

Updated: 08/01/2023

Sworn Financial Statements and Certification of Revenues \$75,000 or Less

Entity Name: Metro Bicycle Coalition of New Orleans of	lba Bike Easy
Address: 2100 Oretha Castle Haley Blvd. New Orlean	s, Louisiana, 70113
Telephone: (504) 861-4022 Email: allene	@bikeeasy.org
This annual sworn financial statement is required to be filed the end of the entity's fiscal year by sending a pdf copy by en 3986, or mailing to Louisiana Legislative Auditor – Local Rouge, LA 70804-9397.	nail to <u>ereports@lla.la.gov</u> , faxing to 225-339-
AFFIDAVIT	•
Personally came and appeared before the undersigned author	rity, D. Andrew Owens (officer's
name), who, duly sworn, deposes and says that the financial material respects, the financial position of Metro Bicycle	statements herewith given present fairly, in all
accordance with the basis of accounting described within the	ne accompanying financial statements; that the
entity has maintained a system of internal control structure	sufficient to safeguard assets and comply with
laws and regulations; and that the entity has complied follows: Not Applicable	l with all laws and regulations, except as
Complete if Applicable: In addition, D. Andrew Owens	(officer's name), who duly sworn,
deposes, and says that Metro Bicycle Coalition of New O	rlean (entity's name) received \$75,000 or less
in revenues and other sources for the year ended 12-31-	(entity's year-end), and accordingly,
is not required to have an audit for the previously mentioned	l fiscal year.
D. Dwenes	Treasurer
OFFICER'S SIGNATURE	OFFICER'S TITLE
Sworn to and subscribed before me, this 21 day of	March , 20 24
all	
NOTARY PUBLIC SIGNATURE	

Sworn Financial Statement

Entity Name: Metro Bicycle Coalition of New Orleans Fiscal Year End: 12-31-2023

Statement of Receipts and Disbursements			Statement A
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1.			
Louisiana Highway Safety Commission (LHSC)	\$ 56,256.00		\$ 56,256.00
2.			
Foundation/Philanthropic Grants	\$ 7,580.00		\$ 7,580.00
3. Members & Individual Donors	\$ 57,260.00		\$ 57,260.00
4.			
Sponsorships	\$ 35,693.00		\$ 35,693.00
5.			
Contract Services & Other Income	\$ 29,484.00		\$ 29,484.00
6. Total receipts (add lines 1 - 5)	\$ 186,273.00	\$ 0.00	\$ 186,273.00
DISBURSEMENTS (Provide Brief Description): 7. Staff, Payroll Taxes, & Health Insurance	\$ 117,253.00		\$ 117,253.00
8.			
Contract Services	\$ 58,633.00		\$ 58,633.00
9. Financial Services/Fees	\$ 1,964.00		\$ 1,964.00
10.			
Rent, Insurance, & General Office	\$ 10,834.00		\$ 10,834.00
11. Program Supplies, Equipment, & Travel	\$ 7,830.00	·	\$ 7,830.00
12.	A		0.040.00
Professional Development & Memberships	\$ 3,912.00	0.000	\$ 3,912.00
13. Total Disbursements (add lines 7 - 12)	\$ 200,426.00	\$ 0.00	\$ 200,426.00
14. Change in fund balance (Lines 6 minus 13)	-\$ 14,153.00	\$ 0.00	-\$ 14,153.00
15. Fund Balance at beginning of year	\$ 137,398.00		\$ 137,398.00
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B	\$ 123,245.00	\$ 0.00	\$ 123,245.00

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

identify the Basis of Accounting, if not using Cash-Basis: Accrual

Sworn Financial Statement

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Entity Name: Metro Bicycle Coalition of New Orleans

Fiscal Year End: 12-31-2023

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
1. Cash and cash equivalents			
	\$ 124,352.00		\$ 124,352.00
2. Investments (fair value)			
0.000			\$ 0.00
Office furnishings (Cost of desks, etc)			\$ 0.00
4. Equipment (Cost of fax machine, etc)		- AUGUSTON	
			\$ 0.00
5. Other (brief description)			\$ 0.00
6. Total Assets (add lines 1 - 5)	\$ 124,352.00	\$ 0.00	\$ 124,352.00
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): Accounts Payable	\$ 822.00		\$ 822.00
8.			\$ 0.00
9.			
10.			\$ 0.00
10.			\$ 0.00
11. Total Liabilities (add lines 7 - 10)	-		<u> </u>
	\$ 822.00	\$ 0.00	\$ 822.00
12. Fund balance (amount from Line 16 on Statement A)	\$ 123,245.00	\$ 0.00	\$ 123,245.00
13. Other	-	7	-
			\$ 0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 124,067.00	\$ 0.00	\$ 124,067.00
	\$ 124,067.00	\$ 0.00	

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name,	Title: Allene La Spina,	Executive Director

Purpose	Dollar Amount
1. Salary	\$ 60,300.00
2. Benefits-insurance	\$ 2,700.00
Benefits-retirement	
Benefits-other (describe)	
5. Benefits-other (describe)	
6. Benefits-other (describe)	
7. Car allowance	
8. Vehicle provided by government (if reported on your W-2)	
9. Per diem	
10. Reimbursements	
11. Travel	
12. Registration fees	
13. Conference travel	
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	\$ 63,000.00

Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule only those payments to the agency head that are derived from the public funds.)

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