

Updated: 05/2023

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

Entity Name: New Orleans Ballet T	heatre			
Address: 1213 Marengo Street, Ne	ew Orleans, Louisiana 70115			
Telephone: (504)826-0646	Email: n.o.ballettheatre@gmail.com			
the end of the entity's fiscal year by sending	equired to be filed with the Legislative Auditor within 90 days of g a pdf copy by email to <u>ereports@lla.la.gov</u> , faxing to 225-339-e Auditor – Local Government Services, P.O. Box 94397, Baton			
	AFFIDAVIT			
Personally came and appeared before the u	andersigned authority, Lisa Keller MacCurdy (officer's			
name), who, duly sworn, deposes and says that the financial statements herewith given present fairly, in all				
material respects, the financial position of New Orleans Ballet Theatre (entity's name) as				
of December 31, 2022 (entity's year-entity)	end) and the results of operations for the year then ended, in			
accordance with the basis of accounting described within the accompanying financial statements; that the				
entity has maintained a system of internal control structure sufficient to safeguard assets and comply with				
su n/a	tity has complied with all laws and regulations, except as			
Complete if Applicable: In addition,	(officer's name), who duly sworn,			
	(entity's name) received \$75,000 or less			
	ended(entity's year-end), and accordingly,			
of of the present	Executive Director OFFICER'S TITLE			
Sworn to and subscribed before me, this _	29 day of June, 2023			
NOTARY PUBLIC SIGNATURE	AGUILAR PUBLICATION AGUILA			
Sworn Financial Statement	Undated: 05/2023			

Entity Name: New Orleans Ballet Theatre Fiscal Year End: December 31, 2022

Statement of Receipts and Disbursements Statement A General Other Fund Fund Total **RECEIPTS (Provide Brief Description):** Contributions \$ 36,412.87 \$ 36,412.87 2. \$ 52,930.00 Grants \$ 52,930.00 3 \$ 663,380.25 Program Service Revenue \$ 663,380.25 Realized Gains on Investments (Dividends and Interest) \$ 356.64 \$ 356.64 -\$ 19,073.63 Unrealized Losses on Investments -\$ 19.073.63 6. Total receipts (add lines 1 - 5) \$ 734,006.13 \$ 0.00 \$ 734,006.13 **DISBURSEMENTS (Provide Brief Description):** General and administrative \$ 133,485.14 \$ 133,485.14 8 **Production Costs** \$ 216,075.45 \$ 216,075.45 Salaries and Progessional Fees (Dancers) \$ 246,939.44 \$ 246,939.44 10. Fundraiser \$ 4,111.59 \$ 4,111.59 11. Supplies \$ 5,591.55 \$ 5,591.55 12 \$ 12,282.02 \$ 12,282.02 Travel and Misc \$ 618,485.19 13. Total Disbursements (add lines 7 - 12) \$ 0.00 \$ 618,485.19 14. Change in fund balance (Lines 6 minus 13) \$ 115,520.94 \$ 0.00 \$ 115,520.94 15. Fund Balance at beginning of year \$ 1,328,304.00 \$ 1,328,304.00 16. Fund balance (deficit) at end of year (Add lines 14-15) \$ 1,443,824.94 \$ 0.00 \$ 1,443,824,94 -This amount also goes on line 12, Statement B

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

NOTE: If the entity receives any funds from pre- or post-adjudication court costs, fines, and/or fees, the entity must use one or more of the following categories in the receipts description fields: Civil Fees; Bond Fees; Asset Forfeiture/Sale; Pre-Trial Diversion Program; Criminal Court Costs/Fees; Criminal Contempt Fines; Other Criminal Fines; Restitution; and Probation/Parole/Supervision Fees.

Sworn Financial Statement Updated: 05/2023

Fiscal Year End: December 31, 2022

Balance Sheet

Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)			
Cash and cash equivalents			
	\$ 343,520.65		\$ 343,520.65
Investments (fair value)			
	\$ 1,100,304.29		\$ 1,100,304.29
Office furnishings (Cost of desks, etc)			
			\$ 0.00
4. Equipment (Cost of fax machine, etc)			
			\$ 0.00
5. Other (brief description)			
the second territory			\$ 0.00
6. Total Assets (add lines 1 - 5)	\$ 1,443,824.94	\$ 0.00	\$ 1,443,824.94
LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description):			\$ 0.00
8.			***
			\$ 0.00
9.			\$ 0.00
10.		· · · · · · · · · · · · · · · · · · ·	-
			\$ 0.00
11. Total Liabilities (add lines 7 - 10)			
The Total Elabilities (against 19)	\$ 0.00	\$ 0.00	\$ 0.00
12. Fund balance (amount from Line 16 on Statement A)			V 3.33
12. I did balance (amount nom 2.110 to on otalometry)	\$ 1,443,824.94	\$ 0.00	\$ 1,443,824.94
13. Other			
			\$ 0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 1,443,824.94	\$ 0.00	\$ 1,443,824.94

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title: Gregory Schramel, Artistic Director

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

Please check here if the Agency Head does not receive any compensation, benefits, and other payments. (Act 462 of the 2015 Legislative Session allows nongovernmental entities or not-for-profit (quasi-public) entities to report on the Act 706 schedule only those payments to the agency head that are derived from the public funds.)

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