Form 990

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)

2004

Open to Public Inspection

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements.

| A | For t | he 2004 calen | dar year, | or tax year beginning | , 2004, and | d ending | | | | |
|----------|----------------|-------------------------------------|--------------------|---|---|-----------------|--|-------------|---------------------|--|
| В | Check | d'applicable: | 1200 100 | 5 residence esse attachment | | | D Emple | yer Identi | fication Number | |
| | T A | | | | | | | 4-3585301 | | |
| | T _N | TRATE CHANGE OF TYPE | | | | | E Telep | hone num | ber | |
| | In | ntial return | See | SAN FRANCISCO, CA 9 | 1105-3013 | | 415 | 5-946 | -3068 | |
| | T _E | inal return | instruc- tions. | | AXPAYER'S | Verill | F Accor | unting | Cash X Accruel | |
| | T. | mended return | - | | FAR ALLEN | 00011 | | Other (spec | Total Selection . | |
| | H | polication pending | • Secti | on 501(c)(3) organizations and | 1947(a)(1) nonexempt. | H and Late and | | | ganizations | |
| | 220000 | | (Form | table trusts must attach a comp 1 990 or 990-EZ). | leted Schedule A | H (a) is this a | | | | |
| G | Web | site: WWW. | CREATI | VECOMMONS.ORG | | H (c) Are all a | affiliates include | d* | Yes No | |
| J | | nization type ck only one) | | X 501(c) 3 → (insert no.) | 4947(a)(1) or 527 | | attach a list. Se | | 10.75 | |
| K | | | | nization's gross receipts are nor | | | tion covered by | | | |
| | \$25. | 000. The orga | nization n | eed not file a return with the IRS | but if the organization | | Exemption | | | |
| | Som | ne states requi | ire a comp | ge in the mail, it should file a rel plete return. | urn without financial data | | - present | | on is not required | |
| - | Cere | e secondo: Add | Lone Sh G | 5b. 9b, and 10b to line 12 ► 4 | 93 360 | | | | 990-EZ, or 990-PF). | |
| Pa | | Dayonu | Evner | ises, and Changes in Net | Accets or Fund Ral | | A Part of the Part | | | |
| Га | 1 | | | ants, and similar amounts receiv | 12212 | ances (see in | SITUCIONS) | 951 m | | |
| | | | | ents, and similar amounts receiv | 100 miles | 1a 3 | 85,430. | 133 | | |
| | | 2 | | | | 1b | 03,430. | | | |
| | | | | ons (grants). | | 10 | | | | |
| | | Total (add vres la evough Ic) (o | CONTRIDUCTION | 385, 430 . noncesh \$ | | | | 1 d | 385,430. | |
| | to the same of | | | ue including government fees a | | | | 2 | 303,430. | |
| | 3 | | | assessments | | | | 3 | | |
| | 4 | | | d temporary cash investments | | | 400 | 4 | 7,378. | |
| | 5 | | | from securities | | | | 5 | 7,370. | |
| | 0.550 | | | nom secondes | | 6a | VIE 1820 | Marin A. | | |
| | | | | | | 6b | | | | |
| | | | | loss) (subtract line 6b from line | | | | 6- | | |
| | | | | me (describe | 00/ | | 111 mm | 6c | | |
| E | | | | CLASSOCIATION SECTION | (A) Securities | (B) (| Other | 200000 | | |
| REVENUE | 1 | than invento | ry | les of assets other | | 8a | JUIE! | | | |
| E | 1 | b Less: cost of | r other ba | sis and sales expenses | | 8b | | | | |
| | | c Gain or (loss) (| attach sched | ule) | | 8c | | | | |
| | | | | nbine line 8c. columns (A) and (| | | e made a | 8d | | |
| | 9 | Special ever | nts and ac | tivities (attach schedule). If any | amount is from gaming. | check here | - | TEMP | | |
| | 1 5 | a Gross reveni | ue (not in | cluding \$ | of contributions | | | SULU. | | |
| | | reported on | line 1a) | | Williams H | 9a | 70,619. | | | |
| | | b Less: direct | expenses | other than fundraising expense | | | 62,270. | | | |
| | , | c Net income i | or (loss) fi | rom special events (subtract line | 9b from line 9a) | STAT | EMENT. 1 | 90 | 8,349. | |
| | 10: | Gross sales | of invento | ry, less returns and allowances | 1 | 0a | | 1935 | 0,010. | |
| | | Less: cost of | goods so | ld | | 0 b | | Section 1 | | |
| | , | s bross pront or (| loss) from s | ales of inventory (attach schedule) (subtr | act line 10th from line 10ol | | | 10 c | | |
| | 11 | Other revenu | ie (from P | art VII, line 103) | | | | 11 | 29,933. | |
| _ | 12 | rotal revenu | 6 (900 HU | es 10, 2, 3, 4, 5, 6c, 7, 8d, 9c, 1 | Oc. and 11) | | | 12 | 431,090. | |
| Ē | 13 | Frogram sen | vices (fron | n line 44, column (B)) | | | | 13 | 980,816. | |
| EXPERSES | 14 | management | and gene | fal (from line 44, column (C)). | | | | 14 | 122,146. | |
| N | 16 | runorasing (| from line | 44, column (D)) | AND DESCRIPTION OF THE PERSON | | | 15 | 50,247. | |
| E | 17 | rayments to | amiliates | (attach schedule) | | | | 16 | | |
| _ | 18 | Total expens | es (add In | nes 16 and 44, column (A)). | | | | 17 | 1,153,209. | |
| , A | 19 | Excess or (or | encit) for t | he year (subtract line 17 from li | ne 12) | | | 18 | -722,119. | |
| ASSET | 20 | ivet assets or | fund bala | ences at beginning of year (from | line 73, column (A)) | | 40 (800 040 040 040 040 040 040 040 040 040 | 19 | 1,828,038. | |
| ' T | 21 | Not seed to | s in net a | ssets or fund balances (attach o | xplanation) | | 27 12 2 2 2 | 20 | | |
| | | Private Act | rund bala | inces at end of year (combine li | nes 18, 19, and 20) | | | 21 | 1,105,919. | |
| JA. | . 10 | Flivacy Act | and Paper | work Reduction Act Notice, see | the separate instruction | IS. TE | EA0107L 01/07 | 105 | Form 990 (2004) | |

Page 2

Part II Statement of Functional Expenses All organizations must complete column (A), Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

| D | o not include amounts reported on line 65, 85, 95, 105, or 16 of Part I. | | (A) Total | (B) Program services | (C) Management and general | (D) Fundraising |
|-------|--|---------------------|--|---|-------------------------------|--|
| 22 | Grants and allocations (att sch) | 1 | | | | |
| | (cash \$ | | | | | |
| | non-cash \$). | 22 | | | EVEN DE DE | |
| | Specific assistance to individuals (att sch) | 23 | | | | |
| 24 | Benefits paid to or for members (att sch) Compensation of officers, directors, etc | 25 | 260,734. | 226,838. | 33,896. | TO REAL PROPERTY MAN |
| 26 | Other salaries and wages | 26 | 148,103. | 107,584. | 14,420. | 26,099. |
| 27 | | 27 | 110,100. | 1077001. | 11,1201 | 20,022. |
| 28 | Other employee benefits | 28 | 13,434. | 11,131. | 1,732. | 571. |
| 29 | Payroll taxes | 29 | 31,911. | 25,733. | 4,011. | 2,167. |
| 30 | Professional fundraising fees | 30 | | | | |
| 31 | Accounting fees | 31 | 4,408. | | 4,408. | |
| 32 | Legal fees | 32 | 12,180. | 707. | 11,473. | |
| 33 | Supplies | 33 | 21,811. | 21,811. | 7,70 | |
| 34 | Telephone | 34 | 7,534. | 7,534. | | |
| 35 | Postage and shipping | 35 | 7,0011 | ,,,,,,, | | |
| 36 | Occupancy | 36 | 35,225. | 35,225. | | |
| 37 | Equipment rerital and maintenance | 37 | | , | | |
| 38 | | 38 | | | | |
| 1000 | Travel | 39 | 73,222. | 72,085. | 1,137. | |
| 40 | Conferences, conventions, and meetings | 40 | 7,57,554 | 7.07.0001 | 2/2011 | |
| | Interest | 41 | | | | |
| 42 | Depreciation, depletion, etc (attach schedule) | 42 | 7,461. | | 7,461. | |
| - 1 | Other expenses not covered above (itemize): | | | | | |
| | SEE STATEMENT 2 | 43a | 537,186. | 472,168. | 43,608. | 21,410. |
| | | 43b | | | | , |
| | | 43c | | | | |
| | 1 | 43d | | | A FEET OF STATE OF | |
| | | 43e | | | | |
| 44 | Total functional expenses (add lines 22 43). Organizations completing columns (B) • (D), carry these totals to lines 13 • 15 | 44 | 1,153,209. | 980,816. | 122,146. | 50,247. |
| Join | t Costs. Check . I if you are following | SOP 98 | 3-2. | | | 12.27 |
| | any joint costs from a combined education | | | | | Yes X No |
| | es,' enter (i) the aggregate amount of the | se joint o | osts \$ | ; (ii) the ar | mount allocated to Prog | ram services |
| \$_ | | located t | to Management and ge | neral \$ | ; and (iv) the | amount ellocated |
| | undraising S | | | | | |
| Par | | | The state of the s | | | |
| | t is the organization's primary exempt pu | | SEE STATEMEN | I 3 | | Program Service Expenses (Program Service Expenses) (Program Service Expenses) |
| clien | rganizations must describe their exempt its served, publications issued, etc. Discuous ons and 4947(a)(1) nonexempt charitable | purpose ss achie | achievements in a cies vements that are not n | ar and concise manner neasurable. (Section 5 | 01(c)(3) & (4) organ- | (4) organizations and 4947(a)(1) trusts, but optional for others.) |
| | | trusts n | nust also enter the amo | ount of grants & alloca | tions to others.) | optional for others.) |
| - | SEE STATEMENT 4 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | (Grants and | allocations \$ |) | 980,816. |
| t | | | | | | |
| | | | | | | |
| | | | | | | |
| 3 | - | | (Grants and a | allocations \$ |) | |
| • | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | (Grants and | allocations 5 |) | |
| (| | | | | | |
| | | | | | | |
| | | | | | | |
| 191 | Others | | (Grants and | |) | |
| | Other program services | | (Grants and | |) | *** *** |
| 744 | Total of Program Service Expenses (sh | ould equ | al line 44, column (B), | Program services) | F | 980,816. |

Part IV Balance Sheets (See Instructions)

| te: | Where required, attached schedules and amounts within the description column should be for end-of-year amounts only. | (A) Beginning of year | | (B) End of year |
|-----|--|---|------|--------------------|
| | 45 Cash - non-interest-bearing | | 45 | |
| 100 | 46 Savings and temporary cash investments | 855,150. | 46 | 889,081 |
| | #5105 w | | 1 | |
| | 47 a Accounts receivable 47 a | | 100 | |
| | b Less; allowance for doubtful accounts | | 47 c | |
| | 48a Pledges receivable | | | |
| ' | b Less; allowance for doubtful accounts. 48b | | 48 c | |
| | 49 Grants receivable | 1,000,000. | 49 | 190,000 |
| | | 2,000,000. | 13 | 2,0,000 |
| | 50 Receivables from officers, directors, trustees, and key employees (attach schedule). | 16,618. | 50 | 12,865 |
| 1 | 51 a Other notes & loans receivable (attach sch) | | 1000 | |
| | b Less: a lowance for doubtful accounts | | 51 c | |
| | 52 Inventories for sale or use | | 52 | |
| | 53 Prepaid expenses and deferred charges | | 53 | 23.328 |
| | 54 Investments – securities (attach schedule) Cost FMV | | 54 | |
| B | 55a Investments - land, buildings, & equipment: basis 55a | | 9330 | |
| | b Less: accumulated depreciation | | | |
| | (attach schedule) | | 55 c | |
| 8 | 56 Investments – other (attach schedule) | | 56 | |
| | 57a Land, buildings, and equipment: basis 57a 35, 486. | | | |
| | b Less: accumulated depreciation | 250000000000000000000000000000000000000 | | 32952 200000g |
| | b Less: accumulated depreciation (attach schedule). STATEMENT. 5 57b 12,066. | 9,248. | | 23,420 |
| | 58 Other assets (describe). | | 58 | |
| - | 59 Total assets (add lines 45 through 58) (must equal line 74) | 1,881,016. | 59 | 1,138,694 |
| | 60 Accounts payable and accrued expenses | 52,978. | | 32,775 |
| | 61 Grants payable | | 61 | |
| | 62 Deferred revenue | | 62 | |
| | 63 Loans from officers, directors, trustees, and key employees (attach schedule) | | 63 | |
| . 8 | 64a Tax-exempt bond liabilities (attach schedule). | | 64a | |
| ١. | b Mortgages and other notes payable (attach schedule) | | 64b | |
| 1 | 65 Other liabilities (describe). | FA ADA | 65 | ** *** |
| | 66 Total liabilities (add lines 60 through 65). | 52,978. | 66 | 32,775 |
| Or | ganizations that follow SFAS 117, check here X and complete lines 67 | | | |
| | through 69 and lines 73 and 74. | 000 000 | 200 | 000 600 |
| | 67 Unrestricted | 828,038. | | 923,639 |
| | 68 Temporarily restricted | 1,000,000. | _ | 182,280 |
| | 69 Permanently restricted | | 69 | |
| Or | ganizations that do not follow SFAS 117, check here and complete lines | | | |
| | 70 through 74. | | 70 | |
| | 70 Capital stock, trust principal, or current funds | | 71 | |
| 4 | 72 Retained earnings, endowment, accumulated income, or other funds | | 72 | |
| | AND TO THE RESIDENCE OF THE PARTY OF THE PAR | | 12 | |
| | 73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21) | 1,828,038. | 73 | 1,105,919 |
| | 72. Column (A) must equal line 19, column (b) must equal line 21) | 1 881 016 | 74 | 1 138 694 |

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

BAA

| Financial Statements wit per Return (See instruction | h Revenue | Financial Statements with per Return | es per Audited 1 Expenses |
|--|--|---|--|
| a Total revenue, gains, and other support per audited financial statements | a 555,857. | a Total expenses and losses per audited financial statements | a 1,277,976. |
| b Amounts included on line a but not on line 12. Form 990: | | b Amounts included on line a but not on line 17, Form 990: | |
| (1) Net unrealized gains on investments \$ | | (1) Donated services and use of facilities \$ 124,767. | |
| (2) Donated services and use of facilities \$ 124,767. | | (2) Prior year adjust- ments recorded on line 20, Form 990 S | |
| (3) Recoveries of prior year grants \$ | | (3) Losses reported on line 20, Form 990 \$ | |
| | | | |
| Add amounts on lines (1) through (4) | b 124,767. | Add amounts on lines (1) through (4) | ь 124,767. |
| c Line a minus line b | c 431,090. | | c 1,153,209. |
| d Amounts included on line 12, Form 990 but not on line a: | | d Amounts included on line 17, Form 990 but not on line a: | |
| (1) Investment expenses not included on line 60, Form 990 \$ | | (1) Investment expenses not included on line 6b. Form 990 \$ | |
| (2) Other (specify): | | (2) Other (specify): | |
| s | | s | |
| Add amounts on lines (1) and (2) > | d | Add amounts on lines (1) and (2) | d |
| e Total revenue per line 12, Form 990 (line c plus line d) | e 431,090. | | |
| Part V List of Officers, Directors | | mployees (List each one even if not comp | |
| (A) Name and address | (B) Title and average h per week devoted to position | ours (C) Compensation (D) Contributions (if not paid. enter -0-) employee benefit plans and deferr compensation | fit account and other ed allowances |
| SEE STATEMENT 6 | | | |
| | | 286,212. | 0. 15,560. |
| | - | | |
| | | | |
| | - | | |
| | - | | |
| | - | | |
| | - | | |
| | _ | | |
| | - | | |
| | | | |
| | | | |
| | | | |
| | n and all related organizations? | regate compensation of more ions, of which more than | ► Yes X No |
| If 'Yes,' attach schedule – see instru | ictions. | | Form 990 (2004 |

| OLL | 990 (2004) CREATIVE COMMONS CORPORATION 04-358530 | 1 | P | age 5 |
|-----|--|--------|-------|-------|
| | rt VI Other Information (See instructions.) | | Yes | No |
| | Did the organization engage in any activity not previously reported to the IRS? If "Yes," | 76 | | Х |
| | attach a detailed description of each activity | 77 | - | X |
| 77 | Were any changes made in the organizing or governing documents but not reported to the IRS? | " | 18-10 | ^ |
| 70. | If 'Yes,' attach a conformed copy of the changes. a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 78a | | Х |
| | b If 'Yes,' has it filed a tax return on Form 990-T for this year? | 78b | N | /A |
| | | 700 | 0.10 | |
| 79 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' attach a statement | 79 | - | Х |
| | a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc. to any other exempt or nonexempt organization? | 80 a | | Х |
| ı | b If 'Yes,' enter the name of the organization > N/A and check whether it is exempt or nonexempt. | | | |
| 81: | a Enter direct and indirect political expenditures, See line 81 instructions | | | |
| | b Did the organization file Form 1120-POL for this year? | 81 b | | X |
| | a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? | 82 a | Х | |
| 1 | bilf 'Yes,' you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) | | | |
| 83: | a Did the organization comply with the public inspection requirements for returns and exemption applications? | 83a | Х | |
| | b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? | 83b | X | |
| | a Did the organization solicit any contributions or gifts that were not tax deductible? | 84 a | | X |
| 1 | bilf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 84 b | N | A |
| 85 | 501(c)(4), (5), or (6) organizations, a Were substantially all dues nondeductible by members? | 85 a | | /A |
| | b Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 85 b | | /A |
| | If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year | | | |
| - | c Dues, assessments, and similar amounts from members | 4 | | 188 |
| | d Section 162(e) lobbying and political expenditures | 4 | 1 | FIN |
| | e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices | 4 | 180 | 1000 |
| | f Taxable amount of lobbying and political expenditures (line 85d less 85e) | | 76 | |
| 4 | g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? | 85 g | N | /A |
| 9 | h if section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to rondeductible lobbying and political expenditures for the following tax year? | 85 h | N | /A |
| 86 | 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on | | | 120 |
| | line 12 | 4 | | 100 |
| 1 | b Gross receipts, included on line 12, for public use of club facilities | | 42 | 1 |
| 87 | 501(c)(12) organizations. Enter: a Gross income from members or shareholders | | | - |
| | b Gross income from other sources. (Do not net amounts due or paid to other sources | | 718 | |
| | against amounts due or received from them.) N/Z | | 20 | |
| 88 | At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301,7701-3? If 'Yes,' complete Part IX | 88 | | х |
| 89 | a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: | | 93 | 1869 |
| | section 4911 ► 0. ; section 4912 ► 0. ; section 4955 ► 0. | | | |
| 1 | b 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction. | 89Ь | | х |
| | c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958. ▶ | | | 0. |
| | d Enter: Amount of tax on line 89c, above, reimbursed by the organization | | | 0. |
| | a List the states with which a copy of this return is filed NONE | genees | e0151 | |
| | b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) | 90 b | | 4 |
| | The books are in care of ► THE ORGANIZATION Telephone number ► 415-946-30 Located at ► 543 HOWARD ST 5TH FLR, SAN FRANCISCO, CA ZIP + 4 ► 9410 | 68_ | | |
| 92 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check here. | N/ | Α | F [] |

| Note: Enter | r gross amounts unless | (A) | (B) | (C) Exclusion code | (D) Amount | Related or exempt function income |
|--|--|--|--|--|--|---|
| Vertile Control | gram service revenue: | Business code | Amount | Excrusion code | Amount | nunction income |
| The same of the sa | grant service revenue. | | | | | |
| 135. | | | | | | |
| d | | | | | | |
| e | | | | | | |
| | dicare/Medicaid payments | | | | | |
| | & contracts from government agencies | | | | | |
| 7.0 | mbership dues and assessments. rest on savings & temporary cash invinits. | | | 14 | 7,378. | |
| | dends & interest from securities | | | | ,,,,,, | |
| 97 Net | rental income or (loss) from real estate: | | ABOUT THE STATE OF | | | |
| | t-financed property | | | | | |
| | debt-financed property | | | | | |
| | rental income or (loss) from pers prop | | | | | |
| 100 Gai | n or (loss) from sales of assets er than inventory | | | | | |
| | income or (loss) from special events | | | 1 | 8,349. | |
| | is profit or (loss) from sales of inventory | | | | | |
| | er revenue: a | | | | 29,933. | |
| 5 5 7 7 7 | RO TO DOLLARS GAIN | | | 1 | 29,933. | |
| d | 2 | | | | | |
| e | | | | | | |
| | total (add columns (B), (D), and (E)) | EXCELLENGE TO SERVICE | | | 45,660. | |
| 105 Tot lote: Line | lal (add line 104, columns (B), (D), 105 plus line 1d. Part I, should equivalent to the state of the organization's exempt purp | the amount of the Accom | plishment of E | Exempt Purposes | (See instructions.) | |
| 105 Tot Note: Line Part VIII Line No. | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent to the state of | the amount of the Accom | on line 12. Part I. plishment of E | Exempt Purposes | (See instructions.) | |
| 105 Tot Note: Line Part VIII Line No. | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent line 1d, Part I, should equivalent line 1d, Part I, should equivalent line 1d, should equivalent line 1d, should explain how each activity for which of the organization's exempt purpose the organization's exempt purpose 1d, should be sh | o the Accom the Accom the income is reposed (other than | pri line 12. Part I. plishment of E orted in column (E by providing fund | Exempt Purposes E) of Part VII contribu ds for such purposes | (See instructions.) Ited importantly to th | |
| 105 Tot Note: Line Part VIII Line No. | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equal Relationship of Activities to Explain how each activity for which of the organization's exempt purpose to the Information Regarding Tax | o the Accom the Accom the income is reposes (other than | pri line 12. Part I. plishment of E orted in column (E by providing fund | Exempt Purposes) of Part VII contributed for such purposes regarded Entities | (See instructions.) Ited importantly to the | |
| 105 Tot Note: Line Part VIII Line No. V N/A | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent to the Relationship of Activities to Explain how each activity for which of the organization's exempt purp to the organization of the organization | tal the amount of the Accommon the Accommon is reproses (other than table Subsidian). (B) Percentage of | prine 12. Part I. plishment of E orted in column (I by providing fund aries and Disr | Exempt Purposes E) of Part VII contribu ds for such purposes | (See instructions.) Ited importantly to the contractions.) (See instructions.) (D) Total | e accomplishment (E) End-of-year |
| 105 Tot Note: Line Part VIII Line No. VN/A | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent to the Relationship of Activities to Explain how each activity for which of the organization's exempt purpose to the organization of the organizat | the amount of the Accommon the Accommon the Income is reprosed to the | prine 12. Part I. plishment of E orted in column (I by providing fund aries and Disr Nature | Exempt Purposes E) of Part VII contributed for such purposes regarded Entities (C) | (See instructions.) Ited importantly to the contraction of the contractions.) (See instructions.) | e accomplishment (E) |
| 105 Tot Note: Line Part VIII Line No. VN/A | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent to the Relationship of Activities to Explain how each activity for which of the organization's exempt purp to the organization of the organization | tal the amount of the Accommendation the Accommendation that the control of the Accommendation that the control of the Accommendation that the Accomme | prine 12. Part I. plishment of E orted in column (in by providing fund aries and Disr Nature Nature | Exempt Purposes E) of Part VII contributed for such purposes regarded Entities (C) | (See instructions.) Ited importantly to the contractions.) (See instructions.) (D) Total | e accomplishment (E) End-of-year |
| 105 Tot Note: Line Part VIII Line No. N/A Part IX | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent to the Relationship of Activities to Explain how each activity for which of the organization's exempt purp to the organization of the organization | tal the amount of the Accommendation the Accommendation that the control of the Accommendation that the control of the Accommendation that the Accomme | aries and Disr | Exempt Purposes E) of Part VII contributed for such purposes regarded Entities (C) | (See instructions.) Ited importantly to the contractions.) (See instructions.) (D) Total | e accomplishment (E) End-of-year |
| Part VIII Line No. N/A Part IX Name, part N/A | al (add line 104, columns (B), (D), 105 plus line 1d, Part I, should equivalent in the Relationship of Activities to Explain how each activity for which of the organization's exempt purpose the organization's exempt purpose (A) address, and EIN of corporation, thership, or disregarded entity | al the amount of the Accommodification in the | aries and Disr | Exempt Purposes E) of Part VII contributed in Such purposes regarded Entities (C) of activities | (See instructions.) Ited importantly to the contractions.) (See instructions.) (D) Total income | (E) End-of-year assets |
| Part IX Name, par N/A Part X Part X A Dd tv b Did ti | Information Regarding Trae organization, during the year, receive any functional for the organization, during the year, receive any function of the organization of the year, receive any function of the organization, during the year, part of 'Yes' to (b), file Form 8870 and Form 1985 of the organization of the year, part of 'Yes' to (b), file Form 8870 and Form 1985 of the organization of the year, part of 'Yes' to (b), file Form 8870 and Form 1985 of the organization of the organiz | ral the amount of the Accomment in the Accomment in the International Control of the Accomment in the International Control of the I | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, instructions). | egarded Entities (C) of activities rsonal Benefit Cost on a personal benefit conton a personal | (See instructions.) ited importantly to the structions.) (See instructions.) (D) Total income | (E) End-of-year assets uctions.) Yes X No Yes X No |
| Part IX Name, part X Part X Part IX Name, part X a Dd to b Did to Note: / | Information Regarding Traes organization, during the year, receive any function of during the organization, during the year, page 2 organization, during the year, page 3 organization, | ral the amount of the Accomment in the Accomment in the International Control of the Accomment in the International Control of the I | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, instructions). | egarded Entities (C) of activities rsonal Benefit Cost on a personal benefit conton a personal | (See instructions.) ited importantly to the structions.) (See instructions.) (D) Total income | (E) End-of-year assets uctions.) Yes X No Yes X No |
| Part IX Name, part X Part X Name, part X P | Information Regarding Tra a organization, during the year, receive any functional organization and programme of the programme of the programme of the organization of | ral the amount of the Accomment income is reproses (other than able Subsidian (B) Percentage of ownership interesting interesting interesting interesting interesting in the control of t | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, is based on all into | egarded Entities (C) of activities rsonal Benefit Cost on a personal benefit conton a personal | (See instructions.) ited importantly to the structions.) (See instructions.) (D) Total income income ontracts (See instructions.) it contract? | (E) End-of-year assets yes X No Yes X No Owledge and belief, 4 is |
| Part IX Name, par N/A Part IX Name, par N/A Part X a Dd to bold to Note: // Please Sign Here | Information Regarding Tra and congenization, during the year, particular of presents of present and for presents of presents | tal the amount of the Accommon the Accommon the Income is reprosed to the Income is reprosed to the Income is reprosed to the Income In | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, is based on all into | egarded Entities (C) of activities rsonal Benefit Co s on a personal benefit con , on | (See instructions.) ited importantly to the contracts (See instructions.) (D) Total income ontracts (See instructions.) fit contract? Date Check if | (E) End-of-year assets Joctions.) Yes X No Yes X No owledge and belief, 4 is |
| Part IX Name, part N/A Part IX Name, part N/A Part X a Dd to b Did to Note: / | Information Regarding Tra a organization, during the year, pa brown of personal decimals of personal decimals of the organization of the organizat | tal the amount of the Accomment in the A | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, is based on all into | egarded Entities (C) of activities resonal Benefit Co on a personal benefit con , on a personal benefit con ying schedules and statement which preparer h | (See instructions.) ited importantly to the contracts (See instructions.) (D) Total income ontracts (See instructions.) fit contract? Date Check if | (E) End-of-year assets actions.) Yes X No Yes X No |
| Part IX Name, part N/A Part IX Name, part N/A Part X a Dd to boid to Note: / Please Sign Here Paid Preparer's | Information Regarding Tra a organization, during the year, part to be organization, during the year, part to correct, and comblete. Declaration of private or print name and tota. Preparer's separative PRUCE J. WRITERING. | tal the amount of the Accomment in the A | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, is based on all into | egarded Entities (C) of activities resonal Benefit Co on a personal benefit con , on a personal benefit con ying schedules and statement which preparer h | (See instructions.) (See instructions.) (See instructions.) (D) Total income Ontracts (See instructions.) fit contract? | (E) End-of-year assets Ictions.) Yes X No Yes X No owledge and belief, 4 is reparer's SSN or PTIN (Sne eneral Instruction W) 00083251 |
| Part IX Name, par N/A Part IX Name, par N/A Part X a Dd to b Did to Note: // Please Sign Here Paid Pre- | Information Regarding Tra a organization, during the year, pa brown of personal decimals of personal decimals of the organization of the organizat | al the amount of the Accommendation the Accommendation the Accommendation of the Accomme | aries and Disr Nature Stated with Percepty, to pay premiums ectly or indirectly, is based on all into | egarded Entities (C) of activities resonal Benefit Co on a personal benefit con , on a personal benefit con ying schedules and statement which preparer h | (See instructions.) (See instructions.) (See instructions.) (D) Total income Ontracts (See instructions.) fit contract? | (E) End-of-year assets Inctions.) Yes X No Yes |

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

2004

Employer identification number

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ.

04-3585301 CREATIVE COMMONS CORPORATION Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See instructions. List each one. If there are none, enter 'None.') (d) Contributions to employee benefit plans and deferred (a) Name and address of each (b) Title and average (c) Compensation (e) Expense employee paid more than \$50,000 hours per week account and other devoted to position allowances compensation CTO MIKE LINKSVAYER 40+ 66.958 0 0. 543 HOWARD ST. 5TH FLR, SF CA 94105 WEB DESIGNER MATT HAUGHEY 40+ 62,165. 0 0. 543 HOWARD ST, 5TH FLR, SF CA 94105 Total number of other employees paid over \$50,000. Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions, List each one (whether individuals or firms), If there are none, enter "None.") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation CHRISTIANE ASSCHENFELDT BERLIN, GERMANY COORDINATOR CONSULT. 77,091. ROLAND HONEKAMP BERLIN, GERMANY COORDINATOR ASSIST. 51,592. Total number of others receiving over \$50,000 for professional services. 0

| Part II | Statements About Activities (See instructions.) | , | Yes | No |
|--|---|--|-------------|--------|
| 1 Du | uring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid | | | |
| | incurred in connection with the lobbying activities • \$ N/A | | | 553 |
| (M | lust equal amounts on line 38, Part VI-A, or line i of Part VI-B.) | 1 | | Х |
| or | ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other ganizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the obyging activities. | | | |
| su | uring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any obstantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any xable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal inefficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions.) | | | |
| a 5 | ele, exchange, or leasing of property? | 2a | | X |
| b Le | inding of money or other extension of credit? | 2b | | Х |
| c Fu | rnishing of goods, services, or facilities? | 2c | | Х |
| dP: | syment of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d | | Х |
| e Tr | ansfer of any part of its income or assets? | 2e | | Х |
| 3a Do | you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an | 2- | | v |
| | planation of how you determine that recipients qualify to receive payments.) you have a section 403(b) armuity plan for your employees? | | | X |
| | d you maintain any separate account for participating donors where donors have the right to provide advice | 30 | | ^ |
| or | the use or distribution of funds? | 4a | | Х |
| b D | you provide credit counseling, debt management, credit repair, or debt negotiation services? | 4b | | X |
| 9 10 11a 2 11b 12 13 13 13 14 15 15 15 15 15 15 15 | A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii), Enter the hospital and state > An organization operated for the benefit of a college or university owned or operated by a governmental unit. Sectio (Also complete the Support Schedule in Part IV-A.) An organization that normally receives a substantial part of its support from a governmental unit or from the general Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, a from activities related to its charitable, etc., functions — subject to certain exceptions, and (2) no more than 33-1/3% from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquire organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.) An organization that is not controlled by any disqualified persons (other than foundation managers) and supports ord described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a) | n 170(b) I public. Ind gross of its su ed by the | s recuppore | A)(rv) |
| | section 509(a)(3).) Provide the following information about the supported organizations. (See instructions.) | (2). (500 | * | |
| | (a) Name(s) of supported organization(s) | (b) Line | | what |
| | | from | abor | ie |
| 14 T | An organization organized and operated to test for public safety. Section 509(a)(4), (Sec instructions.) TEEA0402, 07/27/04 Schedule A (Form 990 or F | orm 990 |)-EZ) | 200 |

04-3585301

Page 2

Schedule A (Form 990 or 990-EZ) 2004 CREATIVE COMMONS CORPORATION

Schedule A (Form 990 or 990-EZ) 2004 CREATIVE COMMONS CORPORATION 04-3585301 Page 3 Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting (e) Total (d) Calendar year (or fiscal year beginning in) Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) 1,001,680. 2,453. 2.119.133. 1,115,000. 16 Membership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose. Gross income from interest, dividends, amounts received from payments on 18 securities loans (section 512(a)(5)). rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organ-2.584 11,296. 8.712. gation after June 30, 1975 Net income from unrelated business 19 activities not included in line 18. Tax revenues levied for the 20 organization's benefit and either paid to it or experided on its behalf The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.... Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets 1,117,584 2,130,429. 1.010.392. 2.453. Total of lines 15 through 22 2,453 1,010,392. 1,117,584. 2,130,429 Line 23 minus line 17 25 11,176. 10,104. 25 Enter 1% of line 23. 42,609. Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 26 a b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your 1,987,173. 26 b return. Enter the total of all these excess amounts . 2,130,429. c Total support for section 509(a)(1) test: Enter line 24, column (e) 26c 11,296. 18 19 d Add: Amounts from column (e) for lines: 1,998,469. 26b 1,987,173. 26 d e Public support (line 26c minus line 26d total)...... 131,960. 26e f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) 6.19 % 26f Organizations described on line 12: N/A
a For amounts included in lines 15, 16, and 17 that were received from a 'disqualified person,' prepare a list for your records to show the name of, and total amounts received in each year from, each 'disqualified person,' Do not file this list with your return. Enter the sum of

such amounts for each year: (2003)(2002) (2001)(2000)

bFor any amount included in line 17 that was received from each person (other than 'disqualified persons'), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2003) ____ (2002) (2001)_ (2000)c Add: Amounts from column (e) for lines: 16 15 27 c d Add: Line 27a total. and line 27b total. 27 d e Public support (line 27c total minus line 27d total) 27 e f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . ▶ 27f 27 g g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) 8 h Investment income percentage (line 18, column (e) (numerator) divided by line 271 (denominator)). 27h B

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

| ai | (To be completed ONLY by schools that checked the box on line 6 in Part IV) | N/A | | |
|----|--|-----------|-------|------|
| | | | Yes | No |
| 29 | Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws. | | | |
| | other governing instrument, or in a resolution of its governing body? | 29 | | - |
| 30 | Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, | 1 | 20 | |
| | catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | 30 | | - |
| | pro scrota supa. | 938 | 100 | 1457 |
| 31 | Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that | | 11.5 | 300 |
| | makes the policy known to all parts of the general community it serves? | 31 | | |
| | If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) | | | 2 |
| | | | | 537 |
| | | 1000 | -385 | |
| | | | | |
| 22 | Does the organization maintain the following: | | 1 | 199 |
| | Records indicating the racial composition of the student body, faculty, and administrative staff? | 32 a | | |
| | Records documenting that scholarships and other financial assistance are awarded on a racially | | | |
| | nondiscriminatory basis? | 32 b | | |
| | Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | 32.0 | | |
| | d Copies of all material used by the organization or on its behalf to solicit contributions? | 320 | | |
| | Copies of all material osco by the organization of on its oction to some contributions. | 100 | 1399 | 100 |
| | If you answered 'No' to any of the above, please explain. (If you need more space, attach a separate statement.) | 1000 | 100 | 15 |
| | | 123 | 1 | 15 |
| | | 180 | 3-3 | 1 |
| | The state of the second st | 100 | 185 | |
| 33 | Does the organization discriminate by race in any way with respect to: | - | | 18 |
| | a Students' rights or privileges? | 33 a | - | 1000 |
| | 3 Stopents Tights or printeges to the term of the term | 000 | | |
| | b Admissions policies? | 33 b | | |
| | | | | |
| | c Employment of faculty or administrative staff? | 330 | | |
| | | 102021-01 | | |
| | d Scholarships or other financial assistance? | 330 | | |
| | e Educational policies? | 33 e | | |
| | e Educational policies? | 336 | | - |
| | f Use of facilities? | 331 | | |
| | | | | |
| | g Athletic programs? | 330 | 1 | |
| | | | | |
| | h Other extracurricular activities? | 331 | 1 | - |
| | If you answered "Yes" to any of the above, please explain, (If you need more space, attach a separate statement.) | | 200 | 18 |
| | | | 16 | |
| | | 223 | | 118 |
| | | 100 | 100 | 100 |
| | | | - | |
| 34 | a Does the organization receive any financial aid or assistance from a governmental agency? | 34 a | | |
| | | | | |
| | b Has the organization's right to such aid ever been revoked or suspended? | 341 |) | |
| | If you answered 'Yes' to either 34a or b, please explain using an attached statement. | | | 100 |
| 35 | Does the organization certify that it has complied with the applicable requirements of | 150 | 1000 | 1500 |
| | Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev Proc 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If 'No,' attach an explanation. | 25 | | |
| | HODOISCHIRINGTION I I IVO, GLEGO ON EXPIGNATION. | 35 | 10000 | 1 |

Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768) Part VI-A N/A if the organization belongs to an affiliated group. Check > b | if you checked 'a' and 'limited control' provisions apply Check - a (a) Affiliated group Limits on Lobbying Expenditures To be completed for ALL electing totals (The term 'expenditures' means amounts paid or incurred.) organizations Total lobbying expenditures to influence public opinion (grassroots lobbying). . . . 36 36 37 Total lobbying expenditures to influence a legislative body (direct lobbying)... 37 38 Total lobbying expenditures (add lines 36 and 37) 39 Other exempt purpose expenditures Total exempt purpose expenditures (add lines 38 and 39) 40 41 Lobbying nontaxable amount. Enter the amount from the following table -The lobbying nontaxable amount is -If the amount on line 40 is -..... 20% of the amount on line 40 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 41 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 42 Grassroots nontaxable amount (enter 25% of line 41) 42 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 43 44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38..... 44 Caution: If there is an amount on either line 43 or line 44, you must file Form 4720. 4 -Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (b) (c) (d) (e) (a) (or fiscal year beginning in) > 2004 2003 2002 2001 Total 45 Lobbying nontaxable amount Lobbying ceiling amount (150% of line 45(e)). 46 47 Total lobbying expenditures 48 Grassroots nontaxable amount Grassroots calling amount (150% of line 48(e)) Grassroots lobbying 50 expenditures Part VI-B Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See instructions.) N/A During the year, did the organization attempt to influence national, state or local legislation, including any Yes No Amount attempt to influence public opinion on a legislative matter or referendum, through the use of: b Paid staff or management (Include compensation in expenses reported on lines c through h.) c Media advertisements d Mailings to members, legislators, or the public..... e Publications, or published or broadcast statements..... f Grants to other organizations for lobbying purposes..... g Direct contact with legislators, their staffs, government officials, or a legislative body....... h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means... Total lobbying expenditures (add lines c through h.).

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See instructions)

| 51 Did the | e reporting organization | directly or in | ndirectly engage in any of the following organizations) or in section 527, relationships | ng with any other organization describ | ed in secti | on 50 | 1(c) |
|-----------------|--|------------------------------|--|--|-------------|-------|------|
| | | | to a noncharitable exempt organizati | 제 : 4 : [- [- [- [- [- [- [- [- [- [| | Yes | No |
| | | | 그렇게 하는 생님이 하는 것이 없는 사람들이 살아 먹는 사람들이 하는 사람들이 살아 하지 않는 것이다. | | 51 a (i) | | X |
| | | | | DESCRIPTION OF THE CASE ASSESSED. | a (ii) | | X |
| | transactions: | | | | 5 () | | - |
| | | sets with a n | oncharitable exempt organization | APPRIATE TO THE PARTY OF THE PA | b (i) | | X |
| | | | | | b (ii) | | X |
| | | | | 47 | b (iii) | | X |
| | | | | | b (iv) | | X |
| | 300 | | | TELEPHORES AND ADDRESS OF THE PROPERTY OF | b (v) | | X |
| | | | | | b (vi) | | X |
| | | | | | c | | X |
| d If the | answer to any of the ab | ove is 'Yes,' | complete the following schedule. Co | lumn (b) should always show the fair r | | ue of | |
| the go | ods, other assets, or se ansaction or sharing arr | ervices given angement, s | by the reporting organization. If the how in column (d) the value of the o | lumn (b) should always show the fair re organization received less than fair ma oods, other assets, or services receive | arket value | ın | |
| (a) Line no. | (b) Amount involved | | (c) noncharitable exempt organization | (d) Description of transfers, transactions, and | | | 3 |
| N/A | | | | | | - | _ |
| N/A | | | | | | | |
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| 52 a ls the | organization directly or | indirectly aff | listed with or related to one or mor | re tay exercet prospirations | | | |
| descri | bed in section 501(c) of | the Code (or | ther than section 501(c)(3)) or in sec | re tax-exempt organizations tion 527? | ► Ye | s X | No |
| | complete the following | | | | See all | | |
| | (a) | | (b) | (c) | | | |
| | Name of organization | | Type of organization | Description of relation | iship | | |
| N/A | | | 7 | | | | |
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| BAA | | | | Schedule A (Form | 990 or 99 | 0-EZ) | 2004 |

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

Schedule of Contributors

CMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Supplementary Information for line 1 of Form 990, 990-EZ and 990-PF (see instructions)

2004

| Name of organization | | Employer identification number |
|--|---|--|
| CREATIVE COMMONS CORPORA | ATION | 04-3585301 |
| Organization type (check one): | | |
| Filers of: Form 990 or 990-EZ | Section: X 501(c)(3) (enter number) organ 4947(a)(1) nonexempt charitable trus 527 political organization | nization st not treated as a private foundation |
| Form 990-PF | 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trus 501(c)(3) taxable private foundation | |
| Check if your organization is covered by the boxes for both the General Rule and a | General Rule or a Special Rule. (Note: Only a section 50 a Special Rule — see instructions.) | 01(c)(7), (8), or (10) organization can check |
| General Rule - | | |
| the state of the s | 990-EZ, or 990-PF that received, during the year, II.) | \$5,000 or more (in money or property) from any one |
| Special Rules — | | |
| For a section 501(c)(3) organization 509(a)(1)/170(b)(1)(A)(vi) and recommount on line 1 of these forms, (| eived from any one contributor, during the year, a c | 3.1/3% support test of the regulations under sections contribution of the greater of \$5,000 or 2% of the |
| aggregate contributions or beques |) organization filing Form 990, or Form 990-EZ, thi ts of more than \$1,000 for use exclusively for relig elty to children or animals. (Complete Parts I, II, a | at received from any one contributor, during the year, glous, charitable, scientific, literary, or educational and III.) |
| \$1,000, (If this box is checked, en | ively for religious, charitable, etc. purposes, but the ter here the total contributions that were received of | at received from any one contributor, during the year, ese contributions did not aggregate to more than during the year for an exclusively religious, charitable, his organization because it received nonexclusively |
| religious, charitable, etc. contribut | ions of \$5,000 or more during the year.) | · · · · · · · · · · · · · · · · · · · |
| 990-PF) but they must check the box | overed by the General Rule and/or the Special Rule in the heading of their Form 990, Form 990-EZ, or thedule B (Form 990, 990-EZ, or 990-PF) | es do not file Schedule B (Form 990, 990-EZ, or on line 2 of their Form 990-PF, to certify that they do |
| BAA For Paperwork Reduction Act N for Form 990, Form 990-EZ, and Form | otice, see the Instructions 1990-PF. | Schedule B (Form 990, 990 EZ, or 990-PF) (2004) |
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CREATIVE COMMONS CORPORATION

04-3585301

of Part 1

| Part I | Contributors (See Specific Instructions.) | | |
|---------------|---|-----------------------------------|--|
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | HIGH Q FOUNDATION 3960 BROADWAY, 6TH FLOOR NEW YORK, NY 10032 | \$220,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | OMIDYAR NETWORK 1991 BROADWAY, SUITE 200 REDWOOD CITY, CA 94063 | \$ <u>150,000.</u> | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | s | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |

TEEA0702L 09/13/04

of 1

f Part II

Name of organization

CREATIVE COMMONS CORPORATION

Employer identification number 04-3585301

Noncash Property (See Specific Instructions.) (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Part I (b) Description of noncash property given N/A (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) (a) No. from Part I Date received (b) Description of noncash property given (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) \$ (b) Description of noncash property given (d) Date received (a) No. from Part I (c) FMV (or estimate) (see instructions) \$ (b) Description of noncash property given (a) No. from Part I (c) (d) FMV (or estimate) (see instructions) Date received \$ (a) No. from Part I (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (see instructions) \$

| CREATIV | VE COMMONS CORPORATION 04-3585301 | | | | | | |
|---------------------------|---|--|--|--|--|--|--|
| Part III | Exclusively religious, charitable, etc, | individual contributions to | section 501(c)(7), (8), or (10) | | | | |
| | | STATE OF THE PROPERTY OF THE PARTY OF THE PA | te cols (a) through (e) and the following line entry.) | | | | |
| | For organizations completing Part III, enter tot contributions of \$1,000 or less for the year. (E. | al of exclusively religious, charitab | ele, etc, hstructions.) S N/A | | | | |
| (a) | (b) | (c) | (d) | | | | |
| No. from Part I | Purpose of gift | Use of gift | Description of how gift is held | | | | |
| | N/A | | | | | | |
| | | | | | | | |
| | Transferee's name, address, a | (e) Transfer of gift and ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| (a) | (b) | (c) | (d) | | | | |
| No. from Part I | Purpose of gift | Use of gift | Description of how gift is held | | | | |
| | | | | | | | |
| | (e) | | | | | | |
| | Transferee's name, address, a | Transfer of gift and ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| | | | | | | | |
| (a) No. Irom Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | | | |
| | | | | | | | |
| | | | | | | | |
| | Transferee's name, address, a | (e) Transfer of gift | Relationship of transferor to transferee | | | | |
| | Trunsière s traine, audress, a | and zir + 4 | | | | | |
| | | | | | | | |
| (a) | (6) | (c) | (d) | | | | |
| No. from Part I | Purpose of gift | Use of gift | Description of how gift is held | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| | | | | | | | |

2004

FEDERAL STATEMENTS

PAGE 1

CREATIVE COMMONS CORPORATION

04-3585301

STATEMENT 1 FORM 990, PART I, LINE 9 NET INCOME (LOSS) FROM SPECIAL EVENTS

| SPECIAL EVENTS | | GROSS RECEIPTS | LESS CONTRI- BUTIONS | GROSS REVENUE | LESS DIRECT EXPENSES | NET INCOME (LOSS) |
|--|-------|----------------------------------|----------------------------|----------------------------------|-----------------------------|---------------------------------|
| TOWN HALL FOUNDATION OTHER SALES/EVENTS | TOTAL | 57,451. 13,168. \$ 70,619. | 0. 0. \$ 0. | 57,451. 13,168. \$ 70,619. | 62,270. 0. \$ 62,270. | -4,819. 13,168. \$ 8,349. |

STATEMENT 2 FORM 990, PART II, LINE 43 OTHER EXPENSES

| | (A) TOTAL | (B) PROGRAM SERVICES | (C) MANAGEMENT & GENERAL | (D) FUNDRAISING |
|---|--|------------------------------|--------------------------------|--------------------|
| BANK CHARGES CONTRACTOR FEES INSURANCE | 8,412. 339,290. 14,104. | 8,082. 294,855. | 330. 28,851. 14,104. | 15,584. |
| MEMBERSHIP AND DUES MISCELLANEOUS PUBLICITY & COMMUNICATIONS RECRUITING | 5,826. 2,291. 48,631. 65,182. | 1,968. 48,631. 65,182. | 323. | 5,826. |
| WEBSITE DEVELOPMENT & HOSTING TOTAL | 53,450. \$ 537,186. | 53,450. \$ 472,168. | \$ 43,608. | \$ 21,410. |

STATEMENT 3 FORM 990 , PART III ORGANIZATION'S PRIMARY EXEMPT PURPOSE

TO BUILD A LAYER OF REASONABLE, FLEXIBLE COPYRIGHT.

STATEMENT 4
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND SERVICE
ALLOCATIONS EXPENSES

DEVELOPED SOFTWARE TO ENABLE ONLINE RE-MIXING OF CC-LICENSED WORKS. LAUNCHED FIRST TRANSLATION OF CC LICENSES FOR USE IN A NON-US JURISDICTION. CREATED MORE EFFICIENT SEARCH ENGINE SO READERS CAN MORE EASILY LOCATE ONLINE MATERIAL AVAILABLE FOR FREE REUSE UNDER CC LICENSES. INCREASED PUBLIC ADOPTION OF CC LICENSES FROM 5,000,000 LINKBACKS OF OUR LICENSES AT THE BEGINNING OF 2004 TO OVER 12,000,000 BY JULY, 2004. "LINKBACKS" ARE NOT REALLY A COUNT OF HOW MANY OBJECTS ARE LICENSED UNDER CREATIVE COMMONS LICENSES - A SINGLE LICENSE COULD COVER 100,000 SONGS IN A MUSIC DATABASE FOR EXAMPLE, OR A SINGLE BLOG MIGHT HAVE MULTIPLE INSTANCES OF THE

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FEDERAL STATEMENTS

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CREATIVE COMMONS CORPORATION

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STATEMENT 4 (CONTINUED)
FORM 990, PART III, LINE A
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION

GRANTS AND ALLOCATIONS PROGRAM SERVICE EXPENSES

LICENSE, BUT IT DOES INDICATE THAT USAGE OF CC LICENSES IS

EXPANDING RAPIDLY.

LILOCALIONS E

980,816.

\$ 0. \$ 980,816.

STATEMENT 5 FORM 990, PART IV, LINE 57 LAND, BUILDINGS, AND EQUIPMENT

| CATEGORY | | BASIS | | ACCUM. DEPREC. | | BOOK VALUE | | |
|-------------------------|----|---------|---|-------------------|----|---------------|--|--|
| MACHINERY AND EQUIPMENT | \$ | 35,486. | S | 12,066. | \$ | 23,420. | | |
| TOTAL | \$ | 35,486. | S | 12,066. | \$ | 23,420. | | |

STATEMENT 6 FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED | | COMPEN- SATION | CONTRI- BUTION TO EBP & DC | ACCOUNT/ |
|--|--|---|-------------------|----------------------------------|---------------|
| LAWRENCE LESSIG 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | CHAIRMAN 28 | S | 46,057. | \$ 0. | \$ 14,022. |
| JAMES BOYLE 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | | | 0. | 0. | 0. |
| MICHAEL CARROLL 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | | 0. | 0. | 0. |
| ERIC ELDRED 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | | 0. | 0. | 0. |
| ERIC SALTZMAN 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | | 0. | 0. | 0. |
| HAL ABELSON 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | | 0. | 0. | 0. |

FEDERAL STATEMENTS

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STATEMENT 6 (CONTINUED) FORM 990, PART V LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED | COMPEN- SATION | CONTRI- BUTION TO EBP & DC | ACCOUNT/ |
|--|--|-------------------|----------------------------------|------------|
| DIANE CABELL 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | ASST TREA/AUDIT 20+ | \$ 25,994. | \$ 0. | \$ 1,538. |
| MOLLY SHAFFER VAN HOUWELING 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | | 0. | 0. | 0. |
| GLEN OTIS BROWN 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | ED & PRESIDENT 40+ | 97,870. | 0. | 0. |
| NEERU PAHARIA 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | ASST DIR/TREAS 40+ | 89,031. | 0. | 0. |
| JOICHI ITO 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | 0. | 0. | 0. |
| DAVIS GUGGENHEIM 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | DIRECTOR 2.5 | 0. | 0. | 0. |
| MARK RESCH 543 HOWARD STREET, 5TH FLOOR SAN FRANCISCO, CA 94105 | CEO 40+ | 27,260. | 0. | 0. |
| | TOTAL | \$ 286,212. | \$ 0. | \$ 15,560. |

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| OTHER INFORMATION | |
|---------------------------------------|--|
| VALUE OF ABOVE ITEMS (OPTIONAL) (82B) | |

| COOLEY GODWARD (LEGAL SERVICES) | | \$ 79,957. |
|---|------------|----------------|
| WILSON SONSINI GOODRICH & ROSATI (LEGAL SERVICES) | 14.00 | 38,654. |
| HALE & DORR (LEGAL SERVICES) | 1000000000 | 6,156. |
| | TOTAL | \$ 124,767. |