Entity Name: ____Louisiana Wildlife and Fisheries Foundation

Address: P.O. Box 80378

Telephone: (225) 765-5100 Email: mfox@lawff.org

This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to <u>ereports@lla.la.gov</u>, faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor – Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397.

AFFIDAVIT

Personally came and appeared before the undersigned authority, <u>Melissa Fox</u> (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 <u>Lowissiona Witdlife and Fisherics Foundation</u> (entity's name) as of <u>2022</u> (entity's year-end) and the results of operations for the year then ended, in accordance with the basis of accounting described within the accompanying financial statements; that the entity has maintained a system of internal control structure sufficient to safeguard assets and comply with laws and regulations; and that the entity has complied with all laws and regulations, except as follows:

<u>Complete if Applicable:</u> In addition, <u>Melissa Fox</u> (officer's name), who duly sworn, deposes, and says that <u>Louisiana Wildlife à Fisheries Foundation</u> (entity's name) received \$75,000 or less in revenues and other sources for the year ended <u>2021</u> (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

OFFICER'S SIGNATURE

	DLC
Executive	Lirector
OFFICER'S TITLE	

Sworn to and subscribed before me, this 3 day of March	. 2023
State Contraction	
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NOFARY PUBLIC SIGNATURE & SEAL	
# 32009	

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Statement of Receipts and Disbursements

Statement A

General Fund		Other Fund		Total		
RECEIPTS (Provide Brief Description):						
1.Contributions	\$	30,912	\$	-	\$	30,912
2.Contributions – Board		21,300		12		21,300
3.Administration Fees		87,477				87,477
4.Grants		3 <u>2</u>		-		-
5.Program Revenue				965,441		965,441
6.Project Revenue		178,600		-		178,600
7. Lease Income	20476	27,800		-		27,800
8.Paycheck Protection Program		-		1. .		-
9. Investment Income		(131,476)		200	(131,476)
10.State and Local		1,155		26,954		28,109
11. Total receipts	\$	215,768	\$	992,395	\$1	,208,163
DISBURSEMENTS (Provide Brief Description):						
12.Project Expenses	\$	-	\$	664,366	\$	664,366
13.Program Expenses		119,710		-	_	119,710
14.Salaries		147,167		-		147,167
15.Operating Expenses		111,829		-		111,829
16.Transfers	and a first second	(4,021)		4,021		
17. Total Disbursements	\$	374,685	\$	668,387	\$1	,043,072
18. Change in fund balance	\$	(158,917)	\$	324,008	\$	165,091
19. Fund Balance at beginning of year		2,693,823		2,703,624		,397,447
20. Fund balance (deficit) at end of year This amount also goes on line 12, Statement B	\$	2,534,906	-		onen Mere	ne telest / measu

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

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

Balance Sheet

Statement B

		General Fund	Other Fund	Total	
ASSETS (balances at year-end)	•		¢ 4 505 070	ф4 г	05 070
1. Cash and cash equivalents	\$	-	\$ 1,535,679		35,679
2. Investments (fair value)		1,074,365	1,491,953	2,5	66,318
Equipment (Cost of fax machine, etc)		504	-	-	504
Other – Accounts receivable		12,840	-		12,840
5. Other – Prepaid assets		-	-		-
6. Other – Real Estate		1,472,800	-	1,4	72,800
7. Total Assets (add lines 1 - 6)	\$	2,560,509	\$ 3,027,632	\$5,5	88,141
LIABILITIES AND FUND BALANCE (at year-end): 8. Liabilities (brief description):	\$	22,738	<u>¢</u>	\$	22,738
9. Accounts payable	\$	22,130	φ -	φ	22,130
10. Deferred revenue		-		S M	-
11.Payroll tax withheld		865			865
12 Deposits		2,000	-	2 <u></u>	2,000
13. Total Liabilities (add lines 8 - 12)		25,603	-		25,603
14. Fund balance (amount from Line 20 on Statement A)		2,534,906	3,027,632	5,5	562,538
15. Other		2 17 .	-		-
	\$		\$ 3,027,632	AC 1	

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Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name and Title: Louisiana Wildlife and Fisheries Foundation

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

<u>x</u> 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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