

# 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)

2002

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.

<b>A For the 2002 calendar year, or tax year beginning and ending</b>	
<b>B</b> Check if applicable:	<b>C Name of organization</b>
<input type="checkbox"/> Address change	<b>Creative Commons</b>
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite
<input type="checkbox"/> Initial return	559 Nathan Abbott Way
<input type="checkbox"/> Final return	City or town State or country ZIP + 4
<input type="checkbox"/> Amended return	Stanford CA 94305
<input type="checkbox"/> Application pending	<b>D Employer identification number</b> 04-3585301
	<b>E Telephone number</b> 650-724-3717
	<b>F Accounting method:</b> <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
Please use IRS label or print or type. See Specific Instructions. • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).	
<b>G Web site:</b> ▶ <a href="http://www.creativecommons.org">http://www.creativecommons.org</a>	
<b>J ORGANIZATION TYPE</b> (check only one) ▶ <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) OR <input type="checkbox"/> 527	
<b>K</b> Check here <input type="checkbox"/> if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. SOME STATES REQUIRE A COMPLETE RETURN.	
<b>L Gross receipts:</b> Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 2,017,584	
<b>H and I</b> are not applicable to section 527 organizations. <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> If "Yes," enter number of affiliates ▶ <b>H(c)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list. See instructions.) <b>H(d)</b> Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>I</b> Enter 4-digit GEN ▶ <b>M</b> Check <input type="checkbox"/> if the organization is NOT required to attach Sch. B (Form 990, 990-EZ, or 990-PF).	

Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balances		(See page 17 of the instructions.)
Revenue	<b>1</b> Contributions, gifts, grants, and similar amounts received:		
	<b>a</b> Direct public support	1a	2,015,000
	<b>b</b> Indirect public support	1b	
	<b>c</b> Government contributions (grants)	1c	
	<b>d</b> TOTAL (add lines 1a through 1c) (cash \$ 2,015,000 noncash \$ )	1d	2,015,000
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2	
	<b>3</b> Membership dues and assessments	3	
	<b>4</b> Interest on savings and temporary cash investments	4	2,584
	<b>5</b> Dividends and interest from securities	5	
	<b>6 a</b> Gross rents	6a	
	<b>b</b> Less: rental expenses	6b	
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c	0
<b>7</b> Other investment income (describe ▶ )	7		
Revenue	<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities	(B) Other
	<b>b</b> Less: cost or other basis and sales expenses	8a	
	<b>c</b> Gain or (loss) (attach schedule)	8b	
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8c	0
<b>8d</b>		0	
Revenue	<b>9</b> Special events and activities (attach schedule)		
	<b>a</b> Gross revenue (not including \$ of contributions reported on line 1a)	9a	
	<b>b</b> Less: direct expenses other than fundraising expenses	9b	
<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c	0	
Revenue	<b>10 a</b> Gross sales of inventory, less returns and allowances	10a	
	<b>b</b> Less: cost of goods sold	10b	
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	0
<b>11</b> Other revenue (from Part VII, line 103)	11		
<b>12</b> TOTAL REVENUE (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	2,017,584	
Expenses	<b>13</b> Program services (from line 44, column (B))	13	522,774
	<b>14</b> Management and general (from line 44, column (C))	14	55,461
	<b>15</b> Fundraising (from line 44, column (D))	15	14,654
	<b>16</b> Payments to affiliates (attach schedule)	16	0
	<b>17</b> TOTAL EXPENSES (add lines 16 and 44, column (A))	17	592,889
Net Assets	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18	1,424,695
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19	2,453
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20	0
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	1,427,148

- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II and check this box  **Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.**
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

**Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.**

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <u>Creative Commons Corp.</u>	Employer identification number <u>04-8585301</u>
	Number, street, and room or suite no. If a P.O. box, see instructions. <u>559 Nathan Abbott Way</u>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>Stanford, CA 94305</u>	

Check type of return to be filed (File a separate application for each return):

- Form 990   
  Form 990-EZ   
  Form 990-T (sec. 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
 Form 990-PF   
 Form 990-T (trust other than above)   
 Form 4720   
 Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until November 15, 2003
- 5 For calendar year 2002, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_.
- 6 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 7 State in detail why you need the extension Additional time needed to prepare a complete and accurate return.

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ N/A

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature [Signature] Title President Date 7/16/03

**Notice to Applicant—To Be Completed by the IRS**

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in Item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- Other \_\_\_\_\_

Director \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name	<b>EXTENSION APPROVED</b>  <b>AUG 07 2003</b>
	Number and street (include suite, room, or apt. no.) Or a P.O. box number	
	City or town, province or state, and country (including postal or ZIP code)	

LINDA WEISKOPF, FIELD DIRECTOR, SUBMISSION PROCESSING, OGDEN

Form **8868**  
(December 2000)  
Department of the Treasury  
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

**Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

## Part I Automatic 3-Month Extension of Time — Only submit original (no copies needed)

**Note: Form 990-T corporations requesting an automatic 6-month extension — check this box and complete Part I only . . . .**

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization <u>Creative Commons Corporation</u>	Employer Identification number <u>04-3585301</u>
	Number, street, and room or suite no. If a P.O. box, see instructions. <u>559 Nathan Abbott Way</u>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>Stanford, CA 94305-8610</u>	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole group**, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until 8-15, 2003, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year 2002 or

▶  tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . . \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . . \$ \_\_\_\_\_

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . . \$ \_\_\_\_\_

### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ [Handwritten Signature] Title ▶ President Date ▶ 07/28/03

For Paperwork Reduction Act Notice, see Instruction

Form 8868 (12-2000)

**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. (See page 21 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22	0		
23	Specific assistance to individuals (attach schedule)	23	0		
24	Benefits paid to or for members (attach schedule)	24	0		
25	Compensation of officers, directors, etc.	25	0		
26	Other salaries and wages	26	147,494	117,996	22,123
27	Pension plan contributions	27	0		
28	Other employee benefits	28	1,962	1,570	294
29	Payroll taxes	29	12,202	9,762	1,830
30	Professional fundraising fees	30	0		
31	Accounting fees	31	2,873	2,873	
32	Legal fees	32	2,844	2,844	
33	Supplies	33	8,874	7,099	1,331
34	Telephone	34	7,911	6,328	1,187
35	Postage and shipping	35	0		
36	Occupancy	36	6,000	4,800	900
37	Equipment rental and maintenance	37	0		
38	Printing and publications	38	0		
39	Travel	39	40,572	32,457	6,086
40	Conferences, conventions, and meetings	40	0		
41	Interest	41	0		
42	Depreciation, depletion, etc. (attach schedule)	42	1,808	1,446	271
43	Other expenses not covered above (itemize): a _____	43a	0		
	b Consulting and design	43b	151,688	140,055	11,633
	c Website development and hosting	43c	179,453	179,453	
	d Insurance	43d	27,260	21,808	4,089
	e Other	43e	1,948		
	f _____	43f	0		
44	<b>TOTAL FUNCTIONAL EXPENSES</b> (add lines 22 through 43). ORGANIZATIONS COMPLETING COLUMNS (B)-(D), CARRY THESE TOTALS TO LINES 13-15	44	592,889	522,774	55,461

JOINT COSTS. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_; (ii) the amount allocated to Program services \$ \_\_\_\_\_; (iii) the amount allocated to Management and general \$ \_\_\_\_\_; and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III**

**Statement of Program Service Accomplishments** (See page 24 of the instructions.)

**Program Service Expenses**

What is the organization's primary exempt purpose?  To build a layer of reasonable, flexible copyright.  
 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)

a	SEE STATEMENT 1				
	(Grants and allocations \$ _____)				522,774
b					
	(Grants and allocations \$ _____)				
c					
	(Grants and allocations \$ _____)				
d					
	(Grants and allocations \$ _____)				
e	Other program services (attach schedule)				
	(Grants and allocations \$ _____)				
f	<b>TOTAL OF PROGRAM SERVICE EXPENSES</b> (should equal line 44, column (B), Program services)				522,774

**Part IV** Balance Sheets (See page 24 of the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)
		Beginning of year		End of year
Assets	45 Cash - non-interest-bearing	0	45	0
	46 Savings and temporary cash investments	0	46	525,415
	47 a Accounts receivable			
	b Less: allowance for doubtful accounts	0	47c	0
	48 a Pledges receivable	0		
	b Less: allowance for doubtful accounts	0	48c	0
	49 Grants receivable	0	49	900,000
	50 Receivables from officers, directors, trustees, and key employees (attach schedule) . . . See Statement 4	0	50	20,979
	51 a Other notes and loans receivable (attach schedule)	0		
	b Less: allowance for doubtful accounts	0	51c	0
	52 Inventories for sale or use	0	52	0
	53 Prepaid expenses and deferred charges	0	53	0
	54 Investments - securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV	0	54	0
	55 a Investments - land, buildings, and equipment: basis	0		
	b Less: accumulated depreciation (attach schedule)	0	55c	0
	56 Investments - other (attach schedule)	0	56	0
	57 a Land, buildings, and equipment: basis	8,394		
	b Less: accumulated depreciation (attach schedule) . See Statement 2	1,808	57c	6,586
	58 Other assets (describe _____)	0	58	0
59 TOTAL ASSETS (add lines 45 through 58) (must equal line 74)	2,453	59	1,452,980	
Liabilities	60 Accounts payable and accrued expenses	0	60	25,832
	61 Grants payable	0	61	0
	62 Deferred revenue	0	62	0
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0
	64 a Tax-exempt bond liabilities (attach schedule)	0	64a	0
	b Mortgages and other notes payable (attach schedule)	0	64b	0
	65 Other liabilities (describe _____)	0	65	0
66 TOTAL LIABILITIES (add lines 60 through 65)	0	66	25,832	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	2,453	67	527,148
	68 Temporarily restricted	0	68	900,000
	69 Permanently restricted	0	69	0
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds	0	70	0
	71 Paid-in or capital surplus, or land, building, and equipment fund	0	71	0
	72 Retained earnings, endowment, accumulated income, or other funds	0	72	0
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)	2,453	73	1,427,148	
74 TOTAL LIABILITIES AND NET ASSETS / FUND BALANCES (add lines 66 and 73)	2,453	74	1,452,980	

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.

**Part IV A** Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions.)

**Part IV B** Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total revenue, gains, and other support per audited financial statements . . . . .	a	2,245,488
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . . \$		
(2)	Donated services and use of facilities . . . \$		227,904
(3)	Recoveries of prior year grants . . . . . \$		
(4)	Other (specify):		
	\$		
	Add amounts on lines (1) through (4) . . .	b	227,904
c	Line a minus line b . . . . .	c	2,017,584
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2) . . .	d	0
e	Total revenue per line 12, Form 990 (line c plus line d) . . . . .	e	2,017,584

a	Total expenses and losses per audited financial statements . . . . .	a	820,793
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities . . . \$		227,904
(2)	Prior year adjustments reported on line 20, Form 990 . . . . . \$		
(3)	Losses reported on line 20, Form 990 . . . \$		
(4)	Other (specify):		
	\$		
	Add amounts on lines (1) through (4) . . .	b	227,904
c	Line a minus line b . . . . .	c	592,889
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . . . \$		
(2)	Other (specify):		
	\$		
	Add amounts on lines (1) and (2) . . .	d	0
e	Total expenses per line 17, Form 990 (line c plus line d) . . . . .	e	592,889

**Part V** List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 26 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (IF NOT PAID, ENTER -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Molly Van Houweling 559 Nathan Abbott Way Stanford, CA 94305	Executive director (Jan - Jun) 40 hours per week	27,000	0	0
Glenn Otis Brown 559 Nathan Abbott Way Stanford, CA 94305	Executive director 40 hours per week	77,108	1,123	0
Neeru Paharia 559 Nathan Abbott Way Stanford, CA 94305	Assitant Director 40 hours per week	27,000	839	0
Officers and Directors: see Statement 3				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations?  Yes  No  
If "Yes," attach schedule-see page 26 of the instructions.

Part VI Other Information (See page 27 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77	X
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on FORM 990-T for this year?	78b	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 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?	80a	X
b	If "Yes," enter the name of the organization <b>N/A</b> _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a	0
b	Did the organization file FORM 1120-POL for this year?	81b	X
82 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?	82a	X
b	If "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. See Stmt 5	82b	227,904
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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.	85b	
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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 nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
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	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 <b>0</b> ; section 4912 <b>0</b> ; section 4955 <b>0</b>		
b	501(c)(3) and 501(c)(4) orgs. 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	89b	X
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
90 a	List the states with which a copy of this return is filed <b>California</b>		
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions.)	90b	2
91	The books are in care of <b>The Organization</b> Telephone no. <b>650-724-3717</b> Located at <b>559 Nathan Abbott Way, Standford, CA</b> ZIP + 4 <b>94305</b>		
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of FORM 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.

Table with 5 columns: (A) Business code, (B) Amount, (C) Exclusion code, (D) Amount, (E) Related or exempt function income. Rows include Program service revenue, Medicare/Medicaid payments, Fees and contracts from government agencies, Membership dues and assessments, Interest on savings and temporary cash investments, Dividends and interest from securities, Net rental income or (loss) from real estate, Net rental income or (loss) from personal property, Other investment income, Gain or (loss) from sales of assets other than inventory, Net income or (loss) from special events, Gross profit or (loss) from sales of inventory, Other revenue, Subtotal, and TOTAL.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Table with 2 columns: Line No., Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

Table with 5 columns: (A) Name, address, and EIN of corporation, partnership, or disregarded entity; (B) Percentage of ownership interest; (C) Nature of activities; (D) Total income; (E) End-of-year assets.

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Note: If "Yes" to (b), file Form 8870 AND Form 4720 (see instructions).

Please Sign Here 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. Signature of officer: Neeru Paharia, Treasurer Date: November 14, 2003

Paid Preparer's Use Only Preparer's signature: Crosby & Kaneda Date: 11/4/2003 Check if self-employed: [ ] Preparer's SSN or PTIN (See Gen. Inst. W): Firm's name (or yours if self-employed), address, and ZIP + 4: Crosby and Kaneda, CPAs 1611 Telegraph Ave., Ste 318, Oakland, CA 94612 EIN: 94-3243888 Phone no.: 510-835-2727



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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.)**

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

OMB No. 1545-0047

**2002**

Name of the organization Creative Commons	Employer identification number 04-3585301
--	--

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$50,000				

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the 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
Openforce 580 Broadway New York, NY 10012	Website design & hosting	150,500
Total number of others receiving over \$50,000 for professional services		

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities (\$0); 2. Acts with contributors; 2a-e. Sale, lending, furnishing, compensation, transfer; 3. Grants; 4. Annuity plan.

Part IV Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.) 5. Church; 6. School; 7. Hospital; 8. Government unit; 9. Medical research; 10. College benefit; 11a. Government support (checked); 11b. Community trust; 12. Support from contributions; 13. Not controlled by disqualified persons; 14. Test for public safety.

**Part V-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.

Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,453				2,453
16 Membership fees received					0
17 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					0
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					0
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21 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					0
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23 Total of lines 15 through 22	2,453	0	0	0	2,453
Line 23 minus line 17	2,453	0	0	0	2,453
24 Enter 1% of line 23	25	0	0	0	
26 ORGANIZATIONS DESCRIBED ON LINES 10 OR 11: a Enter 2% of amount in column (e), line 24					26a 49
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 1998 through 2001 exceeded the amount shown in line 26a. DO NOT FILE THIS LIST WITH YOUR RETURN. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 2,453
d Add: Amounts from column (e) for lines: 18 0 19 0					26d 0
22 0 26b N/A					
e Public support (line 26c minus line 26d total)					26e 2,453
f PUBLIC SUPPORT PERCENTAGE (LINE 26E (NUMERATOR) DIVIDED BY LINE 26C (DENOMINATOR))					26f 100.00%
27 ORGANIZATIONS DESCRIBED ON LINE 12: 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:					
(2001) N/A (2000) N/A (1999) N/A (1998) N/A					
b For 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:					
(2001) N/A (2000) N/A (1999) N/A (1998) N/A					
c Add: Amounts from column (e) for lines: 15 0 16 0					27c 0
17 0 20 0 21 0					27d 0
d Add: Line 27a total 0 and line 27b total 0					27e 0
e Public support (line 27c total minus line 27d total)					27f 0
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27g 0.00%
g PUBLIC SUPPORT PERCENTAGE (LINE 27E (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR))					27h 0.00%
h INVESTMENT INCOME PERCENTAGE (LINE 18, COLUMN (E) (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR))					

28 UNUSUAL GRANTS: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, 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.

Part V

Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 29 through 35 regarding racial nondiscrimination policies, record-keeping, and financial aid.

Part VI-A

Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.) (To be completed ONLY by an eligible organization that filed Form 5768)

Check a if the organization belongs to an affiliated group. Check b if you checked "a" and "limited control" provisions apply.

Table with columns: (a) Affiliated group totals, (b) To be completed for ALL electing organizations. Rows include: 36 Total lobbying expenditures to influence public opinion, 37 Total lobbying expenditures to influence a legislative body, 38 Total lobbying expenditures (add lines 36 and 37), 39 Other exempt purpose expenditures, 40 Total exempt purpose expenditures (add lines 38 and 39), 41 Lobbying nontaxable amount, 42 Grassroots nontaxable amount, 43 Subtract line 42 from line 36, 44 Subtract line 41 from line 38.

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 on page 11 of the instructions.)

Table with columns: (a) 2002, (b) 2001, (c) 2000, (d) 1999, (e) Total. Rows include: 45 Lobbying nontaxable amount, 46 Lobbying ceiling amount (150% of line 45(e)), 47 Total lobbying expenditures, 48 Grassroots nontaxable amount, 49 Grassroots ceiling amount (150% of line 48(e)), 50 Grassroots lobbying expenditures.

Part VI-B

Lobbying Activity by Nonelecting Public Charities (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

Table with columns: Yes, No, N/A Amount. Rows include: a Volunteers, b Paid staff or management, 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, i 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 page 12 of the instructions.)

Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

Table with 3 columns: Question, Yes, No. Rows include 51a(i) Cash, a(ii) Other assets, b(i) Sales or exchanges of assets, b(ii) Purchases of assets, b(iii) Rental of facilities, b(iv) Reimbursement arrangements, b(v) Loans or loan guarantees, b(vi) Performance of services, and c Sharing of facilities.

- (i) Cash
(ii) Other assets
b Other transactions:
(i) Sales or exchanges of assets with a noncharitable exempt organization
(ii) Purchases of assets from a noncharitable exempt organization
(iii) Rental of facilities, equipment, or other assets
(iv) Reimbursement arrangements
(v) Loans or loan guarantees
(vi) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

**Schedule B**

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

Department of the Treasury

Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2002**

Name of organization

Creative Commons

Employer identification number

04-3585301

ORGANIZATION TYPE (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private 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 box(es) for both the General rule and a Special rule - see instructions.)

**General Rule -**

For organizations 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 Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they MUST check the box in the heading of their Form 990, Form 990-EZ, or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Creative Commons

Employer identification number

04-3585301

**Contributors** (See Specific Instructions.)

(a) No.	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	The John D. and Catherine T. MacArthur Foundation  140 S. Dearborn Street  Chicago, IL 60603-5285	\$ 1,200,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	Center for the Public Domain  2525 Meridian Parkway, Suite 200  Durham, NC 27713	\$ 815,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
_____	_____  _____  _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



<b>Name of organization</b> Creative Commons	<b>Employer identification number</b> 04-3585301
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**Part II Noncash Property** (See Specific Instructions.)

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

<b>Name of organization</b> Creative Commons	<b>Employer identification number</b> 04-3585301
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**Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** (Complete columns (a) through (e) AND the following line entry.)

For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 OR LESS for the year (Enter this information once-see instructions) . . . \$

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

### STATEMENT 1

#### “SOME RIGHTS RESERVED”: BUILDING A LAYER OF REASONABLE COPYRIGHT

Too often the debate over creative control tends to the extremes. At one pole is a vision of total control – a world in which every last use of a work is regulated and in which “all rights reserved” (and then some) is the norm. At the other end is a vision of anarchy – a world in which creators enjoy a wide range of freedom but are left vulnerable to exploitation. Balance, compromise, and moderation – once the driving forces of a copyright system that valued innovation and protection equally – have become endangered species.

Creative Commons is working to revive them. We use private rights to create public goods: creative works set free for certain uses. Like the free software and open-source movements, our ends are cooperative and community-minded, but our means are voluntary and libertarian. We work to offer creators a best-of-both-worlds way to protect their works while encouraging certain uses of them – to declare “some rights reserved.”

Thus, a single goal unites Creative Commons’ current and future projects: to build a layer of reasonable, flexible copyright in the face of increasingly restrictive default rules.

Creative Commons Licenses: In December 2002, we launched our suite of Creative Commons copyright licenses. Each license allows an author to retain his or her copyright while allowing certain uses of his or her work. And most important, these freedoms associated with a particular work get expressed in machine-readable form. Creators come to our site and, from an intuitive menu, choose the combination of conditions that best reflects their preference. The options include an attribution requirement; a prohibition on commercial use; a restriction on derivative works; and a requirement that licensees “share alike” by releasing derived content under the same license they received.

The International Commons (iCommons): Launched in 2003, iCommons is an extension of our licensing project, dedicated to the drafting and eventual adoption of country-specific licenses. Imagine our licenses as the legal code processed by the respective legal “operating systems” of various countries. The aim of iCommons is to port the licenses for use across those different legal operating systems. This will involve both the literal and legal translation of the licenses by teams of volunteers in various countries around the world. Christiane Asschenfeldt, a German lawyer expert in copyright, has been hired to direct the iCommons project.

## Mission and Current Projects

Founders' Copyright: The Framers of the U.S. Constitution understood that copyright was about balance – a trade-off between public and private gain, society-wide innovation and creative reward. In 1790, the U.S.'s first copyright law granted authors a monopoly right over their creations for 14 years, with the option of renewing that monopoly for another 14 years. The Founders' Copyright is a legal tool that lets copyright holders voluntarily re-create this policy by promising to release their work to the public domain after a 14- or 28-year term. The first adopter of the Founders' Copyright is O'Reilly & Associates, world-renowned publishers of technology handbooks. O'Reilly has released hundreds of titles under the Founders' Copyright.

Several other authors have volunteered to free their content under the FC license, and we have recently launched a web-based process by which more can participate.

Creative Commons

#04-3585301

Year Ended December 31, 2002

Statement 2

Part II, Line 42

Part IV, Line 57b

Fixed Asset Schedule

<u>Date of acquisition</u>	<u>Cost</u>	<u>Description</u>	<u>Life</u>	<u>Depreciation</u>	<u>NBV</u>
12/31/2002	\$ 2,453	Donated computers	3	\$ 818	\$ 1,635
6/30/2002	5,941	Computers	3	990	4,951
Total	<u>\$ 8,394</u>			<u>\$ 1,808</u>	<u>\$ 6,586</u>

**Creative Commons**

**#04-3585301**

**Year Ended December 31, 2002**

**Statement 3**

**Form 990**

**Part V**

**List of Officers, Directors, Trustee, and Key Employees**

<u>Name</u>	<u>Title and average hours</u>
Lawrence Lessig	Chairman/as needed
James Boyle	Director/as needed
Michael Carroll	Director/as needed
Eric Eldred	Director/as needed
Eric Saltzman	Director/as needed
Hal Abelson	Director/as needed
Diane Cabell	Assistant Treasurer and Corporate Clerk as needed
Molly Van Houweling	Director/as needed

Officers and Directors above serve without compensation.

The address for all directors and officers is:

559 Nathan Abbott Way  
Stanford, CA 94305

**Creative Commons**

**#04-3585301**

**Year Ended December 31, 2002**

**Statement 4**

**Form 990**

**Part IV**

**Receivables from officers, directors, trustees, and key employees**

**STATEMENT OF LOAN MADE TO OFFICER**

At the time of hire, Glenn Otis Brown, Executive Director of Creative Commons, was offered a loan for \$20,000 as part of his salary package, to help him cover his initial moving expenses from Austin, Texas to San Francisco, California. Interest began accrual as of April 1<sup>st</sup>, 2002. Loan repayment, commences on March 15<sup>th</sup>, 2003.

-Glenn Otis Brown is the Executive Director of Creative Commons, and the President and Treasurer of Creative Commons

-Loan amount: \$20,000

-Date of Note: April 1, 2002

-Maturity Date: January 2006

-Terms, 5% interest compounded monthly, payments of \$630.1 per month

**Creative Commons**

**#04-3585301**

**Year Ended December 31, 2002**

**Statement 5  
Form 990  
Part VI Line 82b  
Donated Services**

Creative Commons has received generous pro bono legal services from Wilson, Sonsini, Goodrich, & Rosati, Cooley Godward, and Hale & Dorr, which has amounted to the following for 2002:

Cooley Godward:	\$82,550
Wilson, Sonsini, Goodrich, & Rosati:	\$91,712
Hale & Dorr:	\$53,642

Total 2002 Pro-Bono Legal Services:

**\$227,904**



YEAR 2002 **California Exempt Organization**  
**Annual Information Return**

FORM  
**199**

For calendar or fiscal year beginning month \_\_\_\_\_ day \_\_\_\_\_ year 2002, and ending month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_

**IMPORTANT: Your number is required.**

California corporation number	Federal employer identification number
2412448	04-3585301

**Attach Preaddressed Label  
or See Instructions**

Corporation/Organization name  
**Creative Commons**

Address APT no. PMB no.

**559 Nathan Abbott Way** **600**

City State ZIP Code

**Stanford** **CA** **94305**

A Final return?  Yes. Check applicable box.  No

•  Dissolved  Withdrawn  Merged/Reorganized (attach explan.)

If a box is checked, enter date \_\_\_\_\_

B Check forms filed this year: State:  109  100  100S  100W  
 Federal:  990  990EZ  990T  990PF  1041  1120H  1120

C If organization is exempt under R&TC Section 23701d and is a school, public charity, religious organization, or is controlled by a religious operation, check box. See General Instruction F. No filing fee is required. •

D Is this a group filing? See General Instruction M. . . . .  Yes  No

E Accounting method used **Accrual**

F Type of organization  Exempt under Section 23701 d (insert letter)  
 IRC Section 4947(a)(1) trust

**Part I Complete Part I unless not required to file this form. See General Instructions B and C.**

Receipts and Revenues <small>(Attach check or money order here.)</small>	1	Gross sales or receipts from other sources. From Side 2, Part II, line 8 . . . . .	1	
	2	Gross dues and assessments from members and affiliates . . . . .	2	0.
	3	Gross contributions, gifts, grants, and similar amounts received. See instructions . . . . .	3	
	4	Total gross receipts for filing requirement test. Add line 1 through line 3 THIS LINE MUST BE COMPLETED. If the result is less than \$25,000, see General Instruction C . . . . .	4	2,017,584.
	5	Cost of goods sold . . . . .	5	
	6	Cost or other basis, and sales expenses of assets sold . . . . .	6	
	7	Total costs. Add line 5 and line 6 . . . . .	7	0.
	8	Total gross income. Subtract line 7 from line 4 . . . . .	8	2,017,584.
Expenses	9	Total expenses and disbursements. From Side 2, Part II, line 18 . . . . .	9	592,889.
	10	Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 . . . . .	10	1,424,695.
Filing Fee	11	Filing fee \$10 or \$25. See General Instruction F . . . . .	11	10.
	12	Penalty for failure to file on time. See General Instruction L . . . . .	12	
	13	Balance due. Add line 11 and line 12 . . . . .	13	10.

- 14 If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations . . . . .  Yes  No
- 15 Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes," complete an explanation and attach copies of revised documents . . . . .  Yes  No
- 16 Is the organization exempt under R&TC Section 23701g? . . . . .  Yes  No  
 If "Yes," enter amount of gross receipts from nonmember sources \$ \_\_\_\_\_
- 17 Did the organization file Form 100, Form 100S, 100W, or Form 109 to report taxable income? . . . . .  Yes  No  
 If "Yes," enter amount of total income reported \$ \_\_\_\_\_

18 The financial records are in care of The Organization Daytime telephone 650-724-3717

located at 559 Nathan Abbott Way, Standford, CA 94305

**Please Sign Here**

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 taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer [Signature] Date 11/14/03 Title Treasurer Daytime telephone 650-724-3717

**Paid Preparer's Use Only**

Preparer's signature Crosby & Kaneda Date 11/17/2003 Check if self-employed

Firm's name (or yours, if self-employed) and address Crosy and Kaneda, CPAs Preparer's SSN or PTIN \_\_\_\_\_  
1611 Telegraph Ave., Ste 318 FEIN 94-3243888  
Oakland CA 94612 Daytime telephone 510-835-2727

**Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts - complete Part II or furnish substitute information. See Specific Line Instructions.**

Receipts from Other Sources	1	Gross sales or receipts from all business activities. See instructions . . . . .	1	
	2	Interest . . . . .	2	
	3	Dividends . . . . .	3	
	4	Gross rents . . . . .	4	
	5	Gross royalties . . . . .	5	
	6	Gross amount received from sale of assets . . . . .	6	
	7	Other income. Attach schedule . . . . .	7	
	8	TOTAL gross sales or receipts from other sources. Add line 1 through line 7. Enter here and on Side 1, Part I, line 1 . . . . .	8	
Expenses and Disbursements	9	Contributions, gifts, grants, and similar amounts paid. Attach schedule . . . . .	9	
	10	Disbursements to or for members . . . . .	10	
	11	Compensation of officers, directors, and trustees. Attach schedule . . . . .	11	
	12	Other salaries and wages . . . . .	12	
	13	Interest . . . . .	13	
	14	Taxes . . . . .	14	
	15	Rents . . . . .	15	
	16	Depreciation and depletion . . . . .	16	
	17	Other. Attach schedule . . . . .	17	
	18	TOTAL expenses and disbursements. Add line 9 through line 17. Enter here and on Side 1, Part I, line 9 . . . . .	18	0

Schedule L Balance Sheets	Beginning of taxable year		End of taxable year	
	(a)	(b)	(c)	(d)
<b>Assets</b>				
1 Cash . . . . .				
2 Net accounts receivable . . . . .				
3 Net notes receivable. Attach schedule . . . . .				
4 Inventories . . . . .				
5 Federal and state government obligations . . . . .				
6 Investments in other bonds. Attach schedule . . . . .				
7 Investments in stock. Attach schedule . . . . .				
8 Mortgage loans (number of loans _____)				
9 Other investments. Attach schedule . . . . .				
10 a Depreciable assets . . . . .				
b Less accumulated depreciation . . . . .	( )			
11 Land . . . . .				
12 Other assets. Attach schedule . . . . .				
13 Total assets . . . . .				
<b>Liabilities and net worth</b>				
14 Accounts payable . . . . .				
15 Contributions, gifts, or grants payable . . . . .				
16 Bonds and notes payable. Attach schedule . . . . .				
17 Mortgages payable . . . . .				
18 Other liabilities. Attach schedule . . . . .				
19 Capital stock or principle fund . . . . .				
20 Paid-in or capital surplus. Attach reconciliation . . . . .				
21 Retained earnings or income fund . . . . .				
22 Total liabilities and net worth . . . . .				

**Schedule M-1 Reconciliation of income per books with income per return**

Do not complete this schedule if the amount on Schedule L, line 13, column (d), is less than \$25,000

1	Net income per books . . . . .		7	Income recorded on books this year not included in this return. Attach schedule . . . . .	
2	Federal income tax . . . . .		8	Deductions in this return not charged against book income this year. Attach schedule . . . . .	
3	Excess of capital losses over capital gains . . . . .		9	Total. Add line 7 and line 8 . . . . .	
4	Income not recorded on books this year. Attach schedule . . . . .		10	Net income per return. Subtract line 9 from line 6 . . . . .	
5	Expenses recorded on books this year not deducted in this return. Attach schedule . . . . .				
6	Total. Add line 1 through line 5 . . . . .	0.			

**MAIL TO:**  
 Registry of Charitable Trusts  
 P.O. Box 903447  
 Sacramento, CA 94203-4470  
 Telephone: (916) 445-2021

**2002**  
**REGISTRATION/RENEWAL FEE REPORT**  
**TO ATTORNEY GENERAL OF CALIFORNIA**  
 Sections 12586 and 12587, California Government Code  
 11 CCR Sections 311 and 312

**WEBSITE ADDRESS:**  
<http://ag.ca.gov/charities/>

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties as defined in Government Code Section 12586.1.

**RRF-1 EXTENSIONS WILL NOT BE GRANTED**

Enter State Charity Registration Number, Name, and Address of Organization Below:

State Charity Registration Number 117756

Creative Commons

Name of Organization

559 Nathan Abbott Way

Address (Number and Street)

Stanford, CA 94305

City or Town, State and ZIP Code

Check if:  
 Change of address  
 Initial report  
 Amended report  
 Final report

Corporate or Organization No. 2412448

Federal Employer I.D. No. 04-3585301

**PART A - ACTIVITIES**

1. During your MOST RECENT FULL ACCOUNTING PERIOD did your gross receipts or total assets equal \$100,000 or more?	Yes	No
	X	

(a) If the answer is yes, you are required by Title 11 of the California Code of Regulations, sections 311 and 312, to attach a check in the amount of \$25.00 to this report. Make check payable to Department of Justice.

For your MOST RECENT FULL ACCOUNTING PERIOD (beginning 01/01/2002 ending 12/31/2002) list:

Gross receipts \$ 2,017,584 Total assets \$ 1,452,980 Actual X Estimated \_\_\_\_\_

**PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT**

**Note:** If you answer "yes" to any of the questions below, you must attach a separate sheet providing an explanation and details for each "yes" response. Please review RRF-1 Instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest? See attached	X	
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, did nonprogram expenditures exceed at least 50% of gross revenues?		X
4. During this reporting period, were any organization funds used to pay any penalty, fine or judgment? If you filed a Form 4720 with the Internal Revenue Service, attach a copy.		X
5. During this reporting period, were the services of a professional fund-raiser or fund-raising counsel used? If "yes," provide an attachment listing the name, address, and telephone number of the service provider.		X
6. During this reporting period, did the organization receive any governmental funding? If so, provide an attachment listing the name of the agency, mailing address, contact person, and telephone number.		X

Organization's area code and telephone number 650-724-3717

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

*Neeru Paharia*      Neeru Paharia      Treasurer      November 14, 03  
 Signature of authorized officer      Printed Name      Title      Date

**Creative Commons**  
**CT#117756**  
**Year Ended December 31, 2002**

**Form RRF-1**  
**Part B Line 1**  
**Loan to key employee**

STATEMENT OF LOAN MADE TO OFFICER

At the time of hire, Glenn Otis Brown, Executive Director of Creative Commons, was offered a loan for \$20,000 as part of his salary package, to help him cover his initial moving expenses from Austin, Texas to San Francisco, California. Interest began accrual as of April 1<sup>st</sup>, 2002. Loan repayment, commences on March 15<sup>th</sup>, 2003.

- Glenn Otis Brown is the Executive Director of Creative Commons, and the President and Treasurer of Creative Commons
- Loan amount: \$20,000
- Date of Note: April 1, 2002
- Maturity Date: January 2006
- Terms, 5% interest compounded monthly, payments of \$630.1 per month

Form **8868**  
(December 2000)  
Department of the Treasury  
Internal Revenue Service

### Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1708

File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
  - If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
- Note: Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time**—Only submit original (no copies needed)  
 Note: Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only   
 All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization <u>Creative Commons Corporation</u>	Employer identification number <u>04:3585301</u>
	Number, street, and room or suite no. If a P.O. box, see instructions. <u>559 Nathan Abbott Way</u>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>Stanford, CA 94305</u>	

- Check type of return to be filed (file a separate application for each return):
- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for 990-T corporation) extension of time until August 15, 2004 to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year 2003 or  
 ▶  tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ \_\_\_\_\_

c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ \_\_\_\_\_

#### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ [Signature] Title ▶ Treasurer Date ▶ April 8, 2004

Form 8868 (12-2000)

Page 2

- If you are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and check this box  **Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.**
- If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).

**Part II Additional (not automatic) 3-Month Extension of Time—Must File Original and One Copy.**

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <i>Creative Commons Corporation</i>	Employer identification number <i>04:3585301</i>
	Number, street, and room or suite no. If a P.O. box, see instructions. <i>559 Nathan Abbott Way</i>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <i>Stanford, CA 94305</i>	

Check type of return to be filed (File a separate application for each return):

- Form 990
- Form 990-EZ
- Form 990-T (sec. 401(a) or 408(a) trust)
- Form 1041-A
- Form 5227
- Form 8870
- Form 990-BL
- Form 990-PF
- Form 990-T (trust other than above)
- Form 4720
- Form 6069

**STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for **part** of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until *Nov 15*, 20*04*
- 5 For calendar year *03*, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_ and ending \_\_\_\_\_, 20\_\_\_\_
- 6 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period
- 7 State in detail why you need the extension *We are in the process of preparing our returns but need more time to complete an accurate statement.*

- 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions \$ \_\_\_\_\_
- b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 \$ \_\_\_\_\_
- c **Balance Due.** Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions \$ *NA*

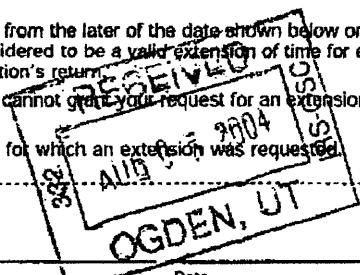
**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *[Signature]* Title *Treasurer* Date *August 2nd, 2004*

**Notice to Applicant—To Be Completed by the IRS**

- We have approved this application. Please attach this form to the organization's return.
- We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.
- We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.
- We cannot consider this application because it was filed after the due date of the return for which an extension was requested.
- Other \_\_\_\_\_



Director \_\_\_\_\_ By: \_\_\_\_\_ Date \_\_\_\_\_

**Alternate Mailing Address** — Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	Name
	Number and street (include suite, room, or apt. no.) Or a P.O. box number
	City or town, province or state, and country (including postal or ZIP code)

