW COPY OF THE FORM 990 FOR

THOMAS PILECKI

Form 990, Part VI, Line 9 - Officers Who Cannot Be Reached

THE CENTER FOR CREATIVE EDUCATION,

Employer identification number
 65-0594599

Name of the organization

Form 4562

Department of the Treasury
Internal Revenue Service

Depreciation and Amortization (Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

Identifying number
65-0594599

Name(s) shown on return

THE CENTER FOR CREATIVE EDUCATION

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	500,000
2	Total cost of section 179 property placed in service (see instructions)	2,000,000
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	

6	(a) Description of property	
	(b) Cost (business use only)	
	(c) Elected cost	

7	Listed property. Enter the amount from line 29	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	
9	Tentative deduction. Enter the smaller of line 5 or line 8	
10	Carryover of disallowed deduction from line 13 of your 2009 Form 4562	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	
13	Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	
15	Property subject to section 168(f)(1) election	
16	Other depreciation (including ACRS)	47,175

Part III MACRS Depreciation (Do not include listed property.) (See instructions)

17	MACRS deductions for assets placed in service in tax years beginning before 2010	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	

Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
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19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property					
h	Residential rental property					
i	Nonresidential real property					

Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System

20a	Class life					
b	12-year					
c	40-year					

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here	47,175
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2010)

There are no amounts for Page 2

Forms 990 / 990-PF		For calendar year 2010, or tax year beginning	
Mortgages and Other Notes Payable		07/01/10	and ending 06/30/11
2010		Employer Identification Number	

Name THE CENTER FOR CREATIVE EDUCATION, 65-0594599

Form 990, Part X, Line 23 - Additional Information

Name of lender		Relationship to disqualified person	
(1) BANK OF AMERICA CONSTRUCTION LOAN			
(2) LINE OF CREDIT PNC BANK			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) 578,034		07/31/12		
(2) 50,000		03/05/12		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) INTEREST IN PROPERTY	CONSTRUCTION LOAN
(2) OPERATING LINE OF CREDIT	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1) 650,113	49,170	650,113
(2) 48,596		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10) Totals	699,283	698,709