See a Social Security Number? Say Something!
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Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form 990-EZ

Short Form
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)

▶ 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*

Department of the Treasury
Internal Revenue Service

OMB No 1545-1150

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning January 1 , 2009, and ending December, 31 , 20 09

B Check if applicable.
- ☐ Address change
- ☐ Name change
- ☑ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
West Virginia Black Heritage Festival, Inc

Number and street (or P.O box, if mail is not delivered to street address) Room/suite
PO Box 1614

City or town, state or country, and ZIP + 4
Clarksburg, WV 26302-1614

D Employer identification number
55-0741069

E Telephone number
304-624-0415

F Group Exemption Number ▶

⊙ *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.wvblackheritagefestival.com

J **Tax-exempt status** (check only one) — ☑ 501(c) ( ) ◀ (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.)

Revenue	1	Contributions, gifts, grants, and similar amounts received		1	37757 15
	2	Program service revenue including government fees and contracts		2	4249.00
	3	Membership dues and assessments		3	
	4	Investment income		4	
	5a	Gross amount from sale of assets other than inventory	5a 1162.00		
	b	Less: cost or other basis and sales expenses	5b 933 25		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	228 75
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ▶ ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a		
	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 ▶ _____)		8	
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		9	42234 90
Expenses	10	Grants and similar amounts paid (attach schedule)		10	1600.00
	11	Benefits paid to or for members		11	
	12	Salaries, other compensation, and employee benefits		12	
	13	Professional fees and other payments to independent contractors		13	19144.40
	14	Occupancy, rent, utilities, and maintenance		14	11012.68
	15	Printing, publications, postage, and shipping		15	1558 33
	16	Other expenses (describe ▶ Food, lodging, permits, dues, supplies, Ins prem., travel exp.)		16	3395 59
	17	**Total expenses.** Add lines 10 through 16 ▶		17	36711.00
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	5523 90
	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	4316.82
	20	Other changes in net assets or fund balances (attach explanation)		20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶		21	9840.72

Part II Balance Sheets. If Total assets on line 25, column (B) are $1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

		(A) Beginning of year		(B) End of year
22	Cash, savings, and investments	4316 82	22	9840.72
23	Land and buildings		23	
24	Other assets (describe ▶ _____)		24	
25	**Total assets**	4316.82	25	9840.72
26	**Total liabilities** (describe ▶ _____)		26	
27	**Net assets or fund balances** (line 27 of column (B) **must** agree with line 21)	4316.82	27	9840.72

25

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **Cultural Festival**

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.

Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	See attached narrative (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	
29	(Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	
30	(Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	

Part IV List of Officers, Directors, Trustees, and Key Employees. 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
Allen E Lee 916 W. Pike Street, Clarksburg, WV 26301	President	0	0	0
James E. Griffin 212 Johnson Ave., Bridgeport, WV 26330	Asst. Treasurer	0	0	0
Linda Holyfield 107 Harper St., Clarksburg, WV 26301	Secretary	0	0	0
Joy C. Singlton 516 E. B Saunders Way, Clarksburg, WV 26301	Treasurer	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			
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:			
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 ▶ _____			
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. ▶ WV

42a The organization's books are in care of ▶ Joy C. Singleton Telephone no. ▶ 304-624-0415

Located at ▶ 516 E. B. Saunders Way, Clarksburg, WV ZIP + 4 ▶ 26301-3714

			Yes	No
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

			Yes	No
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.

			Yes	No
46	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	46		✓
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		✓
b	If "Yes," was the related organization a section 527 organization?	49b		

50 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
None				

f Total number of other employees paid over $100,000 . . . . ▶

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
None		

d Total number of other independent contractors each receiving over $100,000 . . ▶

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

Joy C. Singleton 5/4/10

▶ Signature of officer — Date

▶ Joy C. Singleton, Treasurer

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (See instructions)
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)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
West Virginia Black Heritage Festival, Inc	55 : 0741069

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

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

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

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

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

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

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

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

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

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

9 ☐ An organization that normally receives (1) more than 33⅓ % 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 33⅓ % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

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

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

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

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

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

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

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

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

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.")	n/a	25375.00	40975.00	37625.00	37757.15	141732.15
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	n/a	25375.00	40975.00	37625.00	37757.15	141732.15
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						141732.15

Section B. Total Support

Calendar year (or fiscal year beginning in) ▷	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	n/a	25375.00	40975.00	37625.00	37757.15	141732.15
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	n/a	6869.10	4447.84	3626.13	4477.75	19420.82
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	n/a	800.00	0	0	0	800.00
11 **Total support.** Add lines 7 through 10						161952.97

12 Gross receipts from related activities, etc (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▷ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	88 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	87 %

16a **33⅓% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▷ ☑

b **33⅓% support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▷ ☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . ▷ ☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . ▷ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▷ ☐

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

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.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▷	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▷ ☐

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2008** Schedule A, Part III, line 17	18	%

19a **33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▷ ☐

b **33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▷ ☐

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

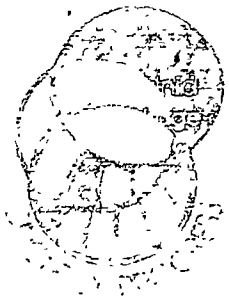
Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Provide any other additional information. See instructions.

990 EZ Part I, Line 10

3:41 PM
05/04/10
Accrual Basis

West Virginia Black Heritage Festival, Inc.
Account QuickReport
January through December 2009

Type	Date	Num	Name	Memo	Amount
Scholarship Fund/Donations					
Check	4/14/2009	989	Myeshia Cooper	Scholarship	250 00
Check	4/14/2009	990	Matthew Griffin	Scholarship	250 00
Check	4/14/2009	991	Holyfield, Frankie	Scholarship	250 00
Check	9/16/2009	1017	Hairston, Donnie	Scholarship	250 00
Check	9/16/2009	1018	Bland, Tansha	Scholarship	250 00
Check	9/16/2009	1019	Mt. Zion Missionary Bapist Church	VOID	0 00
Check	9/16/2009	1020	Mt Zion Missionary Bapist Church	Donation	200 00
Check	11/10/2009	1026	Martin Luther King Men's Choir	Donation	150 00
Total Scholarship Fund/Donations					1,600 00
TOTAL					**1,600.00**



West Virginia Black Heritage Festival, Inc

P.O. Box 1614 Clarksburg, WV 26302-1614

www.wvblackheritagefestival.com

990EZ, Part III

Project Summary

The West Virginia Black Heritage Festival will be held on September 10th, 11th and 12th of 2010. The event will be held on E B. Saunders Way, in Clarksburg, WV. This festival was established in 1990, in order to celebrate the rich ethnic diversity within our community The festival is designed to provide the community with the opportunity to present its heritage through live entertainment, educational materials, arts & crafts, children's activities and an exquisite selection of cultural foods.

The West Virginia Black Heritage Festival, Inc. is a community based 501 (c) (3) not-for-profit organization whose mission is, "*to promote the African American experience by embracing the many milestones that our forefathers have made since the Emancipation Proclamation*"

Clarksburg hosts the largest festival of this type in the state of West Virginia. Attendance over this three-day event consists of approximately 10,000 guests, numerous vendors and several entertainers. Each year we bring quality entertainment into the city of Clarksburg Local hotels and retail shops benefit from this weekend of activity. Vendor spaces are open to quality hand-crafted items, fine arts, fine imported goods, and unique gift items. We are seeking exhibitors particularly having display items, which are unique and/or culturally oriented. The vendors and entertainment selection is made based on the cultural benefit they provide. They must not only entertain, but must also educate the public as to the rich culture and many accomplishments of African Americans.

West Virginia Black Heritage Festival, Inc. values the youth in our community. We contribute to the Kelly Miller Foundation scholarship program each year. Outstanding youths are recognized and honored through scholarships as our young king and queen for their educational accomplishments and community involvement. Recognizing the contributions of those who have brought us thus far, a senior king and queen are also chosen.

Our primary goals are to promote and preserve the best in West Virginia black art and music, as well as exposing all to the positive contributions made by African Americans.

West Virginia Black Heritage Festival, Inc.
Profit & Loss Detail
January through December 2009

Date	Num	Name	Memo	Amount	Balance
Income					
Contributions Income- Festival					
1/9/2009		Dominion Foundation	057018	3,000 00	3,000 00
2/2/2009		Berry Energy, Inc		500 00	3,500 00
2/2/2009		State of West Virginia - Vist		1,194.95	4,694 95
2/20/2009		Clarksburg Harrison Cultura	1207	1,000 00	5,694 95
4/28/2009		Sam's Club #8189		1,000 00	6,694 95
4/30/2009		Harrison County Commission		2,000 00	8,694 95
5/19/2009		Greater Bridgeport Confere		1,000 00	9,694 95
6/9/2009		Manno Brothers		100 00	9,794 95
6/17/2009		Huntington National Bank		1,000 00	10,794 95
6/26/2009		Harrison County Board of E		2,000 00	12,794 95
7/27/2009		BB&T		500.00	13,294.95
7/29/2009		City of Clarksburg		4,000 00	17,294.95
7/29/2009		Davis Funeral Home		1,500 00	18,794 95
8/11/2009		Harrison County Bank		250 00	19,044 95
8/11/2009		Freedom Bank		250 00	19,294 95
8/26/2009		Auto Dealership		50 00	19,344 95
8/26/2009		Gateway Motors		100 00	19,444 95
8/28/2009		Auto Trim Design		50 00	19,494 95
8/28/2009		Wreck-A-Mend Collision Re..		100 00	19,594 95
8/28/2009		State of West Virginia Cultu.		6,000 00	25,594 95
8/28/2009		Larry Myers Subaru-Hyundai		500 00	26,094 95
8/28/2009		The Miley Legal Group		1,000 00	27,094 95
9/11/2009		CWV TEL Federal Credit U		500 00	27,594 95
9/11/2009		Fairmont State		1,500.00	29,094 95
9/11/2009		Waste Management		500 00	29,594 95
9/11/2009		Wesbanco		200.00	29,794 95
9/14/2009		Episcopal Church		1,000 00	30,794 95
9/16/2009		Greater Clarksburg Convent		1,000.00	31,794.95
9/17/2009		Sacred Heart Children's Ce...		1,000 00	32,794 95
9/17/2009		WalMart		1,000 00	33,794 95
9/21/2009		Clarksburg Harrison Cultura .		1,000 00	34,794 95
11/20/2009		State of West Virginia - Vist ..	Advertising rei.	962 20	35,757 15
12/17/2009		Huntington National Bank		1,000 00	36,757 15
12/31/2009		Verizon		1,000.00	37,757.15
Total Contributions Income- Festival				37,757.15	37,757 15
T-Shirt Sales					
8/26/2009				36 00	36 00
9/1/2009				288 00	324 00
9/11/2009				200 00	524 00
9/16/2009				638 00	1,162 00
Total T-Shirt Sales				1,162.00	1,162 00
Ticket Sales - Luncheon					
7/27/2009				360 00	360 00
7/29/2009				60 00	420 00
8/11/2009				80 00	500 00
8/18/2009		Star Motors		100 00	600 00
8/26/2009		Pride, Carolyn		200.00	800 00
8/26/2009		Tickets Cad.		100 00	900 00
8/26/2009		RexRoads Motors		60 00	960.00
8/28/2009			Jim	260 00	1,220 00
8/28/2009		Gateway Motors		100 00	1,320 00
8/28/2009		Harry Green Chevrolet, Inc		100 00	1,420 00
9/1/2009				240 00	1,660 00
12/31/2009		Childers, Bill		20.00	1,680 00
Total Ticket Sales - Luncheon				1,680 00	1,680.00

West Virginia Black Heritage Festival, Inc.
Profit & Loss Detail
January through December 2009

Date	Num	Name	Memo	Amount	Balance
Vendors					
6/9/2009		Marino Brothers		90 00	90 00
6/10/2009		Norman		90 00	180 00
6/17/2009		Mosbly		100 00	280 00
6/26/2009		Ida Freeman		60 00	340 00
6/26/2009		Pam Raad		100 00	440 00
7/27/2009		Mt Jacks Grill		40.00	480 00
7/27/2009		Hot Dogs and More		90 00	570 00
7/27/2009		Phillips, Freda		80 00	650 00
7/27/2009		Doris E Blue		60 00	710 00
8/11/2009		Law, Cynthia		60 00	770 00
8/11/2009		Terry, Leronnie		60.00	830 00
8/11/2009		Mt Jacks Grill		150 00	980 00
8/18/2009		Holyfield, Andie		40 00	1,020 00
8/28/2009		Starks, Frank		90 00	1,110 00
8/28/2009				50 00	1,160 00
9/1/2009				390 00	1,550 00
9/11/2009				360 00	1,910 00
9/14/2009				79 00	1,989 00
9/16/2009	1013	Loretta, Sam	Refund	-70 00	1,919 00
9/16/2009	1016	Mt Jacks Grill	Refund	-150 00	1,769 00
9/17/2009			Lemonade	740 00	2,509 00
9/24/2009				60 00	2,569 00
Total Vendors				2,569 00	2,569 00
Total Income				43,168 15	43,168 15
Cost of Goods Sold					
Cost of Goods Sold					
T-Shirts					
8/14/2009	1002	Reep Graphics		933 25	933 25
Total T-Shirts				933 25	933 25
Total Cost of Goods Sold				933.25	933 25
Total COGS				933 25	933 25
Gross Profit				42,234 90	42,234 90
Expense					
Scholarship Fund/Donations					
4/14/2009	989	Myeshia Cooper	Scholarship	250 00	250 00
4/14/2009	990	Matthew Griffin	Scholarship	250 00	500 00
4/14/2009	991	Holyfield, Frankie	Scholarship	250.00	750.00
9/16/2009	1017	Hairston, Donnie	Scholarship	250 00	1,000 00
9/16/2009	1018	Bland, Tarisha	Scholarship	250.00	1,250 00
9/16/2009	1019	Mt Zion Missionary Bapist ..	VOID	0 00	1,250 00
9/16/2009	1020	Mt. Zion Missionary Bapist ..	Donation	200.00	1,450 00
11/10/2009	1026	Martin Luther King Men's C	Donation	150 00	1,600 00
Total Scholarship Fund/Donations				1,600 00	1,600.00
Advertising					
Newspaper/Magazine					
Festival					
8/11/2009	1001	Three Cities		140 00	140 00
Total Festival				140.00	140 00
Total Newspaper/Magazine				140 00	140 00

West Virginia Black Heritage Festival, Inc.
Profit & Loss Detail
January through December 2009

Date	Num	Name	Memo	Amount	Balance
Printing					
Festival					
8/3/2009	999	Sprint Prints	Posters	239 43	239 43
8/11/2009		State of West Virginia - Vist	Reimburseme .	-59 40	180 03
9/24/2009	1024	PDQ		784.40	964 43
9/30/2009				-784 40	180 03
Total Festival				180 03	180 03
Fundraisers					
8/11/2009	1000	PDQ	Luncheon tick	68 95	68 95
Total Fundraisers				68 95	68 95
Total Printing				248.98	248 98
Television/Radio					
Festival					
9/24/2009	1022	WBOY		1,000 00	1,000 00
Total Festival				1,000 00	1,000 00
Total Television/Radio				1,000 00	1,000 00
Total Advertising				1,388 98	1,388 98
Bank Service Charges					
9/15/2009				15 00	15 00
Total Bank Service Charges				15 00	15 00
Benevolence					
6/26/2009	998	Donaldson, Sheddrick	Funeral	65 00	65.00
Total Benevolence				65 00	65 00
Contract Labor					
11/12/2009	1027	Grupe, Robert (Denise)		344 40	344 40
Total Contract Labor				344 40	344 40
Entertainment					
Festival					
6/9/2009	996	Trifon Organization	Down pmt.	7,300.00	7,300.00
9/9/2009		Elbert Ferguson		600 00	7,900 00
9/11/2009		Cash		8,000 00	15,900 00
9/16/2009	1011	Cartoon Headquarters		1,800 00	17,700 00
Total Festival				17,700 00	17,700 00
Total Entertainment				17,700 00	17,700 00
Food Expense					
Festival					
9/11/2009		WalMart		226 25	226 25
Total Festival				226 25	226 25
Luncheon					
8/28/2009		WalMart	Soda	33.22	33 22
Total Luncheon				33 22	33 22
Total Food Expense				259 47	259 47
Gift					
12/4/2009		Outback Steakhouse	Gift card	25 00	25 00
Total Gift				25.00	25.00

West Virginia Black Heritage Festival, Inc.
Profit & Loss Detail
January through December 2009

Date	Num	Name	Memo	Amount	Balance
Insurance					
Liability Insurance					
8/24/2009	1003	State Auto Insurance Co		259 42	259 42
Total Liability Insurance				259 42	259 42
Total Insurance				259 42	259 42
Labor					
9/13/2009	1006	Holyfield, Wade		200 00	200 00
9/13/2009	1007	Hill, Dickie		200.00	400 00
9/13/2009	1008	Harris, Johnny		200 00	600 00
9/13/2009	1009	Jackson, Mark		200 00	800.00
9/13/2009	1010	Singleton, Stevie		200.00	1,000 00
9/16/2009	1014	Jackson, Cardell		100 00	1,100 00
Total Labor				1,100 00	1,100 00
Licenses and Permits					
5/29/2009	994	Secretary of State	Corp tax	25 00	25 00
5/29/2009	995	Secretary of State	Registration C .	15 00	40 00
6/9/2009	997	WV State Tax Department	Bus registrati	30 00	70 00
9/8/2009	1004	Harrison-Clarksburg Health ..		50 00	120.00
Total Licenses and Permits				120 00	120 00
Lodging					
9/14/2009		Sleep Inn		985 60	985 60
9/15/2009		Sleep Inn		61 60	1,047 20
9/15/2009		Sleep Inn		61 60	1,108 80
9/24/2009			Refund	-123.20	985 60
Total Lodging				985 60	985 60
Miscellaneous Expense					
8/28/2009		Sam's Club #8189	Luncheon	9 07	9 07
Total Miscellaneous Expense				9 07	9 07
Postage and Delivery					
5/22/2009	992	Postmaster	Stamps	132.00	132 00
8/31/2009		Postmaster		4 95	136 95
11/20/2009		Postmaster		32 40	169 35
Total Postage and Delivery				169 35	169 35
Rentals					
Sound Equipment/Stage					
Festival					
9/16/2009	1012	United Sound		10,534 00	10,534 00
Total Festival				10,534 00	10,534 00
Total Sound Equipment/Stage				10,534.00	10,534 00
Rentals - Other					
2/2/2009	988	Clarksburg Parks		90 00	90 00
9/24/2009	1021	McCarty's Portable Toilets		381 60	471 60
Total Rentals - Other				471 60	471 60
Total Rentals				11,005.60	11,005 60
Supplies					
Office					
5/22/2009	993	WalMart	Ink cartridge	49 76	49 76
11/19/2009		Staples		22.77	72 53
11/20/2009		WalMart		67 78	140 31
Total Office				140 31	140 31

West Virginia Black Heritage Festival, Inc.
Profit & Loss Detail
January through December 2009

Date	Num	Name	Memo	Amount	Balance
Supplies - Other					
8/29/2009		Dollar General Store	Luncheon	25 44	25 44
8/31/2009		Batman's Trophies & Awards		267 80	293 24
9/2/2009		WalMart		29 94	323 18
9/10/2009		WalMart		42.34	365 52
9/10/2009		WalMart		42.27	407 79
9/10/2009		Gabriel Bros		10 05	417 84
9/11/2009		Dollar General Store		10 07	427 91
9/13/2009	1005	Wilson, JoCarol		83 90	511 81
9/14/2009		Krogers		52 30	564 11
9/14/2009		Krogers		37 09	601 20
9/14/2009		Krogers		37 09	638 29
9/14/2009		K-Mart		10 59	648 88
9/14/2009		Ace Hardware		11 65	660.53
9/16/2009	1015	Holyfield, Linda	Reimbursement	16 96	677.49
9/24/2009	1023	Griffin, Joyce	VOID Reimb	0 00	677 49
10/14/2009		Postmaster	for packets	246 00	923 49
11/5/2009		WalMart		37 10	960 59
11/5/2009		WalMart	Ink & pictures .	67 78	1,028 37
Total Supplies - Other				1,028 37	1,028.37
Total Supplies				1,168 68	1,168 68
Travel & Ent					
Meals					
12/10/2009		Outback Steakhouse		528 35	528 35
Total Meals				528 35	528.35
Total Travel & Ent				528 35	528 35
Utilities					
Electric					
1/9/2009			REFUND	-57 58	-57 58
10/28/2009	1025	Allegheny Power		24 66	-32 92
Total Electric				-32 92	-32 92
Total Utilities				-32 92	-32 92
Total Expense				36,711 00	36,711 00
Net Income				**5,523.90**	**5,523.90**