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Form **990-EZ****Short Form****Return of Organization Exempt From Income Tax**

OMB No. 1545-1150

2014**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.**A** For the 2014 calendar year, or tax year beginning , 2014, and ending , 20**B** Check if applicable

- ☐ Address change
☐ Name change
☒ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

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 province, country, and ZIP or foreign postal code

CLARKSBURG, WV 26302-1614**D** Employer identification number**55-0741069****E** Telephone number**(304) 624-3708****F** Group Exemption Number ▶**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ www.wvblackheritagefestival.com**J** Tax-exempt status (check only one) — ☒ 501(c)(3) ☐ 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** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$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)Check if the organization used Schedule O to respond to any question in this Part I ☐

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	51666.78
	2	Program service revenue including government fees and contracts	2	3191.00
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	5030.00
	b	Less: cost or other basis and sales expenses	5b	1084.05
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	3945.95
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		
c	Less: direct expenses from gaming and fundraising events	6c		
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
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 in Schedule O)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	58803.73	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	1650.00
	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	37496.76
	14	Occupancy, rent, utilities, and maintenance	14	10100.00
	15	Printing, publications, postage, and shipping	15	1675.30
	16	Other expenses (describe in Schedule O)	16	4341.84
17	Total expenses. Add lines 10 through 16	17	55263.90	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3539.83
	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	1948.53
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	5488.36

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2014)4
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Part II **Balance Sheets** (see the instructions for Part II)
Check if the organization used Schedule O to respond to any question in this Part II ☐

Check if the organization used Schedule O to respond to any question in this Part II ☐

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	1948.53	22 5488.36
23	Land and buildings		23
24	Other assets (describe in Schedule O)		24
25	Total assets	1948.53	25 5488.36
26	Total liabilities (describe in Schedule O)		26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	1948.53	27 5488.36

Part III	Statement of Program Service Accomplishments (see the instructions for Part III) Check if the organization used Schedule O to respond to any question in this Part III ☐	Expenses
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Check if the organization used Schedule O to respond to any question in this Part III ☐ Expenses

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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, optional for others)

28		
	(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 (describe in Schedule O)	
	(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) Check if the organization used Schedule O to respond to any question in this Part IV	☐
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Check if the organization used Schedule O to respond to any question in this Part IV ☐

[illegible]

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	✓
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	37b	✓
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 tax year 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	✓
c Section 501(c)(3), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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 ▶ Treasurer Telephone no. ▶ (304) 624-3708 Located at ▶ 516 E. B. Saunders Way, Clarksburg, WV ZIP + 4 ▶ 26301-3714		
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)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	42b	✓
c At any time during the calendar year, did the organization maintain an office outside 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		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	✓
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	✓

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	☒

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	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 title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

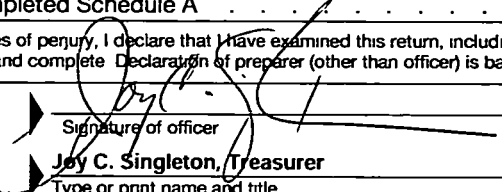
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

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

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations must attach a completed Schedule A ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here  Date 5/1/15
 Signature of officer
Joy C. Singleton, Treasurer
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

**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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g 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 listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	36795.00	40255.03	38914.00	35873.89	51666.78	203504.70
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	36795.00	40255.03	38914.00	35873.89	51666.78	203504.70
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.						203504.70

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	36795.00	40255.03	38914.00	35873.89	51666.78	203504.70
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9827.62	11466.80	7823.13	11192.00	8221.00	48530.55
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 VI.)						
11 Total support. Add lines 7 through 10						252035.25
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 2014 (line 6, column (f) divided by line 11, column (f))	14	81 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	81 %
16a 33 1/3% support test—2014. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
17a 10%-facts-and-circumstances test—2014. 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 VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10%-facts-and-circumstances test—2013. 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 VI 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 ☐		

MA 3-4

10:34 PM
10/13/14
Cash Basis

West Virginia Black Heritage Festival, Inc.
Profit & Loss
January through December 2014

	<u>Jan - Dec 14</u>
Income	
Contributions Income- Festival	
Kick-off Luncheon	2,000.00
Contributions Income- Festival - Other	51,666.78
Total Contributions Income- Festival	53,666.78
T-Shirt/Hat Sales	1,770.00
Flags/Quilt, etc.	1,421.00
Vendors	3,030.00
Total Income	59,887.78
Cost of Goods Sold	
Cost of Goods Sold	
T-Shirts/Hats	1,084.05
Total Cost of Goods Sold	1,084.05
Total COGS	1,084.05
Gross Profit	58,803.73
Expense	
Donations	650.00
Scholarship Fund	1,000.00
Advertising	75.00
Bank Service Charges	26.00
Benevolence	50.00
Dues and Subscriptions	200.00
Entertainment	33,050.00
Food Expense	650.00
Insurance	1,242.46
Labor	630.00
Licenses and Permits	40.00
Lodging	3,472.00
Miscellaneous Expense	850.00
Postage and Delivery	198.51
Printing and Reproduction	1,401.79
Professional Fees	344.76
Rentals	
Sound Equipment/Stage	9,500.00
Rentals - Other	600.00
Total Rentals	10,100.00
Supplies	
Office	378.13
Supplies - Other	742.31
Total Supplies	1,120.44
Travel & Ent	
Meals	162.94
Total Travel & Ent	162.94
Total Expense	55,263.90
Net Income	<u><u>3,539.83</u></u>

10:38 PM.
10/13/14
Cash Basis

West Virginia Black Heritage Festival, Inc.
Transaction Detail By Account
January through December 2014

Date	Name	Paid Amount	Balance
Contributions Income- Festival			
2/3/2014	United Methodist	326.78	326.78
2/6/2014	Clarksburg Harrison Cultu...	1,000.00	1,326.78
2/18/2014	Country Club Chrysler	100.00	1,426.78
2/26/2014	City National Bank of WV	500.00	1,926.78
2/26/2014	Chase Bank	500.00	2,426.78
3/14/2014	Harrison County Commiss...	2,500.00	4,926.78
3/14/2014	MVB	500.00	5,426.78
3/14/2014	WalMart	1,000.00	6,426.78
4/9/2014	Antero	5,000.00	11,426.78
4/14/2014	Ross	500.00	11,926.78
4/14/2014	Homer Brothers	200.00	12,126.78
4/23/2014	Harrison County Board of ...	3,500.00	15,626.78
4/23/2014	Frontier	500.00	16,126.78
5/5/2014	PDC Energy	1,000.00	17,126.78
5/21/2014	Harry Green Chevrolet, Inc.	500.00	17,626.78
6/2/2014	The Miley Legal Group	1,000.00	18,626.78
6/27/2014	Greater Clarksburg Conve...	5,000.00	23,626.78
7/9/2014	Amos Carvelli Funeral Ho...	1,000.00	24,626.78
7/9/2014	Sacred Heart Children's C...	2,000.00	26,626.78
7/9/2014	Action Facilities	1,000.00	27,626.78
7/9/2014	Gateway Motors	150.00	27,776.78
7/25/2014	BB&T	500.00	28,276.78
7/28/2014	Dominion Foundation	4,000.00	32,276.78
7/28/2014	Try-Again Homes, Inc.	100.00	32,376.78
8/15/2014	Cox, David	20.00	32,396.78
8/15/2014	Debora Davis	100.00	32,496.78
8/15/2014	Byard Pharmacy	100.00	32,596.78
8/15/2014	EQT	2,000.00	34,596.78
8/27/2014	Lifepoint Church	200.00	34,796.78
8/27/2014	Davis Funeral Home	1,350.00	36,146.78
8/27/2014	M. Albert	250.00	36,396.78
8/28/2014	State of West Virginia Cul..	4,950.00	41,346.78
8/28/2014	Pierpont	1,500.00	42,846.78
9/3/2014	Romano & Miley	500.00	43,346.78
9/3/2014	Berry Energy, Inc.	1,000.00	44,346.78
9/4/2014	Huntington National Bank	500.00	44,846.78
9/4/2014	Harrison County Republic...	100.00	44,946.78
9/5/2014	Jenkins	500.00	45,446.78
9/9/2014	Waste Management	500.00	45,946.78
9/11/2014		2,970.00	48,916.78
9/16/2014	Chase Bank	250.00	49,166.78
9/18/2014		1,000.00	50,166.78
10/3/2014	Dominion Foundation	1,500.00	51,666.78
Total Contributions Income- Festival		51,666.78	51,666.78
TOTAL		51,666.78	51,666.78



West Virginia Black Heritage Festival, Inc

P.O. Box 1614

Clarksburg, WV 26302-1614

www.wvblackheritagefestival.com

SUMMARY

In the spring of 1990 the Kelly Miller Alumni Association began discussing fundraising ideas for the organization. This laid the groundwork for what was to become known as the West Virginia Black Heritage Festival, Inc. The first Black Heritage Festival, which was begun on September 22, 1990, was called the "Emancipation Proclamation Celebration". It officially began at 11 a.m. on Water Street (now known as E.B. Saunders Way) in Clarksburg, West Virginia. City officials were in attendance for the reading of the Proclamation. Vendors, in the early celebrations, were social clubs and other local organizations. Attendance went far beyond expectation and after three very successful years, the event had outgrown its parent organization and it was decided that it should branch out on its own; thus began the West Virginia Black Heritage Festival.

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.

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