Jeff Adams, Director Ashley Minery, Planner Darby Terrell, Planner



106 East Morgan Street, Suite 207 Brevard, NC 28712

828.884.3205 planning.transylvaniacounty.org

Joint Historic Preservation Commission May 14, 2024 at 4:00 PM Little River Baptist Church 51 Little River Church Rd. Penrose, NC 28766 SPECIAL MEETING

AGENDA

CALL TO ORDER

- I. WELCOME
- II. PUBLIC COMMENT (15-minute time limit. Speakers are limited to three minutes.)
- III. AGENDA MODIFICATIONS
- IV. CONSENT AGENDA
 - A. Minutes (March 12, 2023)
- V. OLD BUSINESS
 - A. The Inn at Brevard
- VI. NEW BUSINESS
 - A. Nonprofit Grant Funding
 - B. America: 250th Celebration
 - C. Staff's Report
- VII. PRESENTATION
 - A. May Preservation Month-Little River History
- VIII. PUBLIC COMMENT (15-minute time limit. Speakers are limited to three minutes.)
 - IX. COMMISSIONER MEMBERS' COMMENTS

ADJOURNMENT

TRANSYLVANIA

COUNTY

NORTH CAROLINA

106 East Morgan Street, Suite 207 Brevard, NC 28712 828.884.3205

Jeff Adams, Director Ashley Minery, Planner Darby Terrell, Planner

Joint Historic Preservation Commission Meeting March 12, 2024 at 4:00 PM Cooperative Extension Conference Room, 106 E. Morgan Street

MINUTES

CALL TO ORDER

- I. WELCOME: Mr. John Koury called the meeting to order at 4:05PM. Ms. Geralyn Connell, Ms. Katherine Buzby, Ms. Marcy Thompson, Ms. Ellen Harris, and Ms. Niki Ransdell, and Mr. Billy Parrish were present. Ms. Nicole Bentley and Mr. Andrew Wing were absent (excused). A quorum was present. Mr. Jeff Adams and Ms. Ashley Minery (Planning Department staff) were present. No members of the public were present.
- II. PUBLIC COMMENT: (15-minute time limit. Speakers are limited to three minutes) There were no public comments.
- **III. AGENDA MODIFICATIONS:** There were no proposed agenda modifications.
- IV. CONSENT AGENDA:

A. Minutes (January 30, 2024)

There was no discussion of the consent agenda. Ms. Buzby moved to approve the consent agenda as amended. Mr. Parrish seconded the motion. All present members voted in favor and the motion carried.

V. OLD BUSINESS:

- A. The Inn at Brevard: Mr. Adams gave an update on the draft letter to the Inn at Brevard owners. It has been reviewed by the County attorney and was being reviewed by the City of Brevard's attorney at the time of the meeting. Mr. Adams assured the Commission the letter would be sent with updated dates and deadlines when it is approved by both legal departments.
- B. May Preservation Month: Commission members discussed activities to celebrate

 Preservation Month. The May JHPC meeting will be held in the Little River community at a historic venue. The event will be advertised and the commission hopes to see a

high attendance. Ms. Rebecca Suddeth of the Transylvania Heritage Museum will also be giving walking tours. Staff will also write a press release on events to be distributed by the Transylvania Times.

VI. NEW BUSINESS:

- A. <u>Staff's Report</u>: Ms. Minery informed the commission that Transylvania County Commissioners had tasked the JHPC with leading the planning efforts to celebrate America's 250th Anniversary. Grant possibilities were briefly discussed, along with other local groups that might be interested in the project. The next regularly scheduled meeting on Tuesday, May 14, 2024, at 4:00PM.
- **VII. PUBLIC COMMENT:** There was no public comment.
- VIII. COMMISSION MEMBERS' COMMENTS: Mr. Parrish thanked staff for their work. Ms. Thompson moved to adjourn the meeting. Mr. Parrish seconded the motion. All present members voted in favor and the meeting adjourned at 4:40PM.

ADJOURNMENT	
Ashley Minery, Planner	Katherine Buzby, Secretary

Land of Waterfalls TRANSYLVANIA COUNTY-NORTH CAROLINA

106 East Morgan Street, Suite 207 Brevard, NC 28712 828-884-3205

planning.transylvaniacounty.org

Jeff Adams, Director Ashley Minery, Planner Darby Terrell, Planner

> Agenda Item: V.A.

Memorandum

From: Ashley Minery, Planner

To: Transylvania County Joint Historic Preservation Commission

Date: May 8, 2024

Meeting Date: May 14, 2024

The Inn at Brevard Subject:

Ashley.Minery@transylvaniacounty.org or (828)884-1710 Contact Info:

Attachment(s): None

Purpose:

Discuss the capital damage/repair for the Inn at Brevard and possible removal of local designation status and recent contact with property

owners and potential buyers.

The JHPC discussed this subject at the past several meetings and continued **Background:**

it until the next meeting. Staff has received advice from both SHPO and

County and City legal teams.

None **Financial Impact:**

Goal 6: "County government is service driven, transparent and performance

based with more active and engaged citizens."

Strategic Plan Goal

& Strategy:

Strategy 6E: "Provide timely, accurate, transparent and informative

communication to the public and across the organization with superior

customer service delivery."

Recommendations: Staff recommends the Transylvania County Joint Historic Preservation

Commission discuss this subject and decide on a course of action.

Jeff Adams, Director Ashley Minery, Planner Darby Terrell, Planner



106 East Morgan Street, Suite 207 Brevard, NC 28712 828-884-3205 planning.transylvaniacounty.org

Agenda Item: VI-A

Memorandum

From: Ashley Minery, Planner

To: Transylvania County Joint Historic Preservation Commission

Date: May 8, 2024

Meeting Date: May 14, 2024

Subject: Non- Profit Funding Allocation

Contact Info: Ashley.Minery@transylvaniacounty.org or (828)884-1710

Attachment(s): 1. Non- Profit Agency Funding Applications

Purpose: Discuss and Allocate Transylvania County's Non- Profit Agency Funding for

Historical Organizations

Background: As part of Transylvania County's 2023-2024 Fiscal Year's Budget, \$10,000 worth

of funding is to be allocated to local Historic Organizations (Transylvania Heritage Museum, Inc, Transylvania County Historical Society, and Veterans

History Museum of the Carolinas) by the Joint Historic Preservation

Commission.

Financial Impact: None

Recommendations: Staff recommends the Transylvania County Joint Historic Preservation

Commission review the applications and allocate the available funding

between the three organizations.



TRANSYLVANIA COUNTY

Non-Profit Agency Funding Application

Fiscal Year 2025

101 South Broad Street Brevard, NC 28712

Phone: 884-3100 Fax: 884-3119

SECTION I			
		ORGANIZATIONAL INF	ORMATION
Organization Name			Chief Executive
-	ylvania Heritage Museum		Susan Breedlove
Mailing Address	,		Phone Number
P.O. E	3ox 2347		828-884-2347
Contact Person for Ap	ppropriation		E-Mail
Hale	Campbell, Treasurer		program.transylvaniaheritage@gmail.com
Contact Person for Co	ontract Signature		E-Mail
Susa	n, Breedlove, President		susan@breedloveproperties.com
City	State	Zip	Fax Number
Brevard	North Carolina	28712	
Tax-Exempt Status (C	heck only one)		Received County funding in last three years?
X 501(c)(3)	501(c)()<-insert #	4947(a)(1) or 527	X Yes ☐ No
Type of Application			Amount of funding requested
🗴 One-time Project		Expansion	\$9,500
SECTION II			
		SERVICE SUMN	1ARY
1. Mission Statement	:		
Please provide the or	ganization's Mission Sta	tement and/or general o	rganizational information.
The mission of the Transeducational programs, c	sylvania Heritage Museum (Theultural events, and special col	HM) is to protect and preserve	the heritage of Transylvania County. Our interactive exhibits, multi-age ng of local culture to ensure it is appreciated by people of today and
2. Funding Uses			
How do you plan to u	ise the requested fundin	g? (for client services, p	ersonnel, operating expenses, capital, etc.)
Requested funds will be	used for Client Services: 1)	Develop and install exhibits a	nd provide supporting programs related to Transylvania County history

FY 25 Non-Profit Grant Application 1 of 4

and cultural heritage. 2) Provide educational programs to Transylvania County students. These students are the future custodians of Transylvania County heritage and by creating positive and memorable experiences with local history and historical sites, we can ensure that heritage is preserved for future generations. 3) Enhance current technology to improve visibility of Museum exhibits and programs, (One time Website update) increase public access to

collections, and provide opportunities for on site visitors to engage in exhibits in a more meaningful way. (One time Kiosk Installation.)

3. Need Statement and Service Goals

What are the identified needs and how will this service address those needs?

The THM's mission is to protect and preserve the cultural heritage of Transylvania County which is a need expressed in the County's Strategic Plan, Goal #3, Strategy C. The County identifies the need to provide residents resources to enhance education for all ages (Goal #2, Strategy A) and to educate both residents and visitors about the county's history and heritage (Goal #5, Strategy C)

Exhibits and supporting educational programs, (Goal #2, Strategy A, Goal #3, Strategy C. Goal #5, Strategy C)

Educational programming for students, (Goal #2, Strategy A, Goal #5, Strategy C)

Website updates with access to virtual tours and collections, (Goal #2, Strategy A, Goal #5, Strategy C)

Interactive Kiosk with access to collections. (Goal #2, Strategy A, Goal #5, Strategy C)

4. Target Population/Citizen Impact

Describe the target population that will be served with the requested funds. How many citizens will be directly impacted by the program funds.

Our target population is the current residents and all those who visit Transylvania County. In 2023, THM had approximately 7,820 people visit our museums (Transylvania Heritage and Silvermont House Museum) and attend programs and special events. Our Teaching Trunks, an educational program established in 2010, were checked out three times during the year. We hosted 18 school tours, serving 725 Transylvania County students. By enhancing the technology of the Museum, we will be able to expand our services to a broader audience, allowing people to enjoy virtual tours and access featured collections via our website.

5. Public Purpose

Explain how your program will expand or provide a complement to services that the County can legally provide or how you will provide these services in a more cost effective manner than government. Please identify what statutory authority the County has to fund this activity (please see Appendix B of the instructions.)

THM preserves and promotes the history and cultural heritage of Transylvania County through the goals outlined in the TC Strategic Plan. (Goal #5, Strategy C, Goal #2, Strategy A, Goal #3, Strategy C).

North Carolina G.S. § 160A□48& tates that the county is authorized to establish and support museums so long as the facility is open to the public. The county can contract with any nonprofit organization to establish and support museums, and may appropriate funds to any such nonprofit organization for the purpose of establishing and supporting such museums. Neighboring counties support their heritage/history museums by line item or by committing a percentage of Occupancy taxes. Henderson County provides space and \$100,000 in funding to their Heritage Museum each year.

6. Partnerships

Describe the organization's relationship to County departments, if any. How does the organization coordinate its services with the County services?

THM works with Transylvania County Parks and Recreation to operate the Silvermont Second Floor House Museum. We collaborate with Transylvania County Library Staff, sharing resources and coordinating events and programs. THM provides educational resources to Transylvania County Schools and hosts school visits to THM, Silvermont and the Allison Deaver House. THM provide special tours to county departments when requested and displays history exhibits in county buildings. The THM also cares for a provides the public access to many of the county's artifacts.

7. Strategic Plan

Cite the goal and strategy your request will support and advance in the Transylvania County Strategic Plan.

Goal #2, Strategy A: Provide resources to support quality educational opportunities. Goal #3, Strategy C: Protect and Preserve Cultural Heritage. Goal #5, Strategy C: Preserve and educate the public about the cultural heritage of the community. Goal #1 addresses quality of life which includes access to Museums. Strategy 3 mentions the importance of creating a Sense of Place. Local Museums that showcase the unique heritage of the county accomplishes this most effectively.

FY 25 Non-Profit Grant Application 2 of 4

SECTION III

PERFORMANCE MEASUREMENT

Key Activities

What key activities will you provide to your customers in order to accomplish the service goal(s) highlighted in statement number 3 above?

THM will provide a venue to showcase the history and cultural heritage of Transylvania County through exhibits, programs and the collections of artifacts. THM will operate the Second Floor House Museum at Silvermont for the County, providing onsite programming and increasing the public's access to the collections housed there. THM will provide programming for Transylvania County students and host class visits to several historic sites within the county. An updated website will provide access to historic content and featured collections to a wider audience and the interactive kiosk will allow on-site visitors to peruse collections and engage with local history in a meaningful way.

Service Outcomes

Since you will not have actual numbers for FY25 you may either use projected data or actual data as of the submission of this application. Please note your method in the box below.

Actual Data as of this submission

Outcomes	FY 2	FY 2023		2024	FY 2025
Outcomes	Target	Actual	Target	Actual	Target
# of visitors	2500	2820	2500	*	3000
Attendance at events/programs	4500	5000	4500	*	5000
Students/Youth Served	500	725	500	*	750
Days Silvermont Museum is Open	48	64	48	*	64

SECTION IV			
BUD	GET DETAILS		
Service Budget			
REVENUE	FY 2023	FY 2024	FY 2025
Funds Received/Requested from Transylvania County	\$5,000	\$5,000	\$9,500
Other Grant Income	\$11,400	\$23,000	\$18,500
Membership	\$5,435	\$6,500	\$7,000
General Contributions	\$9,546	\$3,500	\$4,000
Program Revenue	\$8,981	\$11,650	\$12,000
Corporate Sponsors	\$3,500	S10,000	\$11,000
Total Revenue	\$43,862	\$59,650	\$62,000
Percentage of Revenue Provided from County Funding (Note: Percentage will automatically calculate.)	11%_	8%_	15%

FY 25 Non-Profit Grant Application 3 of 4

EXPENSES	FY 2023	FY 2024	FY 2025
Salaries and Related Expenses	\$1,736	0	\$12.000
Operating Expenses	\$5,099	\$19,811	\$15.000
Direct Program Expenses	\$22,893	\$27,480	\$25,000
Capital Expenses			
Repairs/Restoration/Federal Grant		\$250	\$250
Other (specify): Insurance	\$1,459	\$1,459	\$1,459
Reserve Fund		\$10,650	\$8,291
Total Expenses	\$31,188	\$59,650	\$62,000
Will any portion of the County funding be used to ma	atch grants?	Yes	X No
I have reviewed and am aware of the accountable partnership services and restrictions related to be projects. (Appendices A, B, C and D of the services and D of the services are projects.)	(-12 programs and capital	X Yes	□ No
Fiscal Officer (Business Manager)		Date	
Executive Director (Program Manager)		Date	

FY 25 Non-Profit Grant Application 4 of 4



TRANSYLVANIA COUNTY

Non-Profit Agency Funding Application

Fiscal Year 2025

101 South Broad Street Brevard, NC 28712

SECTION I

Phone: 884-3100 Fax: 884-3119

Organization Name		Chief Executive		
Transylvania County Historical Society		Marjorie Lilliard		
Mailing Address PO Box 2061 ,Brevard, NC 28712		Phone Number		
		828-453-4579		
Contact Person for Ap	propriation		E-Mail	
Marjorie Lilliard			tchsociety@yahoo.com	
Contact Person for Co	ntract Signature		E-Mail	
Marjorie Lilliard	120		tchsociety@yahoo.com	
City	State	Zip	Fax Number	
Brevard	NC	28712		
Tax-Exempt Status (Ch	eck only one)		Received County funding in last three years?	
】 501(c)(3)	501(c)()<-insert#	4947(a)(1) or 527	☐ Yes ☐ No	
Type of Application			Amount of funding requested	
☑ One-time Project	☐ Continuation	Expansion	\$16,000	
1. Mission Statement		SERVICE SUM		
	ranization's Mission Cto	tomant and for soneral	organizational information	
Please provide the org			organizational information.	
Please provide the org			organizational information. County through research, historic documentation, a	
Please provide the org Preserving the cult interpretation. 2. Funding Uses	ural and architectural h	istory of Transylvania	County through research, historic documentation, a	
Please provide the org Preserving the cult interpretation. 2. Funding Uses	ural and architectural h	istory of Transylvania		

FY 25 Non-Profit Grant Application 1 of 4

3. Need Statement and Service Goals

What are the identified needs and how will this service address those needs?

We have an urgent need to raise money for restoration of the house. The restoration project will require donorship and grant monies to afford the project in its entirety. This year, we are implementing more efforts to communicate this need. Part of this effort requires focus in ways to get more exposure to our need and the house in general.

4. Target Population/Citizen Impact

Describe the target population that will be served with the requested funds. How many citizens will be directly impacted by the program funds.

The Allison-Deaver House is open on Saturdays and by appointment only. Oftentimes, there are people who come to the house when it is not open. We know this because of our newly installed security cameras. It is almost a daily basis when people come. This service will provide an abbreviated house tour on interpretive panels placed around the house and grounds.

5. Public Purpose

Explain how your program will expand or provide a complement to services that the County can legally provide or how you will provide these services in a more cost effective manner than government. Please identify what statutory authority the County has to fund this activity (please see Appendix B of the instructions.)

The Allison-Deaver House has an ongoing effort to raise funds to restore the house, specifically the double porches. This year, through thorough assessments, it is determined that the restoration will need to address the foundation of the house as well, raising the projected costs. We are consistent with Appendix B, Item 5; Historic Preservation. We are also providing services under Appendix B, Item 2; Arts Programs and Museums.

6. Partnerships

Describe the organization's relationship to County departments, if any. How does the organization coordinate its services with the County services?

The Transylvania County Historical Society coordinates with the Local History Room at the Transylvania County Library, the Joint Preservation Foundation, and the Silvermont Mansion.

7. Strategic Plan

Cite the goal and strategy your request will support and advance in the Transylvania County Strategic Plan.

Our project will support Goal 1, Strategy C, Goal 3, Strategy 3, and Goal 5, Strategies C and D.

FY 25 Non-Profit Grant Application 2 of 4

This year we will create four wayside panels for the Allison Deaver House and Grounds property as communication measures about the history of the house and the value we place on preserving it. We will contract the job to Curatorial InSight who has a proven track record in projects like ours. Curatorial InSight is a private, non-profit service organization that has provided exhibition development, staff training, interpretive and curatorial services to cultural organizations and museums since 1998. With a strong record of design and development process through education and technical assistance. (Bio and Sample

Service Outcomes

Since you will not have actual numbers for FY25 you may either use projected data or actual data as of the submission of this application. Please note your method in the box below.

The 2024 and 2025 numbers are projected.

Outcomes	FY 2023		FY 2024		FY 2025	
Outcomes	Target	Actual	Target	Actual	Target	
Annual Fundraising Campaign/ Donations/ Memorials	30,000.00	16,227.00	20,000.00		25,000.00	
Allison Deaver House/McGaha Chapel tours	3,000.00	1,643.00	3,000.00		3,000.00	

BUDGE	ET DETAILS						
Service Budget							
REVENUE	FY 2023	FY 2024	FY 2025				
Funds Received/Requested from Transylvania County	\$6,500.00	\$4,000.00	\$16,000.00				
Annual Fundraising	\$16,227.00	\$20,000.00	\$25,000.00				
Pisgah Collective Rent	\$6,300.00	\$6,500.00	\$6,500.00				
Allison-Deaver/McGaha Chapel tours	\$1,643.00	\$2,000.00	\$3,000.00				
Interest	\$3.01	\$4.00	\$4.00				
Special Events	\$2,872.00	\$3,000.00	\$3,000.00				
Total Revenue	\$33,545.01	\$35,504.00	\$53,504.00				
Percentage of Revenue Provided from County Funding (Note: Percentage will automatically calculate.)	19.40%	11.30%	29.90%				
EXPENSES	FY 2023	FY 2024	FY 2025				
Salaries and Related Expenses	\$11,500.00	\$15,000.00	\$15,000.00				
Operating Expenses	\$12,660.00	\$13,000.00	\$13,000.00				
Direct Program Expenses	\$8,000.00	\$4,000.00	\$4,000.00				
Capital Expenses	\$6,100.00	\$4,000.00	\$4,000.00				
Repairs/Restoration/Federal Grant	\$3,645.00	\$4,000.00	\$4,000.00				
Insurance	\$2,847.50	\$2,847.50	\$3,000.00				
Dues	\$444.00	\$450.00	\$450.00				
Total Expenses	\$45,196.50	\$43,297.50	\$43,450.00				

Will any portion of the County funding be used to match grants?	Yes	X
I have reviewed and am aware of the accountability requirements, list of partnership services and restrictions related to K-12 programs and capital projects. (Appendices A, B, C and D of the Instructions)	X	No
Kadie Sanders	15-Mar-24	
Fiscal Officer (Business Manager)	Date	
Marjorie O. Lillard	!5-Mar-24	
Executive Director (Program Manager)	Date	



TRANSYLVANIA COUNTY

Non-Profit Agency Funding Application

Fiscal Year 2025

NORTH CAROLINA

Brevard, NC 28712

101 South Broad Street

Phone: 884-3100 Fax: 884-3119

SECTION I					
		ORGANIZATIONAL IN	FORMATION		
Organization Name			Chief Executive		
Veteran	s History Museum of t	the Carolinas	David Morrow		
Mailing Address			Phone Number		
21 E. Main St.			828-884-2141		
Contact Person for A	Contact Person for Appropriation		E-Mail		
Michel J. Robertson	Michel J. Robertson		veteranshistorymuseumcarolinas@gmail.com		
Contact Person for C	ontract Signature		E-Mail		
Michel J. Robertson			mjrobertson@comporium.net		
City	State	Zip	Fax Number		
Brevard	NC	28712	N/A		
Tax-Exempt Status (c	Check only one)		Received County funding in last three years?		
☑ 501(c)(3)	☑ 501(c)(3) ☐ 501(c)()<-insert # ☐ 4947(a)(1) or 527		☑ Yes □ No		
Type of Application			Amount of funding requested		
☑ One-time Project	☐ Continuation	☐ Expansion	6,000		

SERVICE SUMMARY 1. Mission Statement Please provide the organization's Mission Statement and/or general organizational information.

The mission of the Veterans History Museum of the Carolinas (VHMC) is to honor our nation's veterans, to educate the community about our military history and the sacrifices of our service men and women, and to preserve unique and important historic artifacts. The museum reflects a love of country and gratitude to those who serve by remembering and celebrating their service.

2. Funding Uses

How do you plan to use the requested funding? (for client services, personnel, operating expenses, capital, etc.)

VHMC plans to use the requested funding to present a unique educational program which pays tribute to the men and women of the American and UN military forces who fought and died to preserve the Republic of Korea during the Korean War from 1950-1953. The free event, held at Brevard College, will feature guest speakers Patrick O'Donnell (Korean War veteran & Past President of the Korean War Veterans Center Chapter 301) and Tom Comshaw (veteran, historian, and author). We will include performers from the Korea Center of Greenville and offer authentic Korean cuisine to attendees.

3. Need Statement and Service Goals

What are the identified needs and how will this service address those needs?

The Korean War is referred to as the "forgotten war," due to media censorship during the conflict. The event will provide a tribute to the people of South Korea, both civilian and military, who with assistance from the US and UN forces, prevailed against overwhelming odds and went on to build one of the world's most vibrant economies and democratic societies, while separated by a demilitarized zone and miles of barbed wire and guards. Very few Americans studied the Korean War in classrooms and our Korean War veterans have often been overlooked as we thank vets for their service. Besides a history of this conflict, attendees will gain understanding of the Korean culture through cultural performances and cuisine. The event also recognizes our country's Korean population and their contribution to our own rich cultural heritage.

4. Target Population/Citizen Impact

Describe the target population that will be served with the requested funds. How many citizens will be directly impacted by the program funds.

at the event, museum guests, and social media contacts. The auditorium seats 350. We will film portions of the event and include them on our website and Facebook pages. And due to heavy publicity in various media sources, we expect an increase in museum attendance during and after the event and on our website and Facebook pages. Attendees will include specially invited Korean War veterans, students, members from Asheville's Korean churches, other veterans, and NC and SC citizens interested in history.

5. Public Purpose

Explain how your program will expand or provide a complement to services that the County can legally provide or how you will provide these services in a more cost effective manner than government. Please identify what statutory authority the County has to fund this activity (please see Appendix B of the instructions.)

Transylvania County has provided partnership services to VHMC in the past based on statutory authority G.S.1 160A-488, Arts Program and Museums and Historic Preservation. Local teachers from middle school through university level will use this program as an educational tool to enhance students' knowledge of the Korean War. We will include videos of speakers and cultural performances on our website's educational resources page for local and national educators, schools and history buffs The event is free of charge and offers a historical perspective broader than classroom time permits.

6. Partnerships

Describe the organization's relationship to County departments, if any. How does the organization coordinate its services with the County services?

VHMC has worked with the Transylvania County Public Library, Pisgah Forest Rotary Club, and Transylvania County Development Authority. We have worked with Brevard College's history department and Transylvania County Schools social studies administrators, as well as the Brevard/Transylvania County Chamber of Commerce.

7. Strategic Plan

Cite the goal and strategy your request will support and advance in the Transylvania County Strategic Plan.

Strategy 1B: VHMC is a gem tucked into the mountains of WNC. It is the only veterans history museum in WNC and greatly enhances and enriches the lives of our county's population. 2A: VHMC offers high caliber educational knowledge far beyond what is taught in classrooms. 3A: We offer visitors a unique experience. 5B: Local veterans describe the museum as a "safe place" to meet and share experiences where they are appreciated & valued. 5C: VHMC honors local veterans, our heritage.

SECTION III

PERFORMANCE MEASUREMENT

Key Activities

What key activities will you provide to your customers in order to accomplish the service goal(s) highlighted in statement number 3 above?

Our service goals include educting the public about the Korean War and sacrifices of the military and civilian populations; highlighting the economic and cultural success story of postwar South Korea; and introducing the public to Korean history, art, and cuisine. To accomplish these goals, we will offer lectures by a Korean War veteran and a nationally acclaimed author and historian, cultural performances by South Korean dance groups from the cultural center, and an array of Korean cuisine, offered free to attendees. Guests will mingle, converse, and learn from our invited Korean War veterans.

Service Outcomes

Since you will not have actual numbers for FY25 you may either use projected data or actual data as of the submission of this application. Please note your method in the box below.

We are using actual data for our FY 2023; however our figures for 2024 and 2025 are projected. We are closed in January and February, so we only have actual data for 2024 based on March of this month.

Outcomes		FY 2023		.024	FY 2025	
Outcomes	Target	Actual	Target	Actual	Target	
Event attendance		N/A	350		N/A	
Social media hits		N/A	1000		500	
Increased museum attendance due to publicity & website		N/A	200		100	

SECTION IV							
BUDGET DETAILS							
Service Budget							
REVENUE	FY 2023	FY 2024	FY 2025				
Funds Received/Requested from Transylvania County	\$1,000.00	\$6,000.00	\$7,000.00				
Donations Individual and Corporate	\$65,724.00	\$77,000.00	\$80,000.00				
Grants other tha Transylvania County	\$14,000.00	\$7,000.00	\$17,000.00				
Retail Sales	\$6,105.00	\$7,500.00	\$7,500.00				
Interest on investment accounts	\$1,338.00	\$3,500.00	\$4,800.00				
Fundraising event	\$8,475.00	\$0.00	\$0.00				
Total Revenue	\$96,642.00	\$101,000.00	\$116,300.00				
Percentage of Revenue Provided from County Funding (Note: Percentage will automatically calculate.)	1.00%	5.90%	6.00%				

FY 25 Non-Profit Grant Application 3 of 4

EXPENSES	FY 2023	FY 2024	FY 2025	
Salaries and Related Expenses	\$0.00	\$0.00	\$0.00	
Operating Expenses	\$11,774.00	\$13,000.00	\$13,000.00	
Direct Program Expenses	\$4,863.00	\$14,214.00	\$10,000.00	
Capital Expenses	\$0.00	\$0.00	\$0.00	
Repairs/Restoration/Federal Grant	\$12,000.00	\$2,000.00	\$2,000.00	
Charitable donations	\$5,661.00	\$5,000.00	\$5,000.00	
Grant Expenses	\$9,424.00	\$10,000.00	\$12,000.00	
Subcontractors	\$5,605.00	\$6,000.00	\$6,500.00	
Total Expenses	\$49,327.00	\$50,214.00	\$48,500.00	
I have reviewed and am aware of the accountability partnership services and restrictions related to K-12 projects. (Appendices A, B, C and D of the Ir	☑ Yes	□ No		
Michel Robertson: Much Halpe For Fiscal Officer (Business Manager)	12-Mar-24 Date			
David Morrow: Director (Program Manager)	12-Mar-24 Date			
Executive Director (1 Tobiant Manager)	Dute			

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

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.

Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2023 calendar year, or tax year beginning 01/01/2023 and ending 12/31/2023									
В	Check if a	pplicable:	Employer identification number						
	Address o	change	82-2366521						
	Name cha	ange	E Telephone number						
	Initial retu		21 E Main St	ε	28-884-2141				
	Final retur Amended	rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	Group Exemption					
		on pending		Number					
_		ting Method:	✓ Cash ☐ Accrual Other (specify):	k ∏if tl	ne organization is not				
					ttach Schedule B				
				n 990).					
			☑ Corporation ☐ Trust ☐ Association ☐ Other:						
		-	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total ass	ets					
(Par	t II, col	lumn (B)) are \$	500,000 or more, file Form 990 instead of Form 990-EZ		\$ 94,642				
Pa	art I	Revenue	e, Expenses, and Changes in Net Assets or Fund Balances (see the inst	ruction					
		Check if	the organization used Schedule O to respond to any question in this Part I .						
	1	Contributio	ns, gifts, grants, and similar amounts received	. 1	78,724				
	2	Program se	rvice revenue including government fees and contracts	. 2	8,475				
	3		p dues and assessments	. 3	0				
	4	Investment	income	. 4	1,338				
	5a	Gross amou	unt from sale of assets other than inventory 5a	0					
	b		or other basis and sales expenses	0					
	С		s) from sale of assets other than inventory (subtract line 5b from line 5a)	. 5c	0				
	6		fundraising events:						
	а		ncome from gaming (attach Schedule G if greater than						
ne			6a	0					
Revenue	b	Gross incor	ne from fundraising events (not including \$ 0 of contributions	\dashv					
3e			ising events reported on line 1) (attach Schedule G if the		7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7				
			n gross income and contributions exceeds \$15,000) 6b	0					
	С	Less: direct	expenses from gaming and fundraising events 6c	0					
	d		or (loss) from gaming and fundraising events (add lines 6a and 6b and subtraction	t					
		line 6c) .		- 6d	0				
	7a	Gross sales	of inventory, less returns and allowances	05					
	b		of goods sold	20/05/2000					
	С	Gross profit	or (loss) from sales of inventory (subtract line 7b from line 7a)		2,783				
	8	Other reven	ue (describe in Schedule O)	. 8	0				
	9	Total reven	ue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	. 9	91,320				
	10		similar amounts paid (list in Schedule O)	. 10	9,424				
	11	Benefits pa	d to or for members	. 11	0				
S	12	Salaries, otl	ner compensation, and employee benefits	. 12	0				
nse	13	Professiona	I fees and other payments to independent contractors	. 13	10,308				
Expenses	14	Occupancy	rent, utilities, and maintenance	. 14	10,880				
	15		blications, postage, and shipping		2,493				
	16		nses (describe in Schedule O) .See Schedule O, Statement 1		16,222				
	17		nses. Add lines 10 through 16		49,327				
Net Assets	18	Excess or (d	deficit) for the year (subtract line 17 from line 9)	. 18	41,993				
	19		or fund balances at beginning of year (from line 27, column (A)) (must agree wit		,,,,,,				
			figure reported on prior year's return)		152,610				
	20	Other chance	ges in net assets or fund balances (explain in Schedule O)		5,056				
	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	. 21	199,659				

Pa	t II Balance Sheets (see the instructions to	,				
	Check if the organization used Schedule	O to respond to a	ny question in this	Part II		V
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			147,314	22	193,081
23	Land and buildings			0	23	0
24	Other assets (describe in Schedule O)			5,296	24	6,578
25	Total assets			152,610	25	199,659
26	Total liabilities (describe in Schedule O)				26	0
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	152,610	27	199,659
Par	III Statement of Program Service Accom	plishments (see th	e instructions for	Part III)		
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III 🗌		Expenses
What	is the organization's primary exempt purpose?	See Schedule O, Sta	itement 2			uired for section
Deed	ribe the organization's program service accompli			orogram services		c)(3) and 501(c)(4) inizations; optional fo
as m	peasured by expenses. In a clear and concise mons benefited, and other relevant information for each	anner, describe the			othe	
28	Honor veterans from WWI through the War on Terror	r through Wall of Hon	or plaques of past a	and present		
	veterans. Sponsor Quilts of Valor ceremonies. Week	ly coffee and conver	sation meetings for	veterans only.		
	(Continued on Schedule O, Statement 3)					
	(Grants \$ 1,000) If this amount	includes foreign gra	ints, check here .	🗆	28a	1,000
29	Educate children and adults about our nation's milita	ary history and vetera	ans' contributions. I	Provided		
	specialized tours for groups of school children and	college students. Pro	vide educational int	eractive videos		
	(Continued on Schedule O, Statement 4)					
	(Grants \$ 11,000) If this amount	includes foreign gra	ints, check here .	🗆	29a	2,863
30	Preserve important historic artifacts; honor veterans	locally on 4th of Jul	y, Veterans Day, Me	morial Day, and		
	other special events such as birthdays and special r	ecognition events. Pr	eservation of artifa	cts in a vignette		
	(Continued on Schedule O, Statement 5)					
	(Grants \$ 1,000) If this amount	includes foreign gra	ints, check here .	🗆	30a	1,000
31	Other program services (describe in Schedule O)					
	(Grants \$ 0) If this amount	includes foreign gra	ints, check here .	🗆	31a	0
32	Total program service expenses (add lines 28a t	through 31a)			32	4,863
Par					nstruc	ctions for Part IV)
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part IV		🗆
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO 1099-NEC) (if not paid, enter -0-	deferred compensation	0	Estimated amount of the compensation
	114	40.00			_	
	d Morrow	10.00	1	0	0	0
Pres				_	_	
	Davis	10.00		0	0	0
Secr					-	
	el Robertson	25.00)	0	0	0
30011000350000	surer & CFO					
	Allen	25.00	!	0	0	0
	tor of Communications				-	
	Newman	25.00	}	0	0	0
	tor of Business Planning and Analysis	V2 2000				
	Bugala	2.00	,	0	0	0
Direc					_	····
John	Flynn	3.00	,	0	0	0
Direc	C 0. N 0. N 0.				_	**************************************
	t McCrimmon	2.00		0	0	0
Direc				ļ		
Bobb	y Kotlowski	25.00	1	0	0	0
Direc	tor				_	
					_	
			I	1		

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this					
	instructions for 1 art v.) check if the organization used conteading a to respond to any question in the	J I GIT	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		V		
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	R0127-V372-W08				
b	Did the organization file Form 1120-POL for this year?	37b		V		
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		~		
	If "Yes," complete Schedule L, Part II, and enter the total amount involved					
39	Section 501(c)(7) organizations. Enter:					
a b	Initiation fees and capital contributions included on line 9	-				
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:					
104	section 4911: 0; section 4912: 0; section 4955: 0					
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	735230000000	~		
С	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					
е	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		V		
41	List the states with which a copy of this return is filed:					
42a	The organization's books are in care of: Michel Robertson Telephone no.	828-88	4-214	1		
	Located at: 21 E Main St, Brevard, NC 28712 ZIP + 4 At any time during the calendar year, did the organization have an interest in or a signature or other authority over					
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)?	401	Yes	No		
	If "Yes," enter the name of the foreign country:	42b		~		
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and					
	Financial Accounts (FBAR).					
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country:	42c	MALIONICA ON	1		
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					
		2002/00/20	Yes	No		
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		V		
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		~		
С	Did the organization receive any payments for indoor tanning services during the year?	44c		V		
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schodule O					
4-	explanation in Schedule O	44d				
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	0.992625	~		
b	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		V		

46		he organization engage, directly or in						Yes	No
Part		Section 501(c)(3) Organizations All section 501(c)(3) organization 50 and 51.	s Only					for lin	es
		Check if the organization used Sci	nedule O to respond	I to any question i	n this Part	VI			. 🗆
47		he organization engage in lobbying ? If "Yes," complete Schedule C, Par		section 501(h) elec	ction in effe	ct during the	CHIALECTE (124)	Yes	
48	Is the	organization a school as described in		. 47 . 48 . 49a		V			
49a		the organization make any transfers to an exempt non-charitable related organization?							~
50	Com	es," was the related organization a se plete this table for the organization's oyees) who each received more than	five highest compens	sated employees (es, an	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS 1099-NEC)	contribut SC/ benefit pla	ealth benefits, lons to employee ans, and deferred npensation	(e) Estimat other cor		
None									
f 51	Com	number of other employees paid over plete this table for the organization' ,000 of compensation from the organ	s five highest compe	ensated independe	ent contract	tors who eacl	h received	l more	than
	(a)	Name and business address of each independ	ent contractor	(b) Type of	service	(c) Compensat	ion	
None									
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .					
52		the organization complete Schedu pleted Schedule A	le A? Note: All se	ction 501(c)(3) or	ganizations	must attac		s 🗌	No
		of perjury, I declare that I have examined this r d complete. Declaration of preparer (other than					nowledge an	d belief,	it is
0:									
Sign Here		Signature of officer Michel Robertson, Treasurer				Date			
		Type or print name and title	To		D-1				
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature		Date	Check self-emplo	-5 PW,		
Use (Firm's name				Firm's EIN			
May #	a IDC	Firm's address discuss this return with the preparer	shown above? Soci	netructions		Phone no.	□ v		No
iviay li	ic IUO	discuss this return with the preparer	SHOWIT ADOVE! See I	กอเเนษเปกร			. Yes	> □	No

TRANSYLVANIA

— COUNTY

NORTH CAROLINA

106 East Morgan Street, Suite 207 Brevard, NC 28712 828-884-3205

Jeff Adams, Director Ashley Minery, Planner Darby Terrell, Planner

planning.transylvaniacounty.org

Agenda Item: V-B.

Memorandum

From: Ashley Minery, Planner

To: Transylvania County Joint Historic Preservation Commission

Date: May 8, 2024

Meeting Date: March 14, 2024

Subject: America: 250th Celebration

Contact Info: Ashley.Minery@transylvaniacounty.org or (828)884-1710

Attachment(s): None

Purpose: Discuss America: 250th Celebration

Background: The Transylvania County Board of Commissioners has tasked the Joint

Historic Preservation Committee with planning the 250th Anniversary Celebration of America's founding. A Committee with representatives from interested organizations will likely be formed to navigate the

planning process.

Financial Impact: None

Strategic Plan Goal

Goal 6: "County government is service driven, transparent and performance

& Strategy: based with more active and engaged citizens."

<u>Strategy 6E:</u> "Provide timely, accurate, transparent and informative communication to the public and across the organization with superior

customer service delivery."

Recommendations: Staff recommends the Transylvania County Joint Historic Preservation

Commission discuss America: 250th Celebration.