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Short Form  
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form  
► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2009

Open to Public  
Inspection

<b>A For the 2009 calendar year, or tax year beginning</b>		January 1	, 2009, and ending	December 31	, 2009
<b>B Check if applicable</b> <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>C Name of organization</b> <b>Creative Cauldron</b> <b>D Employer identification number</b> <b>31-1816020</b>			
		Number and street (or P O box, if mail is not delivered to street address)	Room/suite	<b>E Telephone number</b> <b>571-239-5288</b>	
		410 S. Maple Avenue	#R1		
		City or town, state or country, and ZIP + 4			<b>F Group Exemption Number</b> ►
		Falls Church, VA 22046			

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G Accounting Method**  Cash  Accrual  
Other (specify) ►

**I Website:** ► [www.creativecauldron.org](http://www.creativecauldron.org)

**J Tax-exempt status** (check only one) —  501(c) ( 3 ) (insert no)  4947(a)(1) or  527

**H Check** ►  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

**K Check** ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return

**L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received . . . . .	1 298,186
	2 Program service revenue including government fees and contracts . . . . .	2 148,724
	3 Membership dues and assessments . . . . .	3 0
	4 Investment income . . . . .	4 0
	5a Gross amount from sale of assets other than inventory . . . . .	5a
	b Less: cost or other basis and sales expenses . . . . .	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	5c
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	6a
<b>Expenses</b>	b Less: direct expenses other than fundraising expenses . . . . .	6b
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	6c
	7a Gross sales of inventory, less returns and allowances . . . . .	7a
	b Less: cost of goods sold . . . . .	7b
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	7c
	8 Other revenue (describe ► <b>RECEIVED MAR 09 2010</b> ) . . . . .	8
	9 <b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	9 446,910
	10 Grants and similar amounts paid (attach schedule) . . . . .	10 0
	11 Benefits paid to or for members . . . . .	11 0
<b>Net Assets</b>	12 Salaries, other compensation, and employee benefits . . . . .	12 108,879
	13 Professional fees and other payments to independent contractors . . . . .	13 23,375
	14 Occupancy, rent, utilities, and maintenance . . . . .	14 32,913
	15 Printing, publications, postage, and shipping . . . . .	15 17,582
	16 Other expenses (describe ► <b>see addendum</b> ) . . . . .	16 13,068
	17 <b>Total expenses.</b> Add lines 10 through 16 . . . . .	17 195,817
	18 Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	18 251,093
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) . . . . .	19 8,705
	20 Other changes in net assets or fund balances (attach explanation) . . . . .	20
<b>Part II Balance Sheets.</b> If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.	21 Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . .	21 259,799

(See the instructions for Part II.)		<b>(A) Beginning of year</b>	<b>(B) End of year</b>
22 Cash, savings, and investments . . . . .		8409 22	24,035
23 Land and buildings . . . . .		23	
24 Other assets (describe ► <b>leaseholder improvements;furn/fixtures;computer</b> ) . . . . .		24	279,511
25 <b>Total assets</b> . . . . .		8409 25	303,546
26 <b>Total liabilities</b> (describe ► <b>loan and payroll taxes payable</b> ) . . . . .		1345 26	43,747
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .		6346 27	259,799

<b>Part III Statement of Program Service Accomplishments</b> (See the instructions for Part III.)					<b>Expenses</b> (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)
What is the organization's primary exempt purpose? <u>see attached addendum</u>					
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.					
<b>28</b>	<b>Arts Adventure Camps (see addendum)</b>				
(Grants \$ <u>500</u> ) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>					<b>28a</b> <b>\$76,083</b>
<b>29</b>	<b>Workshops (see addendum)</b>				
(Grants \$ <u>000</u> ) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>					<b>29a</b> <b>\$26,656</b>
<b>30</b>	<b>Tinner Hill Project</b>				
(Grants \$ <u>7550</u> ) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>					<b>30a</b> <b>\$4,777.40</b>
<b>31</b>	<b>Other program services (attach schedule)</b>				
(Grants \$ <u>0</u> ) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>					<b>31a</b> <b>\$17,133.60</b>
<b>32</b>	<b>Total program service expenses (add lines 28a through 31a)</b>				<b>32</b> <b>\$124,650</b>
<b>Part IV List of Officers, Directors, Trustees, and Key Employees.</b> List each one even if not compensated. (See the instructions for Part IV.)					
	(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
	Laura Hull, 2923 Johnson Rd., Falls Church, VA 22042	Director, Producer 60	\$34,990.90	0	0
	Sheryl Gorsuch, 408A E. Raymond Avenue, Alexandria, VA 22301	Business Manager 10	\$10,400	0	0
	Matthew Conner, 5807 Merton Court #282, Alexandria, VA 22311	Teacher/Artist 2-20	\$11,588	0	0
	Eileen Levy, 2603 Shelby Lane, Falls Church, VA 22043	Teacher/Artist 2-20	\$6,075	0	0
	Oran Sandel, 9903 Lorain Ave., Silver Spring, MD 20901	Teacher/Artist 1-15	\$4,750	0	0
	Stephen Smith, 5816 Merton Court, #282, Alexandria, VA 22311	Teacher/Artist 1-15	\$4,217.50	0	0
	Lauren Williams, 4406 Kennedy Street, Hyattsville, MD 20781	Teacher/Artist 2-20	\$8,625	0	0
	Marty Meserve, 708 Berry St., Falls Church, VA 22042	President	0	0	0
	Jon A. Wiant, 112 West Greenway Blvd. Falls Church, VA 22046	Director	0	0	0
	Gina Caceci, 204 N. Van Buren St., Falls Church VA 22046	Director, Secretary	0	0	0
	Janine Benton, 2603 Shelby Lane, Falls Church, VA 22043	Director	0	0	0
	Nicholas Benton, 400 Janes Court, Falls Church VA 22046	Director	0	0	0
	Debra Jordan, 6455 Woodridge Rd., Alexandria, VA 22312	Director, Vice President	0	0	0
	Andres Jordan, 6455 Woodridge Rd., Alexandria, VA 22312	Director	0	0	0
	Mary Kalbfleisch, 2211 Mohegan Dr., Falls Church, VA 22043	Director	0	0	0
	JoAnn M. Overholt., 4925 Terrace Arbor Circle, Midlothian, VA 22312	Director, Treasurer	0	0	0
	Kathy Potter, 3120 Holmes Run, Falls Church, VA 22042	Director	0	0	0
	Sharon VanDuzend, 600 Langston Lane, Falls Church, VA 22046	Director	0	0	0

## Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a -\$0-	37a	-\$0-
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:	39a	
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ , section 4955 ► _____		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		\$0
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ► Virginia		
42a The organization's books are in care of ► The Organization Located at ► 2923 Johnson Road, Falls Church, VA	Telephone no. ► 571-239-5228 ZIP + 4 ► 22042	
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ►	42c	✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

**Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

<b>46</b>	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>Yes</b>	<b>No</b>
<b>47</b>	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<b>✓</b>
<b>48</b>	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<b>✓</b>
<b>49a</b>	Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<b>✓</b>
<b>b</b>	If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<b>✓</b>
<b>50</b>	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(a) Name and address of each employee paid more than \$100,000	(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
<b>NONE</b>				

**f** Total number of other employees paid over \$100,000 . . . . ► **NONE**

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
<b>NONE</b>		

**d** Total number of other independent contractors each receiving over \$100,000 . . . ►

<b>Sign Here</b>	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		
	► <i>JoAnn M. Overholt</i>	Date	2/23/2010
► Signature of officer			
► <b>JoAnn M. Overholt, Treasurer</b>			
► Type or print name and title			
<b>Paid Preparer's Use Only</b>	Preparer's signature ►	Date	Check if self-employed ► <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 ►		EIN ►
			Phone no ►

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ►  Yes  No

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

## Public Charity Status and Public Support

OMB No 1545-0047

2009

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

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

**Name of the organization**

**Employer identification number**

## Creative Cauldron

1 1816020

**Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.**

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

1	<input type="checkbox"/> A church, convention of churches, or association of churches described in <b>section 170(b)(1)(A)(i)</b> .									
2	<input type="checkbox"/> A school described in <b>section 170(b)(1)(A)(ii)</b> . (Attach Schedule E.)									
3	<input type="checkbox"/> A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii)</b> .									
4	<input type="checkbox"/> A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii)</b> . Enter the hospital's name, city, and state.									
5	<input type="checkbox"/> An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170(b)(1)(A)(iv)</b> . (Complete Part II.)									
6	<input type="checkbox"/> A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v)</b> .									
7	<input type="checkbox"/> An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)									
8	<input type="checkbox"/> A community trust described in <b>section 170(b)(1)(A)(vi)</b> . (Complete Part II.)									
9	<input checked="" type="checkbox"/> An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See <b>section 509(a)(2)</b> . (Complete Part III.)									
10	<input type="checkbox"/> An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4)</b> .									
11	<input type="checkbox"/> An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box that describes the type of supporting organization and complete lines 11e through 11h. <table border="0" style="margin-left: 20px;"> <tr> <td><b>a</b> <input type="checkbox"/> Type I</td> <td><b>b</b> <input type="checkbox"/> Type II</td> <td><b>c</b> <input type="checkbox"/> Type III—Functionally integrated</td> <td><b>d</b> <input type="checkbox"/> Type III—Other</td> </tr> </table>	<b>a</b> <input type="checkbox"/> Type I	<b>b</b> <input type="checkbox"/> Type II	<b>c</b> <input type="checkbox"/> Type III—Functionally integrated	<b>d</b> <input type="checkbox"/> Type III—Other					
<b>a</b> <input type="checkbox"/> Type I	<b>b</b> <input type="checkbox"/> Type II	<b>c</b> <input type="checkbox"/> Type III—Functionally integrated	<b>d</b> <input type="checkbox"/> Type III—Other							
e	<input type="checkbox"/> By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b>									
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box <input type="checkbox"/>									
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? <table border="0" style="margin-left: 20px;"> <tr> <td><b>(i)</b> A person who directly or indirectly controls, either alone or together with persons described in <b>(ii)</b> and <b>(iii)</b> below, the governing body of the supported organization?</td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>(ii)</b> A family member of a person described in <b>(i)</b> above?</td> <td><input type="checkbox"/></td> </tr> <tr> <td><b>(iii)</b> A 35% controlled entity of a person described in <b>(i)</b> or <b>(ii)</b> above?</td> <td><input type="checkbox"/></td> </tr> </table>	<b>(i)</b> A person who directly or indirectly controls, either alone or together with persons described in <b>(ii)</b> and <b>(iii)</b> below, the governing body of the supported organization?	<input type="checkbox"/>	<b>(ii)</b> A family member of a person described in <b>(i)</b> above?	<input type="checkbox"/>	<b>(iii)</b> A 35% controlled entity of a person described in <b>(i)</b> or <b>(ii)</b> above?	<input type="checkbox"/>			
<b>(i)</b> A person who directly or indirectly controls, either alone or together with persons described in <b>(ii)</b> and <b>(iii)</b> below, the governing body of the supported organization?	<input type="checkbox"/>									
<b>(ii)</b> A family member of a person described in <b>(i)</b> above?	<input type="checkbox"/>									
<b>(iii)</b> A 35% controlled entity of a person described in <b>(i)</b> or <b>(ii)</b> above?	<input type="checkbox"/>									
h	Provide the following information about the supported organization(s). <table border="0" style="margin-left: 20px;"> <tr> <td><b>11g(i)</b></td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><b>11g(ii)</b></td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><b>11g(iii)</b></td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>	<b>11g(i)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<b>11g(ii)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<b>11g(iii)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>11g(i)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No								
<b>11g(ii)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No								
<b>11g(iii)</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No								

	Yes	No
11g(i)		✓
11g(ii)		✓
11g(iii)		✓

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**  
 (Complete only if you checked the box on line 9 of Part I.)
**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	6145	13267	22756	70708	298186	411062
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	85699	95097	126923	122555	148724	578998
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	
6 <b>Total.</b> Add lines 1 through 5	91844	108364	149679	193263	446910	990060
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	
c Add lines 7a and 7b	0	0	0	0	0	0
8 <b>Public support.</b> (Subtract line 7c from line 6)						990060

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	91844	108364	149679	193263	446910	990060
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0	0	0	
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	
c Add lines 10a and 10b	0	0	0	0	0	
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0	0	0	
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12)	91844	108364	149679	193263	446910	990060
14 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	100	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	100	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	0	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	0	%
19a <b>33 1/3 % support tests—2009.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>			
b <b>33 1/3 % support tests—2008.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization ► <input type="checkbox"/>			
20 <b>Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>			

**ADDENDUM**  
2009 990EZ for CREATIVE CAULDRON  
EIN # 31-1816020

**Part I: Revenue, Expenses and Changes in Net Assets or Fund Balances:**

Line 16: Other Expenses: Transportation for Camp Participants: \$7,161

Depreciation Expense: \$4,772; Loan Interest: \$1,134

**Part III: Organization's primary exempt purpose:**

The purpose of Creative Cauldron is to provide educational arts workshops for children, teens and adults and to produce theatrical works that have broad appeal across the spectrum of age, in order to foster intergenerational understanding and communication.

**Part III: Creative Cauldron Programs:**

**28. Arts Adventure Camps:**

Creative Cauldron celebrated its eighth and most successful year of Arts Adventure Camp, a unique summer day camp, that combines the performing and visual arts with an exploration of nature. Professional teaching artists use designated themes as a springboard for their creative work and guide campers in the development of original works of theater and visual art. In 2009, 4 camp sessions, varying in length from 1 week to 3 weeks were offered. More than 250 children, ages 4-14 participated in these sold out camp sessions and 400 attended the final camp performances. Camps were held at ArtSpace Falls Church, Creative Cauldron's new home at 410 S. Maple Avenue.

**29. Workshops:**

Creative Cauldron offered arts enrichment workshops and residencies at five area elementary schools, and on-site at ArtSpace Falls Church. These included Kidsplay, an innovative creative arts workshop that includes drama, dance, music and visual art under one thematic umbrella. 50 students at two Title One schools received scholarships to participate in a 20-hour workshop session. Additional workshops offered for young people included: Drawing, The Art of the Storybook, Dance Theater, Musical Theater and Piano. A "DaVinci Passport" Workshop was offered over fall student holiday breaks. Participants explored DaVinci's insights and observation techniques and worked on creating inventions and works of art inspired by imagination. For adult students, small studio classes in Watercolor and Mixed media were offered on-site at ArtSpace. 618 children, teens and adults participated in these programs during the 2009 calendar year.

**30. Tinner Hill Project:**

With funding from the Virginia Commission for the Arts, the National Endowment for the Arts and the Arts Council of Fairfax County, Creative Cauldron began work on "Tinner Hill: Portraits in Black and White". This project will mine the oral histories and documents collected from residents of Tinner Hill, an historically African American community that played a pivotal role in Virginia civil rights history. This original work for the stage will premiere at ArtSpace Falls Church in June 2010.

### **31. Performances and Guest Artists:**

**A. Performances:** With the opening of ArtSpace Falls Church in the fall, Creative Cauldron began producing and presenting theatrical performances with appeal for intergenerational audiences. “Martin: The King of Pizza” an original musical commissioned by the Arts Council of Fairfax County and the Virginia Commission for the Arts during the 2008 fiscal year was presented for 8 performances in September with 300 in attendance. In December, this musical, which celebrates diversity and the positive role it plays in our lives, toured to a local Title One school (Pine Spring Elementary) for a school assembly with more than 700 in attendance.

“The Christmas Cabin of Carnaween” was presented by our Learning Theater for 10 performances in December. Professional actors performed side by side with community performers and children in this adaptation of an Irish folktale that featured live Irish music. The production received critical acclaim and was attended by 410 patrons.

**B. Guest Artists:** Creative Cauldron launched a guest artist series and hosted The Hub Theater, for a professional production of “We Won’t Pay! We Won’t Pay!” by Dario Fo that was attended by 329 patrons. Creative Cauldron also entered into a cooperative agreement with Falls Church Arts, another local non-profit dedicated to supporting the arts in the community. Falls Church Arts manages and curates arts exhibits on-site at ArtSpace.

### **Part V: Other Information:**

#### **33. Lease and Build-out of ArtSpace:**

Working in cooperation with the City of Falls Church and Falls Church Arts, another non-profit dedicated to promotion of the arts, Creative Cauldron took the lead on the renovation and build-out of ArtSpace Falls Church, a 3,000 square foot flexible arts space located at 410 S. Maple Avenue in the Pearson Square Building. ArtSpace was negotiated in a voluntary concessions agreement with the City of Falls Church and the developer Atlantic Realty. The City dedicated \$100,000 in funds for the renovation and Transwestern, Inc., the subsequent owner, proffered another \$100,000. Creative Cauldron was designated as the leaseholder for 10 years and was charged to manage and operate the space during this period. Creative Cauldron launched a capital campaign to raise the additional funds needed, and supervised the design and build out for the space which opened in June of 2009.

Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment  
Sequence No 67

Name(s) shown on return Creative Cauldron	Business or activity to which this form relates performing and teaching arts organization	Identifying number 31-1816020
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## Part I Election To Expense Certain Property Under Section 179

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

1 Maximum amount See the instructions for a higher limit for certain businesses . . . . .	1 \$250,000
2 Total cost of section 179 property placed in service (see instructions) . . . . .	2
3 Threshold cost of section 179 property before reduction in limitation (see instructions) . . . . .	3 \$800,000
4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0- . . . . .	4
5 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions . . . . .	5
6 (a) Description of property	(b) Cost (business use only)
7 Listed property. Enter the amount from line 29 . . . . .	7
8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 . . . . .	8
9 Tentative deduction. Enter the smaller of line 5 or line 8 . . . . .	9
10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 . . . . .	10
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) . . . . .	11
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 . . . . .	12
13 Carryover of disallowed deduction to 2010. Add lines 9 and 10, less line 12 ► 13	

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

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

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

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

## Section A

17 MACRS deductions for assets placed in service in tax years beginning before 2009 . . . . .	17
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ► <input type="checkbox"/>	

## Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		computer	5 yrs	9 months	straight line	\$150.03
c 7-year property		furniture & fixtures	7 yrs.	6 months	straight line	\$1,206.66
d 10-year property						
e 15-year property						PLEASE SEE ADDENDUM
f 20-year property						ATTACHED
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property		leasehold	27.5 yrs	MM	S/L	\$3,415.26
		improvements		MM	S/L	

## Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

## Part IV Summary (See instructions.)

21 Listed property. Enter amount from line 28 . . . . .	21
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions . . . . .	22 \$4,771.95
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs . . . . .	23

ADDENDUM to 4562  
Attached to 990 for 2009  
CREATIVE CAULDRON  
Emp ID 31-1816020

Calculation of Depreciation expenses during 2009 - Straight Line Depreciation

		Asset Total	Date Booked	Monthly Depre	Depre Total
Leasehold Improvements	39 years	266,391.16	7/1/2009	569.21	3,415.26
Furniture and Equipment	7 years	16,893.07	7/1/2009	201.11	1,206.66
Computer	5 years	999.00	4/1/2009	16.67	150.03
Total Depreciation Expense for 2009				4771.95	