

Updated: 08/07/2023

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

Entity Name: Iberia Cultural Resources Association, Inc.
Address: 312 Marie Street New Iberia, LA 70563
Telephone: 337-298-7964 Email: cathy.indest@gmail.com
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 <a href="mailto:ereports@lla.la.gov">ereports@lla.la.gov</a> , 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, Cathy V. Indest (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 Iberia Cultural Resources Association, Inc. (entity's name) as
of December 31,2024 (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: N/A
Complete if Applicable: In addition, Cathy V. Indest deposes, and says that beria Cultural Resources Association, (entity's name) received \$75,000 or less
in revenues and other sources for the year ended December 31, 2024 (entity's year-end); and accordingly,
is not required to have an audit for the previously mentioned fiscal year.
OFFICER'S SIGNATURE  President OFFICER'S TITLE
Sworn to and subscribed before me, this 13 day of MARCH , 20 25
NOTARY PUBLIC SIGNATURE  OFFICIAL SEAL ANGELA L. CROCHET NOTARY ID #11316 NOTARY PUBLIC IBERIA PARISH, LA COMMISSIONED FOR LIFE  Sworn Financial Statement  Undated: 08/07/202

Sworn Financial Statement

Entity Name: Iberia Cultural Resources Association, Inc. Fiscal Year End: 12/31/2024

Statement of Receipts and Disbursements			Statement A
	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. SEE ATTACHMENT TO STATEMENT A 2.	\$ 3,850.00	125,251.00	\$ 129,101.00
			\$ 0.00
3.			\$ 0.00
4.			\$ 0.00
5.			\$ 0.00
6. Total receipts (add lines 1 - 5)	\$ 3,850.00	125,251.00	\$ 129,101.00
DISBURSEMENTS (Provide Brief Description):			
7. SEE ATTACHMENT TO STATEMENT A	\$ 23,395.00	169,650.00	\$ 193,045.00
8.			\$ 0.00
9.		•	\$ 0.00
10.		Plate Street Str	\$ 0.00
11.			\$ 0.00
12.			
13. Total Disbursements (add lines 7 - 12)	\$ 23,395.00	169,650.00	\$ 0.00
14. Change in fund balance (Lines 6 minus 13)	-\$ 19,545.00	\$ 44,399.00	-\$ 63,944.00
15. Fund Balance at beginning of year			\$ 147,149.00
16. Fund balance (deficit) at end of year (Add lines 14-15)This amount also goes on line 12, Statement B		•	\$ 83,205.00

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

IBERIA CULTURAL RESOURCES ASSOCIATION, INC.
STATEMENT OF CASH RECEIPTS AND DISBURSEMENTS-INCOME TAX BASIS - ATTACHMENT TO STATEMENT A
FOR THE YEAR ENDED 12-31-2024

	GENERAL	OTHER	
	FUND (DUES)	FUNDS	TOTAL
DUES	2,350		2,350
SALES		5,233	5,233
DONATIONS	1,500	83,142	84,642
FUNDRAISERS		13,916	13,916
SPONSORSHIP		3,000	3,000
GRANT-LA ENDOWMENT FOR THE HUMANITES		10,000	10,000
GRANT-LA OFFICE OF TOURISM		3,950	3,950
GRANT-COMMUNITY FOUNDATION		3,535	3,535
AUTHOR'S FEES		1,804	1,804
ENTRY FEES			
SALES OF BOOKS	•	671	671
TOTAL RECEIPTS	3,850	125,251	129,101
COST OF BOOKS SOLD		270	270
ADVERTISING	150	16,599	16,749
PROGRAM SERVICES	20,848	124,874	145,722
DONATIONS		3,000	3,000
INSURANCE	1,909		1,909
OFFICE MEALS		1,350	1,350
RENT		6,478	6,478
TAXES & LICENSES		•	•
POSTAGE AND PRINTING	488	16,873	17,361
BANK FEES		27	27
INTEREST EXPENSE		179	179
TOTAL DISBURSEMENTS	23,395	169,650	193,045
INCREASE (DECREASE) IN FUND BALANCE	(19,545)	(44,399)	(63,944)
FUND BALANCE BEGINNING OF YEAR	25,895	121,254	147,149
FUND BALANCE END OF YEAR	6,350	76,855	83,205

No assurance provided on these financial statements; substantially all disclosures omitted.

## **Balance Sheet**

## Statement B

	General Fund	Other Fund	Total
ASSETS (balances at year-end)	Fullu	Fund	Iotai
Cash and cash equivalents			
	\$ 6,350.00	\$ 71,545.00	\$ 77,895.00
2. Investments (fair value)			
			\$ 0.00
3. Office furnishings (Cost of desks, etc)			Φ 0 00
4 Equipment (Cost of few mashine sta)			\$ 0.00
4. Equipment (Cost of fax machine, etc)			\$ 0.00
5. Other (brief description) Book Inventory			
o. Other (oner description)		\$ 7,173.00	* \$ 7,173.00
6. Total Assets (add lines 1 - 5)	\$ 6,350.00	\$ 78.718.00	\$ 85,068.00
		**************************************	
LIABILITIES AND FUND BALANCE (at year-end):		•	
7. Liabilities (brief description):			<b>.</b>
Credit Card Payable		\$ 1,863.00	\$-1,863.00
8.			Ф O OO
9.			\$ 0.00
J.			\$ 0.00
10.			Ψ 0,00
			\$ 0.00
11. Total Liabilities (add lines 7 - 10)			
	\$ 0.00	<sup>2</sup> \$ 1,863.00	\$ 1,863.00
12. Fund balance (amount from Line 16 on Statement A)	· A 0 050 00	A 70 055 00	<b>#</b> 00 00 = 00
13. Other	\$ 6,350.00	\$ 76,855.00	\$ 83,205.00
is. Other			\$ 0.00
14. Total Liabilities and Fund Balance (add lines 11 - 13)	·\$ 6 350 00	\$.78,718.00	\$ 85,068.00
	<del>Ψ 0,000,00</del>	<del>Ψ . σ, ποισσ</del>	<del>Ψ 301000.00</del>

#### Statement C

#### Schedule of Compensation, Benefits and Other Payments to Entity Head

	Cathy V. Indest, President	
Agency Head Name,	, Title:	

Purpose	Dollar Amount
1. Salary	
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)	\$ 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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