

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

Entity Name: Upturn Arts

Address: 729 Sixth St. New Orleans LA 70115

Telephone: 504-390-8399

Email: dana@upturnarts.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, Dana Reed (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 Upturn Arts (entity's name) as of Dec 31, 2025 (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: _____

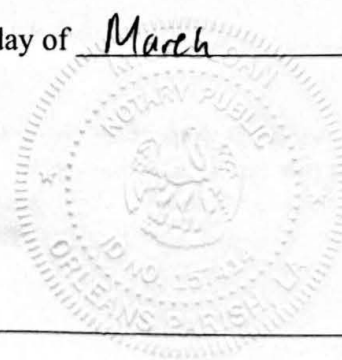
Complete if Applicable: In addition, Dana Reed (officer's name), who duly sworn, deposes, and says that Upturn Arts (entity's name) received \$75,000 or less in revenues and other sources for the year ended Dec 31 2025 (entity's year-end), and accordingly, is not required to have an audit for the previously mentioned fiscal year.

Dana Reed
OFFICER'S SIGNATURE

Executive Director
OFFICER'S TITLE

Sworn to and subscribed before me, this 23rd day of March, 2026

Mica Sloan
NOTARY PUBLIC SIGNATURE
Mica Sloan #157414
My Commission is for life



Entity Name: Upturn Arts

Fiscal Year End: Dec 31, 2025

Statement of Receipts and Disbursements

Statement A

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
RECEIPTS (Provide Brief Description):			
1. City and State Funding	59,850		59,850
2. Grants and Foudmations	31,100	92,500	123,600
3. Individual donations and Fundraisers	106,280		106,280
4. Program Fees	188,188		188,188
5. Other Income (Interest Earned)			0
6. Total receipts (add lines 1 - 5)	<u>385,418</u>	<u>92,500</u>	<u>477,918</u>
DISBURSEMENTS (Provide Brief Description):			
7. Salaries, Teachers Benefits, Program Related	270,957		270,957
8. Salaries, Benefits, Consultants General Ops Relate	52,830		52,830
9. Direct Program Costs	47,438		47,438
10. Indirect Costs/General Operations	50,962		50,962
11.			0
12.			0
13. Total Disbursements (add lines 7 - 12)	<u>422,187</u>	<u>0</u>	<u>422,187</u>
14. Change in fund balance (Lines 6 minus 13)	55,731	0	55,731
15. Fund Balance at beginning of year	56,800		56,800
16. Fund balance (deficit) at end of year (Add lines 14-15) --This amount also goes on line 12, Statement B	112,531	0	112,531

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

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.

Entity Name: Upturn Arts

Fiscal Year End: Dec 31, 2025

Balance Sheet

Statement B

	<u>General Fund</u>	<u>Other Fund</u>	<u>Total</u>
ASSETS (balances at year-end)			
1. Cash and cash equivalents	122,531		122,531
2. Investments (fair value)	50,667		50,667
3. Office furnishings (Cost of desks, etc)			0
4. Equipment (Cost of fax machine, etc)			0
5. Other (brief description)			0
6. Total Assets (add lines 1 - 5)	<u>173,198</u>	<u>0</u>	<u>173,198</u>
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (brief description):			
Deferred Income and Paychecks payable	6,926		6,926
8. Credit Card Balance	1,979		1,979
9.			0
10.			0
11. Total Liabilities (add lines 7 - 10)	8,905	0	8,905
12. Fund balance (amount from Line 16 on Statement A)	112,531	0	112,531
13. Other			0
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>121,436</u>	<u>0</u>	<u>121,436</u>

Statement C

Schedule of Compensation, Benefits and Other Payments to Entity Head

Agency Head Name, Title: Dana Reed, Executive Director

Purpose	Dollar Amount
1. Salary	90,000
2. Benefits-insurance	13,447
3. Benefits-retirement	2,700
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	310
12. Registration fees	
13. Conference travel	826
14. Housing	
15. Unvouchered expenses (example: travel advances, etc.)	
16. Special meals	
17. Other	
18. TOTAL (enter total of line 1-17)	107,283

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.)