

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

Entity Name: Red River Crossroads Historical & Cultural Association

Address: PO Box 132, Gilliam, LA 71029

Telephone: <u>318-349-8670</u> Email: rrchca@gmail.com

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, Raymond McKinney (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 Red River Crossroads Historical & Cult (entity's name) as of <u>12-31-2023</u> (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: N/A

<u>Complete if Applicable:</u> In addition, <u>Raymond McKinney</u> (officer's name), who duly sworn, deposes, and says that <u>Red River Crossroads Historical & Cul</u> (entity's name) received \$75,000 or less in revenues and other sources for the year ended <u>12-31-2023</u> (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Sworn to and subscribed before me, this 18th day of

President, Board of Directors OFFICER'S TITLE

February , 20 24

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CAUDO & EOSSIER PARISH, LOUISIANA INY COMMISSION IS FOR LIFE Swom Financial Statement TD# 63467

Updated: 08/01/2023

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Statement of Receipts and Disbursements

Statement A

| | General Fund | | Other Fund | | Total | |
|--|--------------|------------|------------|----------|-----------|------------|
| RECEIPTS (Provide Brief Description) | | | | | | |
| 1. Sunflower Festival Income | \$ | 8,939.00 | \$ | - | \$ | 8,939.00 |
| 2. Membership Dues | | 1,490.00 | | - | | 1,490.00 |
| 3. Book, Map & Cap Sales | 545.00 | | - | | 545.00 | |
| 4. Heritage & Fall Tour Sales & Interest Income | 91.19 | | - | | 91.19 | |
| 5. Donations Received | 2,155.00 | | - | | 2,155.00 | |
| 6. Grants Received | - | | 5,000.00 | | 5,000.00 | |
| 7. Total Receipts (add lines 1 - 5) | \$ | 13,220.19 | \$ 5 | 5,000.00 | \$ | 18,220.19 |
| | | | | | | |
| DISBURSEMENTS (Provide Brief Description) | | | | | | |
| 8. Advertising | \$ | 4,200.00 | \$ | - | \$ | 4,200.00 |
| 9. Brochures Printed - Historical Trail Sites | 1,985.47 | | | | - | 1,985.47 |
| 10. Heritage & Fall Tour Expense | 1,139.24 | | - | | | 1,139.24 |
| 11. Mural Painted on Building | 1,134.48 | | - | | | 1,134.48 |
| 12. Postage, Printing, Telephone & Misc. | 1,819.45 | | - | | 1,819.45 | |
| 13. Sign Installations | 1,070.87 | | - | | 1,070.87 | |
| 14. Spring Meeting & Donations Made | 630.00 | | - | | 630.00 | |
| 15. Sunflower Festival Expense | 6,518.90 | | 5,000.00 | | 11,518.90 | |
| 16. Total Disbursements (add lines 7 - 12) | \$ | 18,498.41 | \$ 5 | 5,000.00 | \$ | 23,498.41 |
| 17. Change in fund balance (Lines 7 minus 16) | \$ | (5,278.22) | \$ | _ | \$ | (5,278.22) |
| 18. Fund Balance at beginning of year | | 44,837.24 | | - | | 44,837.24 |
| 19. Fund balance (deficit) at end of year (Add lines 17-18) ~~This amount also goes on line 12, Statement B | \$ | 39,559.02 | \$ | | | 39,559.02 |

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

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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Statement B

Balance Sheet

At 12-31-2023

| | General Fund | | Other Fund | | Total | |
|--|-----------------|----|------------|--------------|--------|--|
| ASSETS (balances at year-end) | | | | | | |
| 1. Cash and cash equivalents | \$ 39,559.02 | \$ | - | \$ 39, | 559.02 | |
| 2. Investments (fair value) | 26,563.33 | | - | 26, | 563.33 | |
| 3. Office furnishings (Cost of desks, etc. | | | - | | - | |
| 4. Equipment (Cost of fax machine, etc. | | | - | | - | |
| 5. Other (brief description) | | | - | | - | |
| 6. Total Assets (add lines 1 - 5) | \$ 66,122.35 \$ | | | \$ 66,122.35 | | |
| LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description) | \$ - | \$ | | \$ | | |
| 8. | | | | | - | |
| 9. | | | | | - | |
| 10. | | | | | - | |
| 11. Total Liabilities (add lines 7 - 10) | - | | - | | - | |
| 12. Fund balance (amount from Line 16 on Statement A) | 39,559.02 | - | | 39,559.02 | | |
| 13. Other (Investments) | 26,563.33 | - | - | 26 | 563.33 | |
| 14. Total Liabilities and Fund Balance (add lines 11 - 13) | \$ 66,122.35 | \$ | - | \$ 66 | 122.35 | |

Please submit a pdf copy of the completed form to: ereports@lla.la.gov - Updated 2/23

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title: RRCHCA, Raymond McKinney - President

| Purpose | Dollar Amount | | | |
|---|---------------|--|--|--|
| 1. Salary | 0 | | | |
| 2. Benefits-insurance | 0 | | | |
| 3. Benefits-retirement | 0 | | | |
| 4. Benefits-other (describe) | 0 | | | |
| 5. Benefits-other (describe) | 0 | | | |
| 6. Benefits-other (describe) | 0 | | | |
| 7. Car allowance | 0 | | | |
| 8. Vehicle provided by government (if reported on your W-2) | 0 | | | |
| 9. Per diem | 0 | | | |
| 10. Reimbursements | 0 | | | |
| 11. Travel | 0 | | | |
| 12. Registration fees | 0 | | | |
| 13. Conference travel | 0 | | | |
| 14. Housing | 0 | | | |
| 15. Unvouchered expenses (example: travel advances, etc.) | 0 | | | |
| 16. Special meals | 0 | | | |
| 17. Other | 0 | | | |
| 18. TOTAL (enter total of line 1-17) | \$ 0.00 | | | |

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.)