Entity Name: New Orleans Neighborhood Development Foundation Address: 1429 South Rampart Street, New Orleans, LA 70113 Telephone: 504-488-0155 Email: fredj@ndf-neworleans.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, Fred J. Johnson, Jr. CEO (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 New Orleans Neighborhood Development Foundation (entity's name) as of December 31, 2020 (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, Fred J. Johnson, Jr. CEO (officer's name), who duly sworn, deposes, and says that New Orleans Neighborhood Development Foundation (entity's name) received \$75,000 or less in revenues and other sources for the year ended December 31, 2020 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year. Chief Executive Officer OFFICER'S TITLE Sworn to and subscribed before me, this 10 day of November . 2021 KATHERINE L. RICHARDSON, #4783 NOTARY PUBLIC STATE OF LOUISIANA NOTARY PUBLIC SIGNATURE & SEAL PARISH OF ORLEANS My Commission Expires Upon Death

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - updated 12/20

State	ment of Receipts and Disbursements		Statement A		
		General Fund	Other Fund	Total	
	EIPTS (Provide Brief Description):				
	LEASE SEE THE ATTACHED SCHEDULE	\$	\$	-1	
2					
3 4				g-	
5					
	tal receipts (add lines 1 - 5)				
		* *************************************			
DISB	URSEMENTS (Provide Brief Description):				
7		\$			
8					
9. 10.				models (Market April 1994)	
10. 11.					
12.					
	otal Disbursements (add lines 7 - 12)				
14. C	nange in fund balance (Lines 6 minus 13)				
15. Fi	and Balance at beginning of year				
	ind balance (deficit) at end of year (Add lines 14-15)				
	This amount also goes on line 12, Statement B				
į					
denti	fy the Basis of Accounting, if not using Cash-E	Baeier ACCI	RIIAI BASIS (OF ACCOUNTING	
Genti	ry the basis of Accounting, if not using cash-t	Jasis,NOOI	YOME DAGIS (A ACCOUNTING	
-					

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.

Balance Sheet			Statement B
	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents	PLEASE SEE THE ATTACHED SCHEDULE		
2. Investments (fair value)			
Office furnishings (Cost of desks, etc)			
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	·		
LIAB LITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):	\$	\$	<u>\$</u>
8 LONG -TERM LIABILITIES			
9. CURRENT LIABILITIES			
10.			
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)			
	AAPINIONINA MINTENNA MININA MARIANA		

Statement of Re	ceipts and Disbursements						ttachment A
			General		Other		
			Fund		Fund		Total
Receipts		l		<u>. </u>		L	
	1 Grant Revnue - Government	\$	••	\$	13,165.00	\$	13,165.0
	2:Grant Revnue - Other	\$	Ē	\$	161,121.00	\$	161,121.0
	3 Program Income	\$	-	\$	135,000.00	\$	135,000.0
	4:Forgiveness of Deby	\$	132,000.00	\$		\$	132,000.0
	5 Program Fees	\$	· -	\$	94,844.00	\$	94,844.0
	6 Contributions	\$	16,064.00	\$		\$	16,064.0
	7 Miscellaneous Income	\$	43,620.00	\$.	\$	43,620.0
	8 Investment Income	\$	1,021.00	\$	-	\$	1,021.0
		Total Receipts \$	192,705.00	\$	404,130.00	\$	596,835.0
Disbursements	, ,	007 1007 10000007 100 100000 100000 100000 100000 100000 1000000				:	at a second seco
	9 Program Service Expenses	\$		\$	27,285.00	\$	27,285.0
	10 Cost of Property Sold	\$	÷	. \$	218,997.00	\$	218,997.0
	11 Salaries and Benefits	\$	23,629.00	\$	240,319.00	\$	263,948.0
	12 Professional Services	\$	9,475.00	\$	2,393.00	\$	11,868.0
	13 Depreciation Expense	\$	27,427.00	\$	-	\$	27,427.0
	14 Interest Expense	\$	7,460.00	\$	-	\$	7,460.0
	15 Insurance Expense	\$	1,897.00	\$	24,320.00	\$	26,217.0
	16 Utilities	\$	8,051.00	\$	3,698.00	\$	11,749.0
	17 Office Expense	\$	11,456.00	\$	1,505.00	\$	12,961.0
	18 Repairs and Maintenance	\$	18,021.00	\$	-	\$	18,021.0
	19 Contract Services	\$	9,447.00	\$	· -	\$	9,447.0
	20 Janitorial Expense	\$	3,943.00	\$	-	\$	3,943.0
	21 Bad Debt Expense	\$	90,590.00	\$	-	\$	90,590.0
	22 Other Expenditures	\$	337.00	\$		\$	337.0
		Total Receipts \$	211,733.00	\$	518,517.00	Ş	730,250.0
	23 Change in Fund Balance	· \$	(19,028.00)	\$	(114,387.00)	\$	(133,415.0
	24 Fund Balance - Beginning of	Year S	837,301.00	\$	383,753.00	\$	1,221,054.0
	25 Fund Balance - End of Year	\$.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· \$	269,366.00	\$	1,087,639.6

Balance Sheet					Annea .		Statement B
		Ī	General Fund		Other Fund		~ . 1
Assets			reito	Ĺ	runa j	<u> </u>	Total
mosers	1 Cash & Cash Equivalents	ć	310,806.00	¢	91,189.00	ب.	401 OOF O
	2 Investments	ج خ	310,000.00		91,169.00	Ş	401,995.00
	3 Fixed Assets - Bldg, Furniture & Equipt	ب د	730,690.00	¢	7	Ş c	730,690.00
400	4 Accounts Receivable	ç	256,415.00	ç	-	ې د	256,415.00
į	5 Project Development Cost	ڊ خ	230,413.00	ب خ	209,677.00	<u>ک</u> ح	250,413.00
No.	6 Other Assets	٠,	421.00	٠ د	209,077.00	ę ¢	421.00
	Total Receip	ots \$	1,298,332.00	\$	300,866.00	<u>\$</u>	1,599,198.00
4							
Liabilities	7 Accounts payables	······································	4,407.00	ς	are egisar saara	<u>e</u>	4,407.00
	8 Credit Card Payable	ς .	4,250.00	ς ς	_	ζ.	4,250.00
ļ	9 Payroll Liabilities	ς,	10,620.00	ς ς	_	ζ	10,620.0
	10 Line of Credit	· \$	219,513.00	\$	<u> </u>	ς .	219,513.00
	11 Mortgage Payable	\$	193,594.00	\$	-	\$	193,594.00
	12 Deferred Liens	\$	-	\$	31,500.00	\$	31,500.00
	13 Payroll Protection Program Loan	Ś	47,675.00	Ś	-	Ś	47,675.00
	Total Receip	ots \$	480,059.00	\$	31,500.00	\$	511,559.00
Net Assets							
	14:Fund Balance	\$	818,273.00	\$	269,366.00	s	1,087,639.00
	15 Other	\$	· · · · · · · · · · · · · · · · · · ·	\$	- · · · · · · · · · · · · · · · · · · ·	\$	_, ,. ,
	16 Total Liabilities & Fund Balance	`	1,298,332.00	\$	300,866.00 \$	- s	1,599,198.00

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title:_FRED JOHNSON JR - EXECUTIVE DIRECTOR_____

Purpose	Dollar Amount
1. Şalary	1. 78,288.00
2. Benefits-insurance	2.
3. Benefits-retirement	3.
4. Benefits-other (describe)	4.
5. Benefits-other (describe)	5.
β. 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. 78,288.00

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.)

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - Updated 12/20