Contemporary Arts Center	_ (Entity Name)
New Orleans, Orleans Parish, Louisiana	_(City, Parish/State)
TRANSMITTAL LETTER	
ANNUAL FINANCIAL STATEMENTS	
(Date) 9/15/2020	
Ms. Gayle Fransen Engagement Manager Louisiana Legislative Auditor 1600 North Third Street Baton Rouge, LA 70802	
Dear Ms. Fransen:	
In accordance with Louisiana Revised Statute 24:513, enclosed are the Form and the annual financial statements for my entity, as of and for the (entity's year-end). The statements include all funds under the control of	e year ended <u>6/30/2020</u>
financial statements have been prepared on the cash basis of accounting	16.0 (- 17.0 He - 19.1 - 19.0 He -
Sincerely,	
Officer's Signature	de
Officer's Name, Title	zer, Executive Director

Enclosures

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENT FOR YOUR RECORDS

Affidavit and Revenue Certification

ENTITY NAME

Contemporary Arts Center

Orleans	Parish		
New Orleans, I	LA (City), State		
ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS	(if applicable)		
	by Louisiana Revised Statute 24:514 to be filed with the efiscal year. The certification of revenues of \$75,000 or atute 24:513(J)(1)(c)(i)(aa).		
fairly the financial position of <u>Contemporary Arts</u>	ays that the financial statements herewith given present Center (enter entity name) as of and the results of operations for the year then ended, in		
(Complete if applicable) In addition,			
1.			
~ 4	Officer's Signature		
Sworn to and subscribed before me this day of	September, 2020.		
hA BAR # 14331 my commission is fer life			
For Office Use Only	Please Complete This Section		
Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court. Release Date	Officer's NameGeorge Scheer Officer's TitleExecutive Director Address900 Camp Street City, ZipNew Orleans, 70130 Ph: Cell/Land504-528-3805 E-mailgscheer@cacno.org		

Contemporary Arts C	Center
(Agency Name)	
Statement of Cash Re	eceipts and Disbursements
Statement of Cash Ro For the Year Ended	

	General	Other	
	Fund	<u>Fund</u>	Total
RECEIPTS (Provide Brief Description):			
1. Earned Program Revenue	\$ 1,248,420	\$	\$1,248,420
2. Fundraising Revenue	96,420		96,420
3. Hospitality Sales Revenue	525,102		525,102
4. Contributed Revenue	1,034,332	105,000	1,139,332
5. Public Funds	65,412	-	65,412
6. Total receipts (add lines 1 - 5)	\$ 2,969,686	\$ 105,000	\$ 3,074,686
DISBURSEMENTS (Provide Brief Description): 7. Program Expenses 8. Fundraising Expenses 9. Hospitality Expenses 10. General and Administrative Expenses 11.	\$ 987,625 327,196 260,495 1,461,562	\$	\$ 987,625 327,196 260,495 1,461,562
12.			
13. Total Disbursements (add lines 7 - 12)	\$ 3,036,878	\$ 0.00	\$3,036,878
14. Change in fund balance (Lines 6 minus 13) 15. Fund Balance at beginning of year	\$ (67,192) \$ (82,229)	\$ 105,000 \$ 7,675,621	\$ 37,808 \$ 7,593,392
16. Fund balance (deficit) at end of year (Add lines 14-15)	\$ (140.421)	\$ 7.790.631	\$ 7.621.200
This amount also goes on line 12, Statement B	\$ (149,421)	\$ 7,780,621	\$ 7,631,200

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Contemporary Arts Center Expanded General Ledger From 7/1/2019 Through 6/30/2020

GL Short Title	GL Code	Department Code	Project Code	Effective Date	Transaction Description	Debit	Credit
Gov Grnt: UR	4300	30	GA		Opening Balance	0.00	
Gov Grnt: UR	4300	30	GA	8/1/2019	LA Office of Cultural		1,600.00
Gov Grnt: UR	4300	30	ZA	12/19/2019	ACNO FY20 Grant		15,000.00
Gov Grnt: UR	4300	30	ZA	3/26/2020	NEA:Grant Pmt		40,000.00
Gov Grnt: UR	4300	30	ZW	6/30/2020	Downtown Development District		8,000.00
Gov Grnt: UR	4300	50	PA	7/30/2019	SouthArts Travel Subsidy		812.47
					Transaction Total	0.00	65,412.47
	Balance 4300						65,412.47

Contemporary Arts	Center	
(Agency Name)		
Balance Sheet, on _	6/30/2020	

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description: 1. Cash and cash equivalents on hand	¢ 410 220	c	¢
	\$ 419,230	\$	\$419,230
2. Investments (fair value) on hand	359,029	1,626,701	_1,985,730
Building Improvements and Land	2,275,967	3,150,000	_5,425,967
4. Furnishings and Equipment	985,393		985,393
Other:A/R, Art Collection, Prepaid Expenses	446,356		446,356
6. Total Assets (add lines 1 - 5)	\$ 4,485,975	\$ 4,776,701	\$ 9,262,676
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (give brief description):			
8. Accounts Payable	\$ 445,080	\$	\$ 445,080
9. Notes Payable	725,442		725,442
10. Deferred Revenue	82,454		82,454
11. Total Liabilities (add lines 7 - 10)	1,252,976		1,252,976
12. Fund balance (amount from Line 16 on Statement A)	(149,421)	7,780,621	7,631,200
13. Other :PPP Loan/SBA Loan	378,500	- 50	378,500
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 1,482,055	\$ 7,780,621	\$ 9,262,676

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS

Contemporary	Arts Center	(Agency	/ Name)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)

	(/20/2020	
For the Year Ended	6/30/2020	(Year-End)

Agency Head Name and Title: George Scheer, Executive Director 10/1/2019-present

Purpose	Dollar Amount
1. Salary	1. 85,662
2. Benefits-insurance	2. 4,037
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. 200
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. 89,899

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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1. Salary	1. 50,000
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. 3,875
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.} 53,875

Agency Head Name and Title: Mary Katherine Wegmann, Interim Director -Terminated 10/25/2019