Dec. 28. 2021 12:05PM

P. 2 No. 3953

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 <u>ereports@lla.la.gov</u>, 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. Eia+41e (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 Sarth, Inc. (entity's name) as of <u><u><u></u></u>[30]2021 (entity's year-end) and the results of operations for the year</u> 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, Kimperly 6. Gattle (officer's name), who duly sworn, deposes, and says that The Grand Opera Haise of the South Trentity's name) received \$75,000 or less in revenues and other sources for the year ended 430 2021 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Fattle

Recutive Director

OFFICER'S TITLE

Sworn to and subscribed before me, this 13 day of December , 2021

BLIC SIGNATURE & SEAL

STEPHANIE MARTINEZ-HERNANDEZ NOTARY PUBLIC ACADIA PARISH, LA ID NUMBER 12/20 of the completed form to: ereports@lla.la.gov - Updaled 12/20

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Statement of Receipts and Disbursements			<u>Statement A</u>
	General Fund	Other <u>Fun</u> d	
RECEIPTS (Provide Brief Description):			
1 Contributions	\$ 155,041	\$	\$ 155,091
2. Grant-LA Division of the Arts	1,750		1,250
3. Performance Revenue	120,676		120,676
4. Beart	14,700		14,700
5. Other	3,345		3,345
6. Total receipts (add lines 1 - 5)	<u>\$295,062</u>	\$	<u>\$295,062</u>
DISBURSEMENTS (Provide Brief Description): 7. Advartising 8. Depreciation	<u>\$ 990</u> 147,365	\$	<u>\$ 990</u>
9. Interest	46,939	.	46939
10. Performance expenses	42,486		<u> </u>
<u>11. Utilities</u>	39,761		39,761
12. Other	70,462		
13. Total Disbursements (add lines 7 - 12)	<u>\$ 348.003</u>	\$	<u>\$349,003 \$</u>
<u>14. Change in fund balance (Lines 6 minus 13)</u> <u>15. Fund Balance at beginning of year</u> 16. Fund balance (deficit) at end of year (Add lines 14-15)	\$<52941> \$1,373912	\$ \$	<u>\$ <52,941)</u> <u>\$1,373,912</u>
This amount also goes on line 12, Statement B	\$1,320,971	\$	\$1,320,971

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.

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Balance Sheet		<u> </u>	<u>Statement B</u>
	General Fund	Other Fund	Total
 ASSETS (balances at year-end) <u>1. Cash and cash equivalents</u> <u>1. Cash and cash equivalents</u> <u>2. Investmente (fair value)</u> Building <u>3. Office-furnishings (Cest of docks, etc)</u> Security <u>4. Equipment (Cost of fax machine, etc)</u> <u>5. Other (brief description)</u> Officer Current <u>6. Total Assets (add lines 1 - 5)</u> 	\$ 97,095. 5,730,014 <1,694,3657 76,932 3,495 \$4,013,971 \$; 	\$ <u>97,695</u> <u>5,730,014</u> (1,694,3657 <u>76,932</u> <u>3,495</u> <u>\$4,013,9</u> 71
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): 8. Mortgage * Notes Payable 9. 10.	\$; 	\$ 2,193,000
11. Total Liabilities (add lines 7 - 10) 12. Fund balance (amount from Line 16 on Statement A) 13. Other 14. Total Liabilities and Fund Balance (add lines 11 - 13)	2,693,000 1,320,971 <u>\$4,013,971</u> \$	6	<u>2,693,000</u> 1,320,971 <u>\$4,013,97</u> 1

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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Kimberly G. Gattle, Executive Director

Purpose	Dollar Amount
1. Salary	1.
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
6. Benefits-other (describe)	6
7. Car allowance	7.
8. Vehicle provided by government (If reported on your W-2)	8.
9. Per diem	9.
10. Reimbursements	10.
11. Travel	11.
12. Registration fees	12.
13. Conference travel	13.
14. Housing	14.
15. Unvouchered expenses (example, travel advances, etc.)	15.
16. Special meals	16.
17. Other	17.
18. TOTAL (enter total of line 1-17)	18.

V 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.)