

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

| Entity Name: CoHabiatat Foundation, Inc. | | | | |
|--|--|--|--|--|
| Address: 717 Crockett St. Suite 203 Shreveport, LA 71101 | | | | |
| Telephone: 318-540-3394 Email: Jessica@cohab.org | | | | |
| This annual sworn financial statement is required to be filed with the Legislative Auditor within 90 days of the end of the entity's fiscal year by sending a pdf copy by email to ereports@lla.la.gov , faxing to 225-339-3986, or mailing to Louisiana Legislative Auditor — Local Government Services, P.O. Box 94397, Baton Rouge, LA 70804-9397. | | | | |
| AFFIDAVIT | | | | |
| Personally came and appeared before the undersigned authority, <u>Jessica Schiele</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 CoHabiatat Foundation, Inc. (entity's name) as of (entity's year-end) and the results of operations for the year then ended, in | | | | |
| accordance with the basis of accounting described within the accompanying financial statements; that the | | | | |
| entity has maintained a system of internal control structure sufficient to safeguard assets and comply with | | | | |
| laws and regulations; and that the entity has complied with all laws and regulations, except as | | | | |
| follows: | | | | |
| Complete if Applicable: In addition, Jessica Schiele (officer's name), who duly sworn, deposes, and says that CoHabitat Foundation (entity's name) received \$75,000 or less | | | | |
| in revenues and other sources for the year ended 2024 (entity's year-end), and accordingly, | | | | |
| is not required to have an audit for the previously mentioned fiscal year. | | | | |
| Jeasica Nicole Schiele Executive Director | | | | |
| OFFICER'S SIGNATURE OFFICER'S TITLE | | | | |
| Sworn to and subscribed before me, this 25th day of April , 2025 State of Nevada, Clark County Vickey Beglari NOTARY PUBLIC SIGNATURE NOTARY PUBLIC SIGNATURE NOTARY PUBLIC SIGNATURE Expires August 25, 2027 | | | | |

| Entity Name | CoHabiatat Foundation, Inc. | Fiscal Year End: | 2024 | |
|------------------|-----------------------------|---------------------|------|--|
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Statement of Receipts and Disbursements Statement A General Other Fund Fund Total **RECEIPTS** (Provide Brief Description): <u>\$ 25,000.00</u> <u>\$ 25,000</u>.00 Government Contracts 2. Business & Individual Contributions \$ 4,805.65 \$ 4,805.65 _____ \$ 91,428.71 \$ 91,428.71 Foundation & Non-Profit Grants 4. Interest Income \$ 80.56 \$ 80.56 5. \$ 44,678.63 \$ 31,300.0(\$ 75,978.63 Other Income 6. Total receipts (add lines 1 - 5) \$ 49,564.84 \$ 147,728.7 \$ 197,293.55 **DISBURSEMENTS** (Provide Brief Description): Program Services \$ 131,275.16 \$ 131,275.16 \$ 57,057.80 \$ 57,057.80 General and Administrative Net Assetts Released from Restrictions -\$ 147,728.7' \$ 147,728.7 \$ 0.00 10 \$ 0.00 11. \$ 0.00 12. \$ 0.00 \$ 40,604.25 \$ 147,728.7 \$ 188,332.96 13. **Total Disbursements** (add lines 7 - 12) 14. Change in fund balance (Lines 6 minus 13) \$ 8,960.59 \$ 0.00 \$ 8,960.59 15. Fund Balance at beginning of year \$ 134,023.94 _____ \$ 134,023.94 16. Fund balance (deficit) at end of year (Add lines 14-15) \$ 142,984.53 \$ 0.00 \$ 142,984.53 --This amount also goes on line 12. Statement B

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

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

Sworn Financial Statement Updated: 08/07/2023

Entity Name: CoHabiatat Foundation, Inc. Fiscal Year End: 2024

Balance Sheet <u>Statement B</u>

| | General Fund | Other Fund | Total |
|---|---------------------|---------------|---------------------|
| ASSETS (balances at year-end) | | | |
| Cash and cash equivalents | | | |
| | \$ 35,720.08 | | \$ 35,720.08 |
| 2. Investments (fair value) | | | |
| | \$ 2,477.00 | | \$ 2,477.00 |
| 3. Office furnishings (Cost of desks, etc) | ¢ 470 000 70 | | Ф 470 OOC 70 |
| A Facility and (Ocat of facility and bigs atta) | \$ 173,086.73 | | \$ 173,086.73 |
| 4. Equipment (Cost of fax machine, etc) | | | \$ 0.00 |
| 5. Other (brief description) | £ 2,000,00 | | |
| | \$ 3,000.00 | | \$ 3,000.00 |
| 6. Total Assets (add lines 1 - 5) | \$ 214,283.81 | \$ 0.00 | \$ 214,283.81 |
| LIABILITIES AND FUND BALANCE (at year-end): 7. Liabilities (brief description): | 4.0.407.00 | | * • 407.00 |
| Credit Card Payable | \$ 8,187.68 | | \$ 8,187.68 |
| 8. | A 440 000 00 | | A.440.000.00 |
| Government Loans | \$ 113,300.00 | | \$ 113,300.00 |
| 9. | | | \$ 0.00 |
| 10. | · | | |
| 44 Tatal Linkilitian (addition 7, 40) | | | \$ 0.00 |
| 11. Total Liabilities (add lines 7 - 10) | ¢ 101 107 60 | ¢ 0 00 | ¢ 101 107 60 |
| 40. Fried belonce (assessed from Line 40 as Obstances A) | \$ 121,487.68 | \$ 0.00 | \$ 121,487.68 |
| 12. Fund balance (amount from Line 16 on Statement A) | \$ 142,984.53 | \$ 0.00 | \$ 142,984.53 |
| 13. Other | ψ 142,904.55 | φ 0.00 | Φ 142,304.33 |
| | | | \$ 0.00 |
| 14. Total Liabilities and Fund Balance (add lines 11 - 13) | \$ 264,472.21 | \$ 0.00 | \$ 264,472.21 |

Sworn Financial Statement Updated: 08/07/2023

Schedule of Compensation, Benefits and Other Payments to Entity Head

| | Jessica Schiele, Executive Director | |
|--------------------------|-------------------------------------|--|
| Agency Head Name, Title: | | |

| Purpose | Dollar Amount |
|---|---------------|
| 1. Salary | \$ 65,000.00 |
| 2. Benefits-insurance | |
| 3. Benefits-retirement | |
| 4. 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) | \$ 65,000.00 |

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.)

Sworn Financial Statement Updated: 08/07/2023