## Hearts of Hope

Financial Report
Years Ended December 31, 2022 and 2021

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INDEPENDENT AUDITOR'S REPORT

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To the Officers and Board of Directors
Hearts of Hope
Lafayette, Louisiana

## Report on the Audit of the Financial Statements

## Opinion

We have audited the accompanying financial statements of Hearts of Hope (a nonprofit organization), which comprise the statements of financial position as of December 31, 2022 and 2021, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements present fairly, in all material respects, the financial position of Hearts of Hope as of December 31, 2022 and 2021, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

## Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America, and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statement section of our report. We are required to be independent of Hearts of Hope and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

## Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Hearts of Hope's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

## Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and Government Auditing Standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards and Government Auditing Standards, we will exercise professional judgment and maintain professional skepticism throughout the audit. We will identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements. We will obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Hearts of Hope's internal control. Accordingly, no such opinion is expressed. We will evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements. We will conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Hearts of Hope's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

## Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the financial statements as a whole.

## Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated September 13, 2023, on our consideration of Hearts of Hope's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of Hearts of Hope's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering Hearts of Hope's internal control over financial reporting and compliance.

Kolder, Slaven \& Company, LLC<br>Certified Public Accountants

Lafayette, Louisiana
September 13, 2023

FINANCIAL STATEMENTS

HEARTS OF HOPE
Lafayette, Louisiana

Statements of Financial Position
December 31, 2022 and 2021
$\xrightarrow{2022} \xrightarrow{2021}$

Current assets:

| Cash and cash equivalents | \$ 201,092 | \$ 305,465 |
| :---: | :---: | :---: |
| Grants receivable | 213,604 | 154,128 |
| Other receivables | 7,800 | - |
| Prepaid expenses | 17,674 | 22,553 |
| Total current assets | 440,170 | 482,146 |
| Property and equipment, net | 467,875 | 463,747 |
| Operating right-of-use asset | 7,857 | 14,412 |
| Other assets: |  |  |
| Beneficial interest in assets held by others | 68,741 | 75,507 |
| Total assets | \$ 984,643 | $\underline{\underline{\$ 1,035,812}}$ |

## LIABILITIES AND NET ASSETS

Current liabilities:

| Accounts payable | \$ | 13,310 | \$ | 7,969 |
| :---: | :---: | :---: | :---: | :---: |
| Accrued payroll |  | 17,741 |  | 19,377 |
| Deferred revenue |  | 1,218 |  | - |
| Payroll liabilities |  | 6,250 |  | 3,583 |
| Accrued compensated absences |  | 12,252 |  | 13,147 |
| Note payable |  | 3,623 |  | 2,823 |
| Operating lease liability - current portion |  | 6,721 |  | 6,555 |
| Total current liabilities |  | 61,115 |  | 53,454 |
| Long-term liabilities: |  |  |  |  |
| Operating lease liability |  | 1,136 |  | 7,857 |
| Total liabilities |  | 62,251 |  | 61,311 |

Net assets:
Without donor restrictions:

| Designated for endowment | 68,741 | 75,507 |
| :--- | ---: | ---: | ---: |
| Undesignated | $\underline{853,651}$ | 898,994 |
| Total net assets | $\underline{922,392}$ | $\boxed{974,501}$ |
| Total liabilities and net assets | $\underline{\$ 984,643}$ | $\underline{\$ 1,035,812}$ |

The accompanying notes are an integral part of this statement.

HEARTS OF HOPE<br>Lafayette, Louisiana

## Statement of Activities

Year Ended December 31, 2022

|  | Without Donor Restrictions | With Donor Restrictions |  | Total |
| :---: | :---: | :---: | :---: | :---: |
| Support, revenues, and losses: |  |  |  |  |
| Grants | \$ 1,090,035 | \$ | - | \$ 1,090,035 |
| Public support donations | 31,539 |  | - | 31.539 |
| Fundraising | 5,540 |  | - | 5,540 |
| Service fees | 68,900 |  | - | 68,900 |
| Investment income | 3,484 |  | - | 3,484 |
| Unrealized loss on investments | $(9,270)$ |  | - | (9,270) |
| Total support, revenues and losses | 1,190,228 |  | - | 1,190,228 |
| Expenses: |  |  |  |  |
| Program services- |  |  |  |  |
| Children's Advocacy Center | 376,005 |  | - | 376,005 |
| Sexual Abuse Response Center | 375,260 |  | - | 375,260 |
| Sexual Assault Nurse Examiners | 206,164 |  | - | 206,164 |
|  | 957,429 |  | - | 957,429 |
| Supperting services - |  |  |  |  |
| Management and general | 268,498 |  | - | 268,498 |
| Fundraising | 16,410 |  | - | 16,410 |
| Total supporting services | 284,908 |  | - | 284,908 |
| Total expenses | 1,242,337 |  | - | 1,242,337 |
| Change in net assets | $(52,109)$ |  | - | $(52,109)$ |
| Net assets, beginning of year | 974,501 |  | - | 974,501 |
| Net assets, end of year | \$ 922,392 | \$ | - | \$ 922,392 |

The accompanying notes are an integral part of this statement.

## HEARTS OF HOPE

Lafayette, Louisiana

Statement of Activities
Year Ended December 31, 2021

|  | Without Donor Restrictions |  | With Donor Restrictions |  | Total |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Support, revenues and gains: |  |  |  |  |  |  |
| Grants | \$ | 879,960 | \$ | - | \$ | 879,960 |
| Public support donations |  | 12,217 |  | - |  | 12,217 |
| Fundraising |  | 19,770 |  | - |  | 19,770 |
| Other income |  | 620 |  | - |  | 620 |
| Service fees |  | 69,600 |  | - |  | 69,600 |
| Investment income |  | 1,374 |  | - |  | 1,374 |
| Unrealized gain on investments |  | 3,969 |  | - |  | 3,969 |
| Total support and revenues |  | 987,510 |  | - |  | 987,510 |
| Expenses: |  |  |  |  |  |  |
| Program services- |  |  |  |  |  |  |
| Children's Advocacy Center |  | 289,307 |  | - |  | 289,307 |
| Sexual Abuse Response Center |  | 330,652 |  | - |  | 330,652 |
| Sexual Assault Nurse Examiners |  | 183,852 |  | - |  | 183,852 |
|  |  | 803,811 |  | - |  | 803,811 |
| Supporting services - |  |  |  |  |  |  |
| Management and general |  | 195,450 |  | - |  | 195,450 |
| Fundraising |  | 17,814 |  | - |  | 17,814 |
| Total supporting services |  | 213,264 |  | - |  | 213,264 |
| Total expenses |  | 1,017,075 |  | - |  | 1,017,075 |
| Change in net assets |  | $(29,565)$ |  | - |  | $(29,565)$ |
| Net assets, beginning of year |  | 1,004,066 |  | - |  | 1,004,066 |
| Net assets, end of year | \$ | 974,501 | \$ | - | \$ | 974,501 |

The accompanying notes are an integral part of this statement.

## HEARTS OF HOPE

Lafayette, Louisiana

Statement of Functional Expenses
For the Year Ended December 31, 2022

Salaries
Employee benefits -

| Payroll taxes | 15,350 | 17,908 | 7,675 | 40,933 |  |
| :--- | ---: | ---: | ---: | ---: | ---: |
| Group insurance | 23,727 | 27,682 | 11,864 | 63,273 |  |
| Retirement | 1,394 | 440 | - | 1,834 |  |
|  |  |  |  |  |  |

Total payroll and related expenses

| Program Services |  |  |  |
| :---: | :---: | :---: | :---: |
| CAC | SARC | SANE |  |
| Program | Program | Program |  |
| Activities | Activities | Activities | Total |
| \$ 195,054 | \$ 227,563 | \$ 97,527 | \$ 520,144 |
| 15,350 | 17,908 | 7,675 | 40,933 |
| 23,727 | 27,682 | 11,864 | 63,273 |
| 1,394 | 440 | - | 1,834 |


| Annual project/fundraising | - | - | - | - | - | 802 | 802 | 802 |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Cleaning | - | - | - | - | 11,100 | - | 11,100 | 11,100 |
| Client services | - | - | 43,120 | 43,120 | - | - | - | 43,120 |
| Contract labor | 55,722 | 12,232 | - | 67,954 | - | - | - | 67,954 |
| Depreciation | 5,801 | 6,769 | 2,901 | 15,471 | 3,868 | - | 3,868 | 19,339 |
| Dues and fees | 898 | 1,048 | 449 | 2,395 | 600 | - | 600 | 2,995 |
| Education and professional development | - | - | - | - | 12,088 | - | 12,088 | 12,088 |
| Insurance | 5,158 | 5,158 | - | 10,316 | 12,628 | - | 12,628 | 22,944 |
| Interest | - | - | - | - | 1,098 | - | 1,098 | 1,098 |
| Legal and accounting | 17,768 | 20,729 | 8,884 | 47,381 | 11,845 | - | 11,845 | 59,226 |
| Marketing | 11,214 | 11,596 | - | 22,810 | 9,234 | - | 9,234 | 32,044 |
| Meetings and receptions | 360 | - | - | 360 | 3,685 | - | 3,685 | 4,045 |
| Miscellaneous | - | - | - | - | 836 | - | 836 | 836 |
| Office expense/supplies | 16,279 | 18,992 | 8,139 | 43,410 | 10,853 | - | 10,853 | 54,263 |
| Rape kits and supplies | - | - | 22,313 | 22,313 | - | - | - | 22,313 |
| Rent/building maintenance | - | - | - | - | 19,706 | - | 19,706 | 19,706 |
| Taxes and licenses | - | - | - | - | 1,413 | - | 1,413 | 1,413 |
| Technology | 20,698 | 17,464 | - | 38,162 | 24,680 | - | 24,680 | 62,842 |
| Telephone | 1,661 | 1,938 | 831 | 4,430 | 1,107 | - | 1,107 | 5,537 |
| Travel | 2,172 | 2,533 | 1,086 | 5,791 | 1,446 | - | 1,446 | 7,237 |
| Utilities | 2,749 | 3,208 | 1,375 | 7,332 | 1,833 | - | 1,833 | 9,165 |
| Total | \$ 376,005 | \$375,260 | \$ 206,164 | S 957,429 | \$268,498 | 6,410 | 84,908 | 242,337 |

The accompanying notes are an integral part of this statement.

## HEARTS OF HOPE

Lafayette, Louisiana

Statement of Functional Expenses
For the Year Ended December 31, 2021

|  | Program Services |  |  |  | Supporting Services |  |  |  | Total <br> Expenses |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | CAC <br> Program <br> Activities | SARC <br> Program <br> Activities | SANE <br> Program <br> Activities | Total |  | anagement <br> and <br> General | Fundraising | Total Supporting Services |  |
| Salaries | \$ 175,773 | \$ 205,067 | \$ 87,886 | \$468,726 | \$ | 105,463 | \$ 11,718 | \$117,181 | \$ 585,907 |
| Employee benefits - |  |  |  |  |  |  |  |  |  |
| Payroll taxes | 13,446 | 15,686 | 6,723 | 35,855 |  | 8,067 | 896 | 8,963 | 44,818 |
| Group insurance | 21,795 | 25,427 | 10,897 | 58,119 |  | 13,077 | 1,453 | 14,530 | 72,649 |
| Retirement | 910 | 288 | - | 1,198 |  | - | - | - | 1,198 |
| Total payroll and related expenses | 211,924 | 246,468 | 105,506 | 563,898 |  | 126,607 | 14,067 | 140,674 | 704,572 |
| Annual project/fundraising | - | - | - | - |  | - | 3,747 | 3,747 | 3,747 |
| Cleaning | - | - | - | - |  | 11,073 | - | 11,073 | 11,073 |
| Client services | 19,120 | 22,305 | - | 41,425 |  | - | - | - | 41,425 |
| Contract labor | 5,227 | - | 51,427 | 56,654 |  | - | - | - | 56,654 |
| Depreciation | 5,241 | 6,116 | 2,621 | 13,978 |  | 3,495 | - | 3,495 | 17,473 |
| Dues and fees | 727 | 849 | 364 | 1,940 |  | 485 | - | 485 | 2,425 |
| Education and professional development | 4,167 | 4,861 | 2,083 | 11,111 |  | 2,778 | - | 2,778 | 13,889 |
| Insurance | 5,917 | 6,904 | 2,959 | 15,780 |  | 3,945 | - | 3,945 | 19,725 |
| Interest | - | - | - | - |  | 647 | - | 647 | 647 |
| Legal and accounting | 7,412 | 8,648 | 3,706 | 19,766 |  | 4,942 | - | 4,942 | 24,708 |
| Meetings and receptions | 255 | 296 | 127 | 678 |  | 169 | - | 169 | 847 |
| Miscellaneous | 746 | 871 | 373 | 1,990 |  | 498 | - | 498 | 2,488 |
| Office expense/supplies | 9,731 | 11,353 | 4,866 | 25,950 |  | 6,487 | - | 6,487 | 32,437 |
| Rape kits and supplies | - | - | 400 | 400 |  | - | - | - | 400 |
| Rent/building maintenance | - | - | - | - |  | 20,299 | - | 20,299 | 20,299 |
| Taxes and licenses | - | - | - | - |  | 1,465 | - | 1,465 | 1,465 |
| Technology | 13,873 | 16,186 | 6,937 | 36,996 |  | 9,249 | - | 9,249 | 46,245 |
| Telephone | 1,659 | 1,937 | 830 | 4,426 |  | 1,107 | - | 1,107 | 5,533 |
| Travel | 1,215 | 1,416 | 607 | 3,238 |  | 809 | - | 809 | 4,047 |
| Utilities | 2,093 | 2,442 | 1,046 | 5,581 |  | 1,395 | - | 1,395 | 6,976 |
| Total | \$289,307 | \$330,652 | \$183,852 | \$803,811 | \$ | 195,450 | \$17,814 | \$213,264 | \$1,017,075 |

The accompanying notes are an integral part of this statement.

# HEARTS OF HOPE 

Lafayette, Louisiana

Statements of Cash Flows
For The Year Ended December 31, 2022 and 2021

|  |  | 2022 |  | 2021 |
| :---: | :---: | :---: | :---: | :---: |
| Cash flows from operating activities: |  |  |  |  |
| Decrease in net assets | \$ | $(52,109)$ | \$ | $(29,565)$ |
| Adjustments to reconcile change in net assets |  |  |  |  |
| to net cash used by operating activities - |  |  |  |  |
| Depreciation |  | 19,339 |  | 17,473 |
| Earnings restricted for long-term endowment |  | $(1,291)$ |  | (639) |
| Unrealized (gain) loss on investments |  | 9,270 |  | $(3,969)$ |
| Change in operating assets and liabilities: |  |  |  |  |
| Grants receivable |  | $(59,476)$ |  | $(22,741)$ |
| Other receivables |  | $(7,800)$ |  | - |
| Prepaid expenses |  | 4,879 |  | $(2,514)$ |
| Operating right-of-use asset |  | 6,555 |  | 6,394 |
| Accounts payable |  | 5,341 |  | 249 |
| Accrued payroll |  | $(1,636)$ |  | 3,592 |
| Payroll tax liabilities |  | 2,667 |  | 588 |
| Accrued compensated absences |  | (895) |  | (35) |
| Operating lease liability |  | $(6,555)$ |  | $(6,394)$ |
| Net cash used by operating activities |  | $(81,711)$ |  | $(37,561)$ |
| Cash flows from financing activities: |  |  |  |  |
| Net increase (decrease) in short-term debt |  | 800 |  | $(3,215)$ |
| Purchase of fixed assets |  | $(23,462)$ |  | $(5,538)$ |
| Net cash used by financing activities |  | $(22,662)$ |  | $(8,753)$ |
| Net decrease in cash and cash equivalents |  | $(104,373)$ |  | $(46,314)$ |
| Cash and cash equivalents, beginning of year |  | 305,465 |  | 351,779 |
| Cash and cash equivalents, end of year |  | 201,092 |  | 305,465 |
| Supplemental disclosure for the statement of cash flo |  |  |  |  |
| Interest paid | \$ | 1,098 | \$ | 647 |

The accompanying notes are an integral part of this statement.

HEARTS OF HOPE<br>Lafayette, Louisiana<br>Notes to Financial Statements

## (1) Summary of Significant Accounting Policies

## A. Nature of Activities

Hearts of Hope (the Organization) is a non-profit organization that is dedicated to providing help and healing for survivors of sexual trauma and violent crime, to providing help to lessen the trauma experienced by child victims when abuse allegations are investigated and throughout court proceedings and to conducting and documenting skillful forensic evidence collection with compassionate care when a patient makes a disclosure of sexual assault. Staff and volunteers maintain a 24 -hour crisis line and provide escort services to the area hospitals.

## B. Basis of Accounting

The financial statements of the Organization have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Net assets and revenues, expenses, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of the Organization and changes therein are classified and reported as follows:

Net assets without donor restrictions - Net assets that are not subject to donor-imposed stipulations.

Net assets with donor restrictions - Net assets subject to donor-imposed stipulations that will be met, either (1) expire by incurring expenses satisfying the restricted purpose (purpose restricted), and/or the passage of time or other events (time restricted), or (2) will never expire (perpetual in nature). When a restriction expires, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions.

## C. Cash and Cash Equivalents

The organization considers all highly liquid investments with an original maturity of three months or less at the date of acquisition to be cash equivalents.

## D. Property and Equipment

Property and equipment are valued at cost, if purchased. Donations of property and equipment are recorded as contributions at their estimated fair value. Additions and betterments of $\$ 5,000$ or more are capitalized, while maintenance and repairs that do not improve or extend the useful lives of the respective assets are expensed.

## HEARTS OF HOPE

Lafayette, Louisiana
Notes to Financial Statements (Continued)

Depreciation is computed using the straight-line method over the following estimated useful lives:

| Asset Class | Estimated <br> Useful Lives |
| :--- | ---: |
| Buildings and improvements | $7-40$ years |
| Office equipment, furniture and fixtures | $5-15$ years |

## E. Revenue and Expense Recognition

Contributions are recognized when the donor makes a commitment to give and are considered to be available for unrestricted use unless specifically restricted by the donor. Contributions designated for future periods or restricted by the donor for specific purposes are reported as increases to net assets with donor restrictions. Contributions received whose restrictions have been met in the same reporting period are included as support in net assets without donor restrictions. Pledges that are designated by the donor for specific beneficiaries are considered agency transactions and are not considered contributions and thus are reduced from pledge revenue.

Expenses are recognized in the period incurred in accordance with the accrual basis of accounting. Operating leases are recognized on a straight-line basis over the life of the lease. The risk-free discount rate is used to measure lease liabilities and right-of-use assets by class. No right-of-use asset and lease liability is recognized for shortterm leases (with terms of 12 months or less).

## F. Functional Allocation of Expenses

Expenses are summarized and categorized based on their functional classification as either program or supporting services. Specific expenses that are readily identifiable to a single program or activity are charged directly to that function. Certain categories of expenses are attributable to more than one program or supporting function. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include depreciation and occupancy, which are allocated on a square-footage basis, as well as salaries and related benefits, which are allocated on the basis of time and effort.

## G. Income Taxes

The Organization qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code and classified by the Internal Revenue Service (IRS) as other than a private foundation. Accounting principles generally accepted in the United States of American require the Organization's management to evaluate tax positions taken and recognize a tax liability (or asset) if the Organization has undertaken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service.

## HEARTS OF HOPE

Lafayette, Louisiana

Notes to Financial Statements (Continued)

Management has analyzed the tax positions taken by the Organization, and has concluded that as of December 31, 2022 and 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclose in the financial statements. The Organization is subject to routine audit by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

## H. Compensated Absences

Sick time is accumulated as a single compensated absence. Eight hours are earned per month for all full-time employees (employees working 30 hours or more per week). Any unused accumulated balance can be carried forward to the following year. However, sick leave is forfeited upon leaving employment; accordingly, no liability has been recorded in the accompanying financial statements for sick time. Vacation time is earned monthly based on length of service for all full-time employees. Any unused accumulated balance is forfeited at the end of each year. However, earned vacation time is paid-out upon termination of employment; accordingly, a liability has been recorded in the accompanying financial statements for vacation time. Accrued compensated absences as of December 31, 2022 and 2021 amounted to $\$ 12,252$ and $\$ 13,147$, respectively.

## I. Donated Facilities, Materials, and Services

The Organization receives a significant amount of donated services from unpaid volunteers who assist in program services during the year. These donated services are not reflected in the statement of activities because the criteria for recognition under professional standards have not been satisfied; however, these services are valuable to the Organization's programs.

## J. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from these estimates.

## HEARTS OF HOPE

Lafayette, Louisiana

Notes to Financial Statements (Continued)

## (2) Liquidity and Availability of Financial Assets

The following reflects the Organization's financial assets as of December 31, 2021 and 2020, reduced by amounts not available for general use because of donor-imposed regulation and board designations.

|  | 2022 |  | 2021 |
| :---: | :---: | :---: | :---: |
| Financial assets, at year-end | \$ | 491,237 | \$535,100 |
| Less those unavailable for general expenditures within one year, due to: |  |  |  |
| Board designations- <br> Endowment fund |  | $(68,741)$ | $(75,507)$ |
| Financial assets available to meet cash needs for general expenditures within one year | \$ | 422,496 | \$459,593 |

At December 31, 2022 and 2021, the Organization had $\$ 422,496$ and $\$ 459,593$ of financial assets available within 1 year of the statement of financial position date to meet cash needs for general expenditures consisting of cash and cash equivalents of $\$ 201,092$ and $\$ 305,465$, and grants/other receivables of $\$ 221,404$ and $\$ 154,128$, respectively. As part of the Organization's liquidity management, the Organization has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligation become due.

## (3) Endowment Fund

During fiscal year ending 2003, Hearts of Hope and the Community Foundation of Acadiana (Foundation) entered into an agreement to manage an endowment fund to support the mission of the Organization. The Foundation has limited variance power over the fund. In the event that a donor restriction becomes unnecessary, incapable of fulfillment, or inconsistent with the needs of the community, the Foundation may modify the restriction through the exercise of the variance power. Distribution from the Fund can be made solely for the support of the purposes of the Organization once the investment has reached $\$ 1,000,000$, as stipulated by the Organization's Board of Directors. Effective September 14, 2021, the Organization's Board of Directors removed the $\$ 1,000,000$ stipulation. The Board designated $\$ 0$ for endowment purposes for the years ended December 31, 2022 and 2021. The fund is invested in $50 \%$ equity funds, $45 \%$ in fixed income funds, and $5 \%$ in money market funds. The assets of the fund shall be held and invested by the Foundation. There were no distributions from the fund during the years ended December 31, 2022 and 2021.

The governing board has designated, from net assets without donor restrictions, net assets for a board-designated endowment. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowment, are classified and reported based on the existence or absence of donor-imposed restrictions.

HEARTS OF HOPE<br>Lafayette, Louisiana

## Notes to Financial Statements (Continued)

The Organization has adopted investment and spending policies, approved by the Board of Directors, for endowment assets. The investment process seeks to achieve an after-cost total real rate of return, including investment income as well as capital appreciation, which exceeds the annual distribution with acceptable levels of risk. The endowment investment is reflected in the financial statements as a Beneficial Interest in Assets Held by Others and Net Assets without Donor Restrictions - Designated for Endowment. The changes in endowment net assets for the years ended December 31, 2022 and 2021 were as follows:

|  | 2022 |  | 2021 |
| :--- | :---: | :---: | :---: |
|  |  | $\$ 75,507$ | $\$ 70,899$ |
| Board-designated endowment net assets, beginning of year | $(7,817)$ |  | 3,969 |
| Net unrealized/realized gain (loss) | 1,404 |  | 1,006 |
| lnterest | $\underline{(353)}$ | $\underline{(367)}$ |  |
| Fees | $\underline{\$ 68,741}$ | $\underline{\$ 75,507}$ |  |
| Board-designated endowment net assets, end of year |  |  |  |

## (4) Property and Equipment

Property and equipment consist of the following as of December 31, 2022 and 2021:

|  | 2022 |  | 2021 |  |
| :---: | :---: | :---: | :---: | :---: |
| Buildings and improvements | \$ | 571,266 |  | 559,064 |
| Office equipment, furniture and fixtures |  | 53,616 |  | 42,351 |
| Total property and equipment |  | 624,882 |  | 601,415 |
| Less: Accumulated depreciation |  | $(157,007)$ |  | $(137,668)$ |
| Property and equipment, net | \$ | 467,875 |  | 463,747 |

Total depreciation expense for the years ended December 31, 2022 and 2021 was $\$ 19,339$ and $\$ 17,473$, respectively.
(5) Note Payable

On April 28, 2022, the Organization entered into an interest-bearing note agreement in the amount of $\$ 17,337$ to finance insurance premiums. The note will require ten monthly installments of $\$ 1,811$ bearing an interest rate of $9.65 \%$. On May 4,2021 , the Organization entered into an interestbearing note agreement in the amount of $\$ 15,551$ to finance insurance premiums. The note will require ten monthly installments of $\$ 1,623$ bearing an interest rate of $9.4 \%$. At December 31, 2022 and 2021, the amount outstanding on the note payable was $\$ 3,623$ and $\$ 2,823$, respectively. Interest expense amounted to $\$ 1,098$ and $\$ 647$ for the years ended December 31, 2022 and 2021, respectively.

HEARTS OF HOPE<br>Lafayette, Louisiana<br>Notes to Financial Statements (Continued)

## (6) Retirement Plan

The Organization provides their employees the opportunity to participate in a "Simple IRA" retirement plan. All eligible employees who work full time or over 30 hours per week may contribute from one percent ( $1 \%$ ) of their gross pay upward. The Organization matches the employees? contribution up to two percent ( $2 \%$ ) of gross pay. Contributions made for the years ended December 31,2022 and 2021 totaled $\$ 1,834$ and $\$ 1,198$, respectively.
(7) Leases

The Organization is obligated under an office equipment lease agreement for 60 months, with monthly payments of \$570, expiring in March, 2024.

The following is a maturity analysis of the annual undiscounted cash flows (payments) of the operatiog lease liability as of December 31, 2022:

| Year Ending <br> December 31, | Amount |
| :--- | :---: |
| 2023 | $\$ 6,840$ |
| 2024 |  |
| $\quad$ Total operating lease liability - payments | $\underline{\$ 7,140}$ |
|  |  |

The following is a reconciliation of the total operating lease liability - payments on the schedule above to the operating lease liability on the accompanying statement of net position as of December 31, 2022:

| Total operating lease liability - payments |  |  | 7,980 |  |
| :---: | :---: | :---: | :---: | :---: |
| Operating lease liability - current portion | \$ | 6,721 |  |  |
| Long-term liabilities: |  |  |  |  |
| Operating lease liability |  | 1,136 |  |  |
| Total operating lease liability |  |  |  | 7,857 |
| Present value adjustment |  |  | \$ | 123 |

Operating lease cost of $\$ 6,840$ is included in the statement of activities for the years ended December 31, 2022 and 2021. The weighted average of the remaining lease term was 0.88 years and the weighted average discount rate used was $2.49 \%$.

## (8) Concentration of Credit Risk

The Organization maintains cash balances at financial institutions, which at times may exceed federally insured limits. Accounts are insured by the Federal Deposit Insurance Corporation up to $\$ 250,000$. At December 31, 2022, cash balances were fully secured. At December 31, 2021 the Organization had unsecured cash balances of $\$ 55,517$.

HEARTS OF HOPE
Lafayette, Louisiana
Notes to Financial Statements (Continued)

Commitments and Contingencies
Amounts received or receivable from grantor agencies are subject to audit and adjustment by grantor agencies, principally the federal government. Any disallowed claims, including amounts already collected, may constitute a liability. The amount, if any, of expenditures which may be disallowed by the grantor cannot be determined at this time although the Hearts of Hope expects such amounts, if any, to be immaterial. Also, a liability for findings and questioned costs is not established until final disposition of such matters by the funding agency.

## Risk Management

Hearts of Hope is exposed to risks of loss in the areas of health care, general liability, property hazards and workers' compensation. All of these risks are handled by purchasing commercial insurance coverage. There have been no significant reductions in the insurance coverage during the year. Insurance settlements have not exceeded insurance coverage the past three years.

## Fair Value Measurements

Professional standards require the disclosure for fair value measurements of financial assets and liabilities and for fair value measurements of nonfinancial items that are recognized or disclosed at fair value in the financial statements on a recurring basis. The standards establish a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level l measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). The three levels of inputs used to measure fair value are as follows:
a. Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities.
b. Level 2 inputs are observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.
c. Level 3 inputs are unobservable inputs for the asset or liability.

The following methods and assumptions were used by the Organization in estimating fair values of financial instruments:
a. The carrying amount reported in the statement of financial position for the following approximates fair value due to the short maturities of these instruments: cash, certificates of deposits, receivables, and payables.
b. The fair value for investment securities are based on quoted market prices at the reporting date multiplied by the quantity held. The carrying value equals fair value.

# HEARTS OF HOPE <br> Lafayette, Louisiana 

Notes to Financial Statements (Continued)

The following table presents assets that are measured at fair value on a recurring basis at December 31, 2022 and 2021:

| Description | December 31, 2022 |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Total | (Level 1) | (Level 2) |  | (Level 3) |  |
| Fixed income | \$20,417 | \$ 20,417 | \$ | - | \$ | - |
| Equity | 22,686 | 22,686 |  | - |  | - |
|  | \$43,103 | \$43,103 | \$ | - | \$ | - |
|  | December 31, 2021 |  |  |  |  |  |
| Description | Total | (Level 1) |  | vel 2) |  | el 3) |
| Fixed income | \$24,313 | \$ 24,313 | \$ | - | \$ | - |
| Equity | 27,015 | 27,015 |  | - |  | - |
|  | \$51,328 | \$51,328 | \$ | - | \$ | - |

## (12) Compensation, Benefits, and Other Payments to Agency Head

The schedule of compensation, benefits and other payments to Kimberly Young, Executive Director, for the year ended December 31, 2022 follows:

| Purpose | Amount |
| :--- | ---: |
| Salary | $\$ 91,694$ |
| Benefits - insurance | 13,725 |
| Benefits - retirement | 1,834 |

(13) Change in Accounting Principle

The FASB issued ASU No. 2016-02, Leases (Topic 842) intended to improve financial reporting regarding leasing transactions. Under the new standard, a lessee is required to recognize leases on its balance sheet. At initial recognition of a lease, the lessee measures the liability for its lease obligation and the related right-to-use-asset at the present value of lease payments not yet paid. The guidance also requires qualitative and quantitative disclosures providing additional information about the amounts recorded in the financial statements. The Organization has elected the package of practical expedients permitted, which includes applying Topic 842 only to leases with terms of over 12 months. The Organization applied Topic 842 to all qualifying leases. The net effect of the implementation of the new accounting principle had no effect on beginning equity and is summarized below.

HEARTS OF HOPE<br>Lafayette, Louisiana<br>Notes to Financial Statements (Continued)

|  | Previously <br> Reported <br> 2021 |  | Effect of Adoption | $\begin{aligned} & \text { As Restated } \\ & 2021 \\ & \hline \end{aligned}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Statement of financial position: |  |  |  |  |  |
| Assets - |  |  |  |  |  |
| Operating right-of-use asset | \$ | - | \$14,412 |  | \$ 14,412 |
| Liabilities - |  |  |  |  |  |
| Opearting lease liability- current portion | \$ | - | \$ 6,555 |  | 6 6,555 |
| Operating lease liability |  | - | 7,857 |  | 7,857 |
| Total | \$ | - | \$14,412 |  | \$ 14,412 |

## (14) Subsequent Event Review

The Organization's management has evaluated subsequent events through September 13, 2023, the date which the financial statements were available to be issued.

INTERNAL CONTROL, COMPLIANCE

AND

OTHER MATTERS

# KOLDER, SLAVEN \& COMPANY, LLC <br> CERTIFIED PUBLIC ACCOUNTANTS 

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED

Victor R. Slaven, CPA* - retired 2020
Christine C. Doucet, CPA - retired 2022
*A Professional Accounting Corporation

ON AN AUDIT OF FINANCIAL STATEMENTS

PERFORMED IN ACCORDANCE WITH
GOVERNMENT AUDITING STANDARDS

To the Officers and Board of Directors
Hearts of Hope
Lafayette, Louisiana
We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, the financial statements of Hearts of Hope (a nonprofit organization), which comprise the statements of financial position as of December 31, 2022 and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated September 13, 2023.

## Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Hearts of Hope's internal control over financial reporting (internal control) as a basis for designing the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Hearts of Hope's internal control. Accordingly, we do not express an opinion on the effectiveness of Hearts of Hope's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. We did identify a certain deficiency in internal control described in the accompanying schedule of findings and questioned costs as item 2022-001 that we consider to be a material weakness.

## Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether Hearts of Hope's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed an instance of noncompliance or other matters that are required to be reported under Government Auditing Standards and which is described in the accompanying schedule of findings and questioned costs as item 2022-002.

## Hearts of Hope's Response to Findings

Government Auditing Standards requires the auditor to perform limited procedures on Hearts of Hope's response to the findings identified in our audit and described in the accompanying summary schedule of current and prior year audit findings and management's corrective action plan. Hearts of Hope's response was not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

## Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose. Although the intended use of this report may be limited, under Louisiana Revised Statute 24:513, this report is distributed by the Legislative Auditor as a public document.

Kolder, Slaven \& Company, LLC

Certified Public Accountants

Lafayette, Louisiana
September 13, 2023

# KOLDER, SLAVEN \& COMPANY, LLC <br> CERTIFIED PUBLIC ACCOUNTANTS 

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INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

To the Officers and Board of Directors
Hearts of Hope
Lafayette, Louisiana

## Report on Compliance for Each Major Federal Program

We have audited Hearts of Hope (Organization) compliance with the types of compliance requirements identified as subject to audit in the OMB Compliance Supplement that could have a direct and material effect on each of the Organization's major federal program for the year ended December 31, 2022. The Organization's major federal program is identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, the Organization complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on the major federal program for the year ended December 31, 2022.

## Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

[^0]
## Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to Organization's federal programs.

## Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the Organization's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards, Government Auditing Standards, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the Organization's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with generally accepted auditing standards, Government Auditing Standards, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the Organization's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the Organization's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

## Other Matters

The results of our auditing procedures disclosed other instances of noncompliance which are required to be reported in accordance with the Uniform Guidance and which are described in the accompanying schedule of findings and questioned costs as item 2022-004. Our opinion on each major federal program is not modified with respect to these matters.

Government Auditing Standards requires the auditor to perform limited procedures on Organization's response to the noncompliance findings identified in our compliance audit described in the accompanying schedule of findings and questioned costs. The Organization's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

## Report on Internal Control Over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the Auditor's Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as discussed below, we did identify a certain deficiency in internal control over compliance that we consider to be a significant deficiency.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigued functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A material weakness in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A significant deficiency in internal control over compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiency in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2022-003 to be a significant deficiency.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on the Organization's response to the internal control over compliance findings identified in our audit described in the accompanying schedule of findings and questioned costs. The Organization's response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose. However, this report is a matter of public record and its distribution is not limited.

Kolder, Slaven \& Company, LLC
Certified Public Accountants

Lafayette, Louisiana
September 13, 2023

## HEARTS OF HOPE

Lafayettc, Louisiana
Schedule of Expenditures of Federal Awards
Ycar Ended December 31, 2022

| Federal Grantor/Pass-Through Grantor/Program Titlc | CFDA <br> Number | Federal <br> Assislance <br> I.D. Numher | Pass- <br> Through <br> Grantor's <br> Number | Federal Expenditures |
| :---: | :---: | :---: | :---: | :---: |
| Passs-through Programs: |  |  |  |  |
| U. S. Department of Justice - |  |  |  |  |
| Louisiana Commission on Law Enforcement: |  |  |  |  |
| Sexual Assault Services Program | 16.017 | 15JOVW-21-GG-00467-MUMU | 2021-KF-91-6554 | \$ 52,168 |
| Juvenile Justice \& Delinquency Prevention Program | 16.540 | 2020-JX-FX-0047 | 2020-JF-12-6289 | 40,378 |
| Crime Victim Assistance - |  |  |  |  |
| Viclims Assistance Program 4 | 16.575 | 2019-V2-GX-0059 | 2019-VA-01-5850 | 362,392 |
| Victims Assistance Program 4 | 16.575 | 2020-V2-GX-0010 | 2020-VA-01-6362 | 234,482 |
|  |  |  |  | 596,874 |
| Violence Against Women Formula Grants - |  |  |  |  |
| Sexual Assault Program | 16.588 | 15JOVW-21-GG-00542-MUMU | 2021-WT-03-6553 | 22,949 |
| Louisiana Alliance of Children's Advocacy Centers: |  |  |  |  |
| Scrvices for Traficking Victims | 16.320 | N/A | 5-LAF-03 | 24,205 |
| Services for Traticking Victims | 16.320 | NiA | 5-LAF-03 | 18.122 |
|  |  |  |  | 42,327 |
| National Children's Alliance: |  |  |  |  |
| Improving the Investigation and Prosecution of Child Abuse |  |  |  |  |
| U. S. Department of Health and Human Services - |  |  |  |  |
| Louisiana Foundarion Against Sexual Assault, Inc: |  |  |  |  |
| Injury Prevention and Control Research and State and Community |  |  |  |  |
| Rape Prevention and Education | 93.136 | N/A | N/A | 56,114 |
| Louisiana Altiance of Children's Advocacy Centers |  |  |  |  |
| Child A buse and Neglect State Grants | 93.669 | N/A | CAPTA-LAF-008-01 | 41,812 |
| TOTAL FEDERAL AWARDS |  |  |  | \$ 877.622 |

HEARTS OF HOPE
Lafayette, Louisiana
Notes to Schedule of Expenditures of Federal Awards
Year Ended December 31, 2022
(1) General

The accompanying schedule of expenditures of federal awards presents the activity of all federal financial assistance programs of Hearts of Hope (a nonprofit organization). Hearts of Hope's reporting entity is defined in Note I to the financial statements for the year ended December 31, 2022. All federal financial assistance received directly from federal agencies is included in the schedule as well as federal financial assistance passed through other government agencies.
(2) Basis of Accounting

The accompanying schedule of expenditures of federal awards is presented using the accrual basis of accounting, which is described in Note 1 to Hearts of Hope's financial statements for the year ended December 31, 2022.

## (3) Indirect Cost Rate

The Organization has elected not to use the $10 \%$ de minimis indirect cost rate.

HEARTS OF HOPE<br>Lafayette, Louisiana<br>Schedule of Findings and Questioned Costs<br>Year Ended December 31, 2022

## Part I. Summary of Auditor's Results:

1. The auditor's report expresses an unmodified opinion on whether the financial statements of Hearts of Hope were prepared in accordance with GAAP.
2. There were no significant deficiencies in internal control over financial reporting that were disclosed during the audit of the financial statements. There was one material weakness reported.
3. There was one instance of noncompliance material to the financial statements of Hearts of Hope, which would be required to be reported in accordance with Government Auditing Standards, were disclosed during the audit.
4. There was one significant deficiency in internal control over the major federal award program disclosed during the audit. No material weaknesses are reported.
5. The auditor's report on compliance for the major federal award program for Hearts of Hope expresses an unmodified opinion on all major federal programs.
6. There were audit findings that are required to be reported in accordance with 2 CFR section 200.516(a) in this schedule.
7. The program tested as a major program was: Crime Victim Assistance (16.575).
8. The threshold used to distinguish between Type A and Type B programs was $\$ 750,000$.
9. Hearts of Hope was determined to not be a low-risk auditee.

Part II. Findings - Financial Statements Audit:
A. Internal Control Findings-

2022-001 Inadequate Segregation of Accounting Functions
Fiscal year finding initially occurred: 2019
CRITERIA: The Organization should have a control policy according to which no person should be given responsibility for more than one related function.

CONDITION: The Organization did not have adequate segregation of accounting functions.
CAUSE: Due to the size of the Organization, there are a small number of available employees.
EFFECT: The Organization has employees that are performing more than one related function.
RECOMMENDATION: The Organization should establish and monitor mitigating controls over functions that are not completely segregated.

MANAGEMENT'S CORRECTION ACTION PLAN: Due to the size of the operations and the cost-benefit of additional personnel, it may not be feasible to achieve complete segregation of duties. Management will continue to monitor mitigating controls over accounting functions that are not completely segregated.

HEARTS OF HOPE<br>Lafayette, Louisiana<br>Schedule of Findings and Questioned Costs (Continued)<br>Year Ended December 31, 2022

B. Compliance Findings -

2022-002 Failure to File Audited Financial Statements Timely
Fiscal year finding initially occurred: 2021
CRITERIA: In accordance with Louisiana Revised Statute $24: 513$, the Organization must complete and submit an audit of their financial statements within six months of the close of their fiscal year to the Legislative Auditor's office.

CONDITION: The Organization's annual audited financial statements were not filed timely for the fiscal year ended December 31, 2022.

CAUSE: The Organization's management did not take the appropriate actions to ensure its annual financial statement audit was completed within six months of the close of their fiscal year.

EFFECT: The Organization did not comply with Louisiana Revised Statute 24.513.
RECOMMENDATION: The Organization should take necessary actions to ensure their annual financial statement audit is completed and submitted within six months of the close of their fiscal year.

MANAGEMENT'S CORRECTION ACTION PLAN: The Organization's management will take the appropriate actions to ensure that their annual financial statement audit is completed and submitted within the prescribed deadline.

Part III. Findings and questioned costs - Major Federal Award Programs Audit:
A. Internal Control Findings -

## U.S. DEPARTMENT OF JUSTICE

2022-003 Distribution of Allocable Costs
Fiscal year finding initially occurred: 2021
Crime Victim Assistance (16.575)
2019-V2-GX-0059 and 2020-V2-GX-0010
Criteria: In accordance with 2 CFR Part 230, the Organization should have a control policy to allocate costs that benefit both a federal program and other work in a manner that is reasonably proportionate to the benefits received.

Condition: The Organization had certain occupancy costs that were not being distributed in a reasonable proportion to the benefits received.

Cause: The Organization does not have a policy to distribute costs to federal programs in proportion to the benefits received.

## HEARTS OF HOPE

Lafayette, Louisiana
Schedule of Findings and Questioned Costs (Continued)
Year Ended December 31, 2022

Effect: Due to the lack of policies, the Organization has occupancy costs that are not being allocated in proportion to the benefits received. As a result, the Organization has occupancy costs that are both under and over charged to the federal program with the net effect being an under charge to the federal program.

Recommendation: The Organization should establish policies and procedures to determine an appropriate allocable base for charges that benefit more than one program in order to distribute cost based on the benefits received.

Views of Responsible Officials and Planned Corrective Action: The Organization agrees with this finding and will establish procedures to determine an appropriate basis to allocate shared costs proportionate to the benefits received by the programs. The Organization implemented an allocation based on the square footage of the facility and the number of clients being served by each program. The basis of allocation was put into place and utilized beginning August of 2022.
B. Compliance Findings -

## U.S. DEPARTMENT OF JUSTICE

## 2022-004 Distribution of Allocable Costs

Fiscal year finding initially occurred: 2021
Crime Victim Assistance (16.575)
2019-V2-GX-0059 and 2020-V2-GX-0010
See Internal Control Finding 2022-003.

# HEARTS Of HOPE <br> CENTER FOR SEXUAL TRAUMA 

We listen. We believe. We protect.

September 13, 2023

## U.S. Department of Justice

The management of Hearts of Hope respectfully submits the following corrective action plan for the year ended December 31, 2022.

## Audit conducted by:

Kolder, Slaven \& Company, LLC
183 S. Beadle Road
Lafayette, Louisiana70508
Audit Period: January 1, 2022- December 31, 2022
The findings from the December 31, 2022 schedule of findings and questioned costs are discussed below. The findings are numbered consistently with the numbers assigned in the schedule.

## FINDINGS- FINANCIAL STATEMENT AUDIT

Internal Control Finding:

## Material Weakness-

2022-001: Inadequate Segregation of Accounting Functions
Recommendation: The Organization should have a control policy according to which no person should be given responsibility for more than one related function.

Corrective Action Plan: Management will establish and monitor mitigating controls over functions that are not completely segregated.

Compliance Finding:
2022-002: Failure to File Audited Financial Statements Timely
Recommendation: In accordance with Louisiana Revised Statute 24:513, the Organization should complete and submit their audit of the financial statements within six months of the close of their fiscal year to the Legislative Auditor's office.

Corrective Action Plan: The Organization's management will take the appropriate actions to ensure that their annual financial statement audit is completed and submitted within the prescribed deadline.

## FINDINGS- FEDERAL AWARD PROGRAMS AUDIT

Internal Control Finding:

## U.S. DEPARTMENT OF JUSTICE

Significant Deficiency-
Crime Victim Assistance (16.575)

## 2022-003 Distribution of Allocable Costs

Recommendation: In accordance with 2 CFR Part 230, the Organization should have a control policy to allocate costs that benefit both a federal program and other work in a manner that is reasonably proportionate to the benefits received.

Corrective Action Plan: The Organization agrees with this finding and will establish procedures to determine an appropriate basis to allocate shared costs proportionate to the benefits received by the programs. The organization implemented an allocation based on the square footage of the facility and the number of clients being served by each program. This basis of allocation was put into place and utilized beginning August of 2022.

Compliance Finding:

## U.S. DEPARTMENT OF JUSTICE

Crime Victim Assistance (16.575)
2022-004 Distribution of Allocable Costs
See Internal Control Finding 2022-003.

The findings noted above will be evaluated and corrective action will be taken as indicated on the respective finding. Should any federal or state pass-through agencies have questions regarding this plan, please contact Kimberly Young, Executive Director at 337-2691557.


HEARTS Of HOPE
CENTER FOR SEXUAL TRAUMA

We listen. We believe. We protcet.
Hearts of Hope
Summary Schedule of Prior Year Audit Findings
For the Year Ended December 31, 2022

## FINDINGS - FINANCIAL STATEMENT AUDIT:

A. Internal Control Findings -

2021-001 Inadequate Segregation of Accounting Functions
Condition: The Organization did not have adequate segregation of duties within the accounting functions.

Views of Responsible Officials and Planned Corrective Action: Due to the size of the operations and the cost-benefit of additional personnel, it may not be feasible to achieve complete segregation of duties. Management will continue to monitor mitigating controls over accounting functions that are not completely segregated.

Current Status: Not resolved. See Internal Control Finding 2022-001.
B. Compliance Finding:

2021-002 Failure to File Audited Financial Statements Timely
Condition: The Organization's annual audited financial statements were not filed timely for the fiscal year ended December 31, 2021.

Views of Responsible Officials and Planned Corrective Action: The Organization's management will take the appropriate actions to ensure that their annual financial statement audit is completed and submitted within the prescribed deadline.

Current Status: Not resolved. See Compliance Finding 2022-002.

FINDINGS - FEDERAL AWARD PROGRAMS AUDIT
A. Internal Control Findings -
U.S. DEPARTMENT OF JUSTICE:

2021-003 Distribution of Allocable Costs

GAC \| SARC \| SANE

Condition: The Organization had certain occupancy costs that were not being distributed in a reasonable proportion to the benefits received.

Views of Responsible Officials and Planned Corrective Action: The Organization agrees with this finding and will establish procedures to determine an appropriate basis to allocate shared costs proportionate to the benefits received by the programs.

Current Status: Not resolved. See Internal Control Finding 2022-003.
B. Compliance Findings -

## U.S. DEPARTMENT OF JUSTICE:

## 2021-004 Distribution of Allocable Costs

Condition: The Organization had certain occupancy costs that were not being distributed in a reasonable proportion to the benefits received.

Views of Responsible Officials and Planned Corrective Action: The Organization agrees with this finding and will establish procedures to determine an appropriate basis to allocate shared costs proportionate to the benefits received by the programs. The Organization implemented an allocation based on square footage of the facility and the number of clients being served by each program. This basis of allocation was put into place and utilized beginning August of 2022.

Current Status: Not resolved. See Compliance Finding 2022-004.


# HEARTS OF HOPE 

Lafayette, Louisiana

## Agreed-Upon Procedures Report

Year Ended December 31, 2022

# KOLDER, SLAVEN \& COMPANY, LLC <br> CERTIFIED PUBLIC ACCOUNTANTS 

Brad E. Kolder, CPA, JD*<br>Gerald A. Thibodeaux, Jr., CPA•<br>Robert S. Carter, CPA*<br>Arthur R. Mixan, CPA*<br>Stephen J. Anderson, CPA*<br>Matthew E. Margaglio, CPA*<br>Casey L. Ardoin, CPA, CFE*<br>Wanda F. Arcement, CPA<br>Bryan K. Joubert, CPA<br>Nicholas Fowlkes, CPA<br>Deidre L. Stock, CPA<br>C. Burton Kolder, CPA*<br>Of Counsel

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| Phoni (337) 363-2792 | Phone (337) 639-4737 |

Victor R. Slaven, CPA" - retired 2020
Christine C. Doucet, CPA - retired 2022

- A Protessional Accounting Corporalion


## INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

Hearts of Hope and the Louisiana Legislative Auditor

We have performed the procedures enumerated below on the control and compliance (C/C) areas identified in the Louisiana Legislative Auditor's (LLA's) Statewide Agreed-Upon Procedures (SAUPs) for the fiscal period January 1, 2022 through December 31, 2022. Hearts of Hope's management is responsible for those $\mathrm{C} / \mathrm{C}$ areas identified in the SAUPs.

Hearts of Hope has agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of the engagement, which is to perform specified procedures on the $\mathrm{C} / \mathrm{C}$ areas identified in LLA's SAUPs for the fiscal period January 1, 2022 through December 31, 2022. Additionally, LLA has agreed to and acknowledged that the procedures performed are appropriate for its purposes. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes.

The procedures and associated findings are as follows:

## Written Policies and Procedures

1. We obtained and inspected Hearts of Hope's written policies and procedures and observed that they address each of the following categories and subcategories if applicable to public funds and the operations:
a) Budgeting, including preparing, adopting, monitoring, and amending the budget.
b) Purchasing, including (1) how purchases are initiated; (2) how vendors are added to the vendor list; (3) the preparation and approval process of purchase requisitions and purchase orders; (4) controls to ensure compliance with the Public Bid Law; and (5) documentation required to be maintained for all bids and price quotes.
c) Disbursements, including processing, reviewing, and approving.
d) Receipts/Collections, including receiving, recording, and preparing deposits. Also, policies and procedures should include management's actions to determine the completeness of all collections for each type of revenue or agency fund additions (e.g. periodic confirmation with outside parties, reconciliation to utility billing after cutoff procedures, reconciliation of traffic ticket number sequences, agency fund forfeiture monies confirmation).
e) Payrol/Personnel, including (1) payroll processing, (2) reviewing and approving time and attendance records, including leave and overtime worked, and (3) approval process for employee(s) rate of pay or approval and maintenance of pay rate schedules.
f) Contracting, including (1) types of services requiring written contracts, (2) standard terms and conditions, (3) legal review, (4) approval process, and (5) monitoring process.
g) Travel and expense reimbursement, including (1) allowable expenses, (2) dollar thresholds by category of expense, (3) documentation requirements, and (4) required approvers.
h) Credit Cards (and debit cards, fuel cards, purchase cards, if applicable), including (1) how cards are to be controlled, (2) allowable business uses, (3) documentation requirements, (4) required approvers of statements, and (5) monitoring card usage (e.g., determining the reasonableness of fuel card purchases).
i) Ethics, including (1) the prohibitions as defined in Louisiana Revised Statute 42:1111-1121, (2) actions to be taken if an ethics violation takes place, (3) system to monitor possible ethics violations, and (4) a requirement that documentation is maintained to demonstrate that all employees and officials were notified of any changes to the entity's ethics policy.
j) Debt Service, including (1) debt issuance approval, (2) continuing disclosure/EMMA reporting requirements, (3) debt reserve requirements, and (4) debt service requirements.
k) Disaster Recovery/Business Continuity, including (1) identification of critical data and frequency of data backups, (2) storage of backups in separate physical location isolated from the network, (3) periodic testing/verification that backups can be restored, (4) use of antivirus software on all systems, (5) timely application of all available system and software patches/updates, and (6) identification of personnel, processes, and tools needed to recover operations after a critical event.
1) Prevention of Sexual Harassment, including R.S. 42:342-344 requirements for (1) agency responsibilities and prohibitions, (2) annual employee training, and (3) annual reporting.

## Board or Finance Committee

2. Obtain and inspect the board/finance committee minutes for the fiscal period, as well as the board's enabling legislation, charter, bylaws, or equivalent document in effect during the fiscal period, and
a) Observe that the board/finance committee met with a quorum at least monthly, or on a frequency in accordance with the board's enabling legislation, charter, bylaws, or other equivalent document.
b) Observe that the minutes referenced or included financial activity relating to public funds if those public funds comprised more than $10 \%$ of the entity's collections during the fiscal period.
c) For governmental entities, obtain the prior year audit report and observe the unassigned fund balance in the General Fund. If the General Fund had a negative ending unassigned fund balance in the prior year audit report, observe that the minutes for at least one meeting during the fiscal period referenced or included a formal plan to eliminate the negative unrestricted fund balance in the General Fund.
d) Observe whether the board/finance committee received written updates of the progress of resolving audit finding(s), according to management's corrective action plan at each meeting until the findings are considered fully resolved.

## Bank Reconciliations

3. Obtain a listing of the entity's bank accounts for the fiscal period from management and management's representation that the listing is complete. Ask management to identify the main operating account. Select the entity's main operating account and randomly select 4 additional accounts (or all accounts if less than 5). Randomly select one month from the fiscal period, obtain and inspect the corresponding bank statement and recouciliation for selected accounts, and observe that:
a) Bank reconciliations included evidence that they were prepared within 2 months of the related statement closing date (e.g., initialed and dated, electronically logged);
b) Bank reconciliations included evidence that a member of management/board member who does not handle cash, post ledgers, or issue checks has reviewed each bank reconciliation (e.g., initialed and dated, electronically logged); and
c) Management has documentation reflecting that it has researched reconciling items that have been outstanding for more than 12 months from the statement closing date, if applicable.

## Collections (excluding electronic fund transfers)

4. Obtain a listing of deposit sites for the fiscal period where deposits for cash/checks/money orders (cash) are prepared and management's representation that the listing is complete. Randomly select 5 deposit sites (or all deposit sites if less than 5).
5. For each deposit site selected, obtain a listing of collection locations and management's representation that the listing is complete. Randomly select one collection location for each deposit site (i.e. 5 collection locations for 5 deposit sites), obtain and inspect written policies and procedures relating to employee job duties (if no written policies or procedures, inquired of employees about their job duties) at each collection location, and observe that job duties are properly segregated at each collection location such that:
a) Employees that are responsible for cash collections do not share cash drawers/registers;
b) Each employee responsible for collecting cash is not responsible for preparing/making bank deposits, unless another employee/official is responsible for reconciling collection documentation (e.g. pre-numbered receipts) to the deposit;
c) Each employee responsible for collecting cash is not responsible for posting collection entries to the general ledger or subsidiary ledgers, unless another employee/official is responsible for reconciling ledger postings to each other and to the deposit; and
d) The employee(s) responsible for reconciling cash collections to the general ledger and/or subsidiary ledgers, by revenue source and/or agency fund additions are not responsible for collecting cash, unless another employee verifies the reconciliation.
6. Obtain from management a copy of the bond or insurance policy for theft covering all employees who have access to cash. Observe the bond or insurance policy for theft was enforced during the fiscal period.
7. Randomly select two deposit dates for each of the 5 bank accounts selected for procedure \#3 under "Bank Reconciliations" above (selected the next deposit date chronologically if no deposits were made on the dates randomly selected and randomly select a deposit if multiple deposits are made on the same day). Alternately, the practitioner may use a source document other than bank statements when selecting the deposit dates for testing, such as a cash collection log, daily revenue report, receipt book, etc. Obtained supporting documentation for each of the 10 deposits and:
a) Observe that receipts are sequentially pre-numbered.
b) Trace sequentially pre-numbered receipts, system reports, and other related collection documentation to the deposit slip.
c) Trace the deposit slip total to the actual deposit per the bank statement.
d) Observe that the deposit was made within one business day of receipt at the collection location (within one week if the depository is more than 10 miles from the collection location or the deposit is less than $\$ 100$ and the cash is stored securely in a locked safe or drawer).
e) Trace the actual deposit per the bank statement to the general ledger.

## Non-Payroll Disbursements (excluding card purchases/payments, travel reimbursements, and petty cash purchases)

8. Obtain a listing of locations that process payments for the fiscal period and management's representation that the listing was complete. Randomly select 5 locations (or all locations if less than 5).
9. For each location selected under \#8 above, obtain a listing of those employees involved with nonpayroll purchasing and payment functions. Obtain written policies and procedures relating to employee job duties (if the agency has no written policies and procedures, inquire of employees about their job duties), and observe that job duties are properly segregated such that
a) At least two employees are involved in initiating a purchase request, approving a purchase, and placing an order/making the purchase;
b) At least two employees are involved in processing and approving payments to vendors;
c) The employee responsible for processing payments is prohibited from adding/modifying vendor files, unless another employee is responsible for periodically reviewing changes to vendor files;
d) Either the employee/official responsible for signing checks mails the payment or gives the signed checks to an employee to mail who is not responsible for processing payments; and
e) Only employees/officials authorized to sign checks approve the electronic disbursement (release) of funds, whether through automated clearinghouse (ACH), electronic funds transfer (EFT), wire transfer, or some other electronic means.
10. For each location selected under \#8 above, obtain the entity's non-payroll disbursement transaction population (excluding cards and travel reimbursements) and obtain management's representation that the population is complete. Randomly select 5 disbursements for each location, obtain supporting documentation for each transaction, and
a) Observe whether the disbursement matched the related original itemized invoice and supporting documentation indicates deliverables included on the invoice were received by the entity, and
b) Observe that the disbursement documentation includes evidence (e.g., initial/date, electronic logging) of segregation of duties tested under \#9, as applicable.
11. Using the entity's main operating account and the month selected in Bank Reconciliations procedure \#3A, randomly select 5 non-payroll-related electronic disbursements (or all electronic disbursements if less than 5) and observe that each electronic disbursement was (a) approved by only those persons authorized to disburse funds (e.g., sign checks) per the entity's policy, and (b) approved by the required number of authorized signers per the entity's policy. Note: If no electronic payments were made from the main operating account during the month selected the practitioner should select an alternative month and/or account for testing that does include electronic disbursements.
12. Obtain from management a listing of all active credit cards, bank debit cards, fuel cards, and purchase cards (cards) for the fiscal period, including the card numbers and the names of the persons who maintained possession of the cards. Obtain management's representation that the listing is complete.
13. Using the listing prepared by management, randomly select 5 cards (or all cards if less than 5 ) that were used during the fiscal period. Randomly select one monthly statement or combined statement for each card (for a debit card, randomly select one monthly bank statement), obtain supporting documentation, and
a) Observe that there is evidence that the monthly statement or combined statement and supporting documentation (e.g., original receipts for credit/debit card purchases, exception reports for excessive fuel card usage) was reviewed and approved, in writing (or electronically approved), by someone other than the authorized card holder, and
b) Observe that finance charges and late fees were not assessed on the selected statements.
14. Using the monthly statements or combined statements selected under \#12 above, excluding fuel cards, randomly select 10 transactions (or all transactions if less than 10) from each statement, and obtain supporting documentation for the transactions (i.e. each card should have 10 transactions subject to testing). For each transaction, observe that it is supported by (1) an original itemized receipt that identifies precisely what was purchased, (2) written documentation of the business/public purpose, and (3) documentation of the individuals participating in meals (for meal charges only). For missing receipts, describe the nature of the transaction and noted whether management had a compensating control to address missing receipts, such as a "missing receipt statement" that is subject to increased scrutiny.

## Travel and Travel-Related Expense Reimbursements (excluding card transactions)

15. Obtain from management a listing of all travel and travel-related expense reimbursements during the fiscal period and management's representation that the listing or general ledger is complete. Randomly select 5 reimbursements, obtain the related expense reimbursement forms/prepaid expense documentation of each selected reimbursement, as well as the supporting documentation. For each of the 5 reimbursements selected
a) If reimbursed using a per diem, observe the approved reimbursement rate is no more than those rates established either by the State of Louisiana or the U.S. General Services Administration (www.gsa.gov);
b) If reimbursed using actual costs, observe that the reimbursement is supported by an original itemized receipt that identifies precisely what was purchased;
c) Observe that each reimbursement is supported by documentation of the business/public purpose (for meal charges, observe that the documentation includes the names of those individuals participating) and other documentation required by written policy (procedure \#1h); and
d) Observe that each reimbursement was reviewed and approved, in writing, by someone other than the person receiving reimbursement.

## Contracts

16. Obtain from management a listing of all agreements/contracts for professional services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period. Alternately, the practitioner mayy use an equivalent selection source, such as an active vendor list. Obtain management's representation that the listing is complete. Randomly select 5 contracts (or all contracts if less than 5) from the listing, excluding the practitioner's contract and
a) Observe that the contract was bid in accordance with the Louisiana Public Bid Law (e.g., solicited quotes or bids, advertised), if required by law;
b) Observe that the contract was approved by the governing body/board, if required by policy or law (e.g., Lawrason Act, Home Rule Charter);
c) If the contract was amended (e.g., change order), observe that the original contract terms provided for such an amendment and that amendments were made in compliance with the contract terms (e.g., if approval is required for any amendment, was approval documented); and
d) Randomly select one payment from the fiscal period for each of the 5 contracts, obtain the supporting invoice, agree the invoice to the contract terms, and observe that the invoice and related payment agreed to the terms and conditions of the contract.

## Payroll and Personnel

17. Obtain a listing of employees/elected officials employed during the fiscal period and management's representation that the listing is complete. Randomly select 5 employees/officials, obtain related paid salaries and personnel files, and we agree paid salaries to authorized salaries/pay rates in the personnel files.
18. Randomly select one pay period during the fiscal period. For the 5 employees/officials selected under \#16 above, obtain attendance records and leave documentation for the pay period, and
a) Observe that all selected employees/officials documented their daily attendance and leave (e.g., vacation, sick, compensatory). (Note: Generally, an elected ofticial is not eligible to earn leave and does not document his/her attendance and leave. However, if the elected official is earning leave according to policy and/or contract, the official should document his/her daily attendance and leave.);
b) Observe that supervisors approved the attendance and leave of the selected employees/officials;
c) Observe that any leave accrued or taken during the pay period is reflected in the entity's cumulative leave records; and
d) Observe the rate paid to the employees or officials agree to the authorized salary/pay rate found within the personnel file.
19. Obtain a listing of those employees/officials that received termination payments during the fiscal period and management's representation that the list is complete. Randomly select two employees/officials, obtain related documentation of the hours and pay rates used in management's termination payment calculations and the entity's policy on termination payments. Agree the hours to the employee or officials' cumulate leave records, agree the pay rates to the employee/officials' authorized pay rates in the employee or officials' personmel files, and agree the termination payment to entity policy.
20. Obtain management's representation that employer and employee portions of third-party payroll related amounts (e.g., payroll taxes, retirement contributions, health insurance premiums, garnishments, workers' compensation premiums, etc.) have been paid, and any associated forms have been filed, by required deadlines.

## Ethics

21. Using the 5 randomly selected employees/officials from procedure \#16 under "Payroll and Personnel" above, obtain ethics documentation from management, and
a) Observe that the documentation demonstrates each employee/official completed one hour of ethics training during the calendar year as required by R.S. 42:1170; and
b) Observe whether the entity maintains documentation which demonstrates each employee and official were notified of any changes to the entity's ethics policy during the fiscal period, as applicable.
22. Inquire and/or observe whether the agency has appointed an ethics designee as required by R.S. 42:1170.

## Debt Service

23. Obtain a listing of bonds/notes and other debt instruments issued during the fiscal period and management's representation that the listing is complete. Select all debt instruments on the listing, obtain supporting documentation, and observe that State Bond Commission approval was obtained for each debt instrument issued as required by Article VII, Section 8 of the Louisiana Constitution.
24. Obtain a listing of bonds/notes outstanding at the end of the fiscal period and management's representation that the listing is complete. Randomly select one bond/note, inspect debt covenants, obtain supporting documentation for the reserve balance and payments, and agree actual reserve balances and payments to those required by debt covenants (including contingency funds, short-lived asset funds, or other funds required by the debt covenants).

## Fraud Notice

25. Obtain a listing of misappropriations of public funds and assets during the fiscal period and management's representation that the listing was complete. Select all misappropriations on the listing, obtain supporting documentation, and observe that the entity reported the misappropriation(s) to the legislative auditor and the district attorney of the parish in which the entity is domiciled.
26. Observe that the entity has posted on its premises and website, the notice required by R.S. 24:523.1 concerning the reporting of misappropriation, fraud, waste, or abuse of public funds.

## Information Technology Disaster Recovery/Business Continuity

27. We performed the following procedures, verbally discussed the results with management, and reported "We performed the procedure and discussed the results with management."
a) Obtain and inspect the entity's most recent documentation that it has backed up its critical data (if no written documentation, inquire of personnel responsible for backing up critical data) and observe that such backup (a) occurred within the past week, (b) was not stored on the government's local server or network, and (c) was encrypted.
b) Obtain and inspect the entity's most recent documentation that it has tested/verified that its backups can be restored (if no written documentation, inquire of personnel responsible for testing/verifying backup restoration) and observe evidence that the test/verification was successfully performed within the past 3 months.
c) Obtain a listing of the entity's computers currently in use and their related locations, and management's representation that the listing is complete. Randomly select 5 computers and observe while management demonstrates that the selected computers have current and active antivirus software and that the operating system and accounting system software in use are currently supported by the vendor.
28. Randomly select 5 terminated employees (or all terminated employees if less than 5) using the list of terminated employees obtained in procedure \#9C. Observe evidence that the selected terminated employees have been removed or disabled from the network.
29. Using the 5 randomly selected employees/officials from procedure \#16 under "Payroll and Personnel" above, we obtained sexual harassment training documentation from management, and observed the documentation demonstrates each employee/official completed at least one hour of sexual harassment training during the calendar year as required by R.S. 42:343.
30. Observe the entity has posted its sexual harassment policy and complaint procedure on its website (or in a conspicuous location on the entity's premises if the entity does not have a website).
31. Obtain the entity's annual sexual harassment report for the current fiscal period, observe that the report was dated on or before February 1, and observe it includes the applicable requirements of R.S. 42:344:
a) Number and percentage of public servants in the agency who have completed the training requirements;
b) Number of sexual harassment complaints received by the agency;
c) Number of complaints which resulted in a finding that sexual harassment occurred;
d) Number of complaints in which the finding of sexual harassment resulted in discipline or corrective action; and
e) Amount of time it took to resolve each complaint.

## Exceptions:

No exceptions were found as a result of applying the procedures listed above except:

## Written Policies and Procedures

1. The Organization's written policies do not address the following: (a) Budgeting - monitoring the budget and amending the budget; (b) Purchasing - how purchases are initiated, how vendors are added to the vendor list, the preparation and approval process of purchase requisitions and purchase orders, controls to ensure compliance with the Public Bid Law, and documentation required to be maintained for all bids and price quotes; (c) Receipts - management's actions to determine completeness of all collections for each type of revenue or agency fund addition; (d) Payroll payroll processing and the approval process for employees' rate of pay or approval and maintenance of pay rate schedules; (e) Contracting - types of services requiring written contracts, standard terms and conditions, legal review, approval process, and monitoring process; (f) Credit Cards - how cards are to be controlled, allowable business uses, documentation requirements, required approvers of statements, and monitoring card usage; (g) Travel and expense reimbursements - dollar threshold by category of expense and required approvers; (h) Disaster Recovery/Business Continuity - identification of critical data and frequency of backups, storage of backups in a separate physical location isolated from the network, periodic testing/verification that backups can be restored, use of antivirus software on all systems, timely application of all available system and software patches/updates, and identification of personnel, processes, and tools needed to recover operations after a critical event.

Management's response: Management will review their policies and procedures and update the relevant sections.

## Board

2. Hearts of Hope's Board did not receive written updates of the progress of resolving audit finding(s), at each meeting until the findings are considered fully resolved.
Management's response: The Board will receive written updates of the progress of resolving audit finding(s), at each meeting until the findings are considered fully resolved.

## Collections

3. All the deposits tested did not use sequentially pre-numbered receipts.

Management's response: Management will use sequentially pre-numbered receipts.
4. All the deposits tested did not have indication of the deposit being made timely.

Management's response: Management will document receipt of payment and will implement a policy that all collections be deposited not more than one day after collection.
5. Hearts of Hope did not have a bond or insurance policy for theft covering all employees who have access to cash.

Management's response: Hearts of Hope will obtain a bond or insurance policy for theft covering all employees who have access to cash.

## Disbursements

6. One of five disbursements tested did not have indication that deliverables included on the invoices were received by the entity.

Management's response: Hearts of Hope will ensure all disbursements indicate the deliverables included on the invoices were received by the entity.

## Credit Cards

7. The combined statement and supporting documentation were not reviewed and approved in writing by someone other than the authorized cardholder.

Management's response: Management will have someone other than the authorized card bolder review and approve, in writing, monthly credit card statements and supporting documentation.

We were engaged by Hearts of Hope to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable standards of Government Auditing Standards. We were not engaged to and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on those $\mathrm{C} / \mathrm{C}$ areas identified in the SAUPs. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of Hearts of Hope and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our agreed-upon procedures engagement.

This report is intended solely to describe the scope of testing performed on those $\mathrm{C} / \mathrm{C}$ areas identified in the SAUPs, and the result of that testing, and not to provide an opinion on control or compliance. Accordingly, this report is not suitable for any other purpose. Under Louisiana Revised Statute $24: 513$, this report is distributed by the LLA as a public document.

Kolder, Slaven \& Company, LLC

Certified Public Accountants

Lafayette, Louisiana
September 13, 2023


[^0]:    We are required to be independent of the Organization and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of Organization's compliance with the compliance requirements referred to above.

