

Affidavit and Revenue Certification

4

Twin City Foundation ENTITY NAME

Ouachita Parish

Monroe, 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, Kristin Brown (enter officer name), who, duly sworn, deposes and says that the financial statements herewith given present fairly the financial position of Twin City Foundation (enter entity name) as of April 30, 2019 (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, Kristin Brown (officer name), who, duly sworn, deposes and says that Twin City Foundation (entity name) received \$75,000 or less in revenues and other sources for the year ended April 30, 2019, and accordingly, is not required to have an audit for the previously mentioned year.

Kristin Brown
Officer's Signature

Sworn to and subscribed before me this 16th day of September, 2019.

Mike McGehee # 61397
NOTARY PUBLIC SIGNATURE & SEAL

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 _____

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

Twin City Foundation
 (Agency Name)

Statement of Cash Receipts and Disbursements
For the Year Ended April 30, 2019
 (Year-End)

	General Fund	Other Fund	Total
RECEIPTS (Provide Brief Description):			
1. Contributions	\$ 96,367	\$	\$
2. Fundraising	44,006		
3. Grants	3,796		
4. Investment	42,177		
5. Miscellaneous	25,992		
6. Total receipts (add lines 1 - 5)	\$ 212,338	\$	\$
DISBURSEMENTS (Provide Brief Description):			
7. Exhibition	\$ 6,703	\$	\$
8. Insurance	15,623		
9. Fire Restoration	16,406		
10. Fundraising	14,446		
11. Honorariums	10,249		
12. General Management	44,408		
13. Total Disbursements (add lines 7 - 12)	\$ 107,835	\$	\$
	104,503		
14. Change in fund balance (Lines 6 minus 13)	\$ <u>-16,345</u>	\$	\$
15. Fund Balance at beginning of year	\$ 88,158**	\$	\$
16. Fund balance (deficit) at end of year (Add lines 14-15)	\$ 904,425	\$	\$
--This amount also goes on line 12, Statement B			

** Includes adjustment to fund balance to correct for previous years adjustments and checks/deposits that never cleared.

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

Twin City Foundation
(Agency Name)

Balance Sheet, on April 30, 2019
(Year-End)

	General Fund	Other Fund	Total
ASSETS (balances at year-end) -Give brief description:			
1. Cash and cash equivalents on hand	\$ 227,739	\$	\$
2. Investments (fair value) on hand	629,020		
3. Office furnishings (Cost of desks, etc)	47,856		
4. Equipment (Cost of fax machine, etc)			
5. Other (brief description)			
6. Total Assets (add lines 1 - 5)	<u>\$ 906,615</u>	<u>\$</u>	<u>\$</u>
LIABILITIES AND FUND BALANCE (at year-end):			
7. Liabilities (give brief description):			
8. Credit Card	\$ 2,190	\$	\$
9.			
10.			
11. Total Liabilities (add lines 7 - 10)			
12. Fund balance (amount from Line 16 on Statement A)	904,425		
13. Other			
14. Total Liabilities and Fund Balance (add lines 11 - 13)	<u>\$ 906,615</u>	<u>\$</u>	<u>\$</u>

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

Twin City Foundation (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 April 30, 2019 (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.)

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

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