



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

Entity Name: The Grand Opera House of the South, Inc.

Address: 505 N. Parkerson Avenue, Crowley, LA 70526

Telephone: 337-785-0440 Email: Kim@thegrandoperahouse.org

This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor – Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.

AFFIDAVIT

Personally came and appeared before the undersigned authority, Kimberly G. Fogelman (officer's name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all material respects, the financial position of The Grand Opera House of the South Inc (entity's name) as of 6/30/2025 (entity's year-end) and the results of operations for the year then ended, in accordance with the basis of accounting described within the 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 with all laws and regulations, except as follows:

Complete if Applicable: In addition, Kimberly G. Fogelman (officer's name), who duly sworn, deposes, and says that The Grand Opera House of the South Inc (entity's name) received \$75,000 or less in revenues and other sources for the year ended 6/30/2025 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Kimberly G. Fogelman
OFFICER'S SIGNATURE

Executive Director
OFFICER'S TITLE

Sworn to and subscribed before me, this 30 day of September, 20 25

Heather T. Deshotel
NOTARY PUBLIC SIGNATURE

HEATHER T. DESHOTEL
NOTARY PUBLIC
ACADIA PARISH, LA
ID NUMBER 151385

Entity Name: The Grand Opera House of the South, Inc. Fiscal Year End: 6/30/2025**Statement of Receipts and Disbursements****Statement A**

RECEIPTS (Provide Brief Description):	General Fund	Other Fund	Total
1. Contributions	* 222,189		* 222,189
2. Grant - Louisiana Division of the Arts	1,575		1,575
3. Performance revenue	216,902		216,902
4. Rent	34,356		34,356
5. Other	1,675		1,675
6. Total receipts (add lines 1 - 5)	* 476,697		* 476,697
DISBURSEMENTS (Provide Brief Description):			
7. Advertising	* 12,786		* 12,786
8. Depreciation	147,528		147,528
9. Interest	128,664		128,664
10. Performance expenses	226,135		226,135
11. Utilities	54,709		54,709
12. Other	87,885		87,885
13. Total Disbursements (add lines 7 - 12)	* 659,707		* 659,707
14. Change in fund balance (Lines 6 minus 13)	\$ (183,010)		* (183,010)
15. Fund Balance at beginning of year	898,939		898,939
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	\$ 715,929		* 715,929

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

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.*

Entity Name: The Grand Opera House of the South Inc. Fiscal Year End: 6/30/2025**Balance Sheet****Statement B**

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
1. Cash and cash equivalents			
Accumulated depreciation	<u>(2,487,133)</u>		<u>(2,487,133)</u>
4. Equipment (Cost of fax machine, etc)	<u>81,108</u>		<u>81,108</u>
5. Other (brief description) Other current	<u>43,718</u>		<u>43,718</u>
6. Total Assets (add lines 1 - 5)	<u>\$3,408,929</u>		<u>\$3,408,929</u>
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description): Mortgage, notes payable	<u>\$2,193,000</u>		<u>\$2,193,000</u>
8.			
9.			
10.			
11. Total Liabilities (add lines 7 - 10)	<u>\$2,193,000</u>		<u>\$2,193,000</u>
12. Fund balance (amount from Line 16 on Statement A)	<u>715,929</u>		<u>715,929</u>
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>\$3,408,929</u>		<u>\$3,408,929</u>

Statement C**Schedule of Compensation, Benefits and Other Payments to Entity Head**Agency Head Name, Title: Kimberly G. Fogelman, Executive Director

Purpose	Dollar Amount
1. Salary	
2. Benefits-insurance	
3. Benefits-retirement	
4. 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)	

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 708 schedule only those payments to the agency head that are derived from the public funds.)