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Affidavit and Revenue Certification

Tangipahoa African American Heritage Museum, VA ENTITY NAME
Tangipahoe Parish (TAAHMEVA)
Hammond, LA (City), State

ANNUAL SWORN FINANCIAL STATEMENTS AND CERTIFICATION OF REVENUES \$75,000 OR LESS (if applicable)

The annual sworn financial statements are required by Louisiana Revised Statute 24:514 to be filed with the Legislative Auditor within 90 days after the close of the fiscal year. The certification of revenues of \$75,000 or less, if applicable, is required by Louisiana Revised Statute 24:513(J)(1)(c)(i)(aa).

Personally came and appeared before the undersigned authority, Delmas A. Dunn Sr.
(enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of TAAHMEVA (enter entity name) as of 2018 (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.

(Complete if applicable)

In addition, Delmas A. Dunn Sr., (officer name), who, duly sworn, deposes and says that TAAHMEVA (entity name) received \$75,000 or less in revenues and other sources for the year ended 2018, and accordingly, is not required to have an audit for the previously mentioned year.

Delmas A. Dunn Sr.
Officer's Signature

Sworn to and subscribed before me this 17 day of APRIL, 2019.

Eric Dangerfield
NOTARY PUBLIC SIGNATURE & SEAL
ERIC DANGERFIELD ID #9193

For Office Use Only
Under provisions of state law, this report will become a public document on the Monday following the release date. A copy of the report will be submitted to appropriate public officials and be available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and, where appropriate, at the office of the parish clerk of court.
Release Date <u>MAY 01 2019</u>

Please Complete This Section
Officer's Name _____
Officer's Title _____
Address _____
City, Zip _____
Ph: Cell/Land _____
E-mail _____

TAAHMEVA

(Agency Name)

Statement of Cash Receipts and Disbursements

For the Year Ended Dec 2018

(Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. City of Hammond	\$	\$ 25,000 ⁰⁰	\$ 25,000 ⁰⁰
2. Rental Bldg	73,243 ⁰⁰		73,243 ⁰⁰
3. Fundraiser Income Other	126,601 ⁰⁰		126,601 ⁰⁰
4. Museum Revenue	31,636 ⁰⁰		31,636 ⁰⁰
5.			
6. Total receipts (add lines 1 - 5)	\$ 231,480 ⁰⁰	\$ 25,000 ⁰⁰	\$ 256,480 ⁰⁰
DISBURSEMENTS (Provide Brief Description):			
7. Operations Telephone, Office Supplies	\$ 10,227 ⁰⁰	\$	\$ 10,227 ⁰⁰
8. Insurance	17,441 ⁰⁰		17,441 ⁰⁰
9. Contract Services Acct etc	15,070 ⁰⁰		15,070 ⁰⁰
10. Pay roll	47,883 ⁰⁰		47,883 ⁰⁰
11. Taxes	4,102 ⁰⁰		4,102 ⁰⁰
12. Fundraiser Expenses	8,197 ⁰⁰		8,197 ⁰⁰
13. Total Disbursements (add lines 7 - 12)	\$ 102,920 ⁰⁰	\$ 25,000 ⁰⁰	\$ 102,920 ⁰⁰
14. Change in fund balance (Lines 6 minus 13)	\$ 128,559 ⁰⁰	\$	\$ 128,559 ⁰⁰
15. Fund Balance at beginning of year	\$ 9,551 ⁰⁰	\$	\$ 9,551 ⁰⁰
16. Fund balance (deficit) at end of year (Add lines 14-15)	\$ 138,110 ⁰⁰	\$ 25,000 ⁰⁰	\$ 138,110 ⁰⁰
--This amount also goes on line 12, Statement B			

PLEASE RETAIN A COPY OF THE COMPLETED FINANCIAL STATEMENTS FOR YOUR RECORDS

TAAHM, VA

(Agency Name)

Balance Sheet, on

Dec 2018

(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 18,541 ⁰⁰	\$	\$ 18,541 ⁰⁰
2. Investments (fair value) on hand	0		0
3. Office furnishings (Cost of desks, etc)	967,594 ⁰⁰		967,594 ⁰⁰
4. Equipment (Cost of fax machine, etc)	16,194 ⁰⁰		16,194 ⁰⁰
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	\$ 1,002,329⁰⁰	\$	\$ 1,002,329⁰⁰
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8. American Bank & Trust - Loan	\$ 303,917 ⁰⁰	\$	\$ 303,917 ⁰⁰
9. SBA - Loan	53,611 ⁰⁰		53,611 ⁰⁰
10. Account Payables	12,310 ⁰⁰		12,310 ⁰⁰
11. Total Liabilities (add lines 7 - 10)	369,838⁰⁰		369,838⁰⁰
12. Fund balance (amount from Line 16 on Statement A)	138,110 ⁰⁰		138,110 ⁰⁰
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	\$ 231,729⁰⁰	\$	\$ 231,729⁰⁰

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Please return the completed form within 90 days of your entity's year-end to Louisiana Legislative Auditor – Local Government Services; Post Office Box 94397, Baton Rouge, LA 70804-9397 – Updated 8/3/16

Tangipahoa African American Heritage Museum TAAHM, LA (Agency Name)

Schedule of Compensation, Benefits and Other Payments to Agency Head or Chief Executive Officer (Required Form - Please Submit Completed Form Per Attached Instructions)

For the Year Ended Dec 2018 (Year-End)

Agency Head Name and Title: _____

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.

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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