

### Authority Budget of: KEANSBURG HOUSING AUTHORITY

**State Filing Year** 

2021

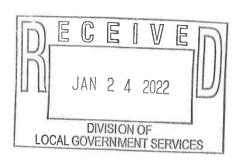
For the Period:

October 1, 2021 to

September 30, 2022

www.keansburgha.org **Authority Web Address** 

ADOPTED COPY



APPROVED



Division of Local Government Services

### 2021 (2021-2022) HOUSING AUTHORITY BUDGET

**Certification Section** 

### State of New Jersey Department of Community Affairs **Division of Local Government Services** PROPOSED INTRODUCED HOUSING AUTHORITY BUDGET INTRODUCED BUDGET TRANSMITTAL PACKAGE

Submit all budget related materials in one package to: Bureau of Authority Regulation Affairs, Division of Local Government Services, 101 South Broad Street, P.O. Box 803, Trenton, NJ 08625-0803. Check the box of each item to indicate that it is included in budget or has been completed.

### Propose

d Intro	oduced Authority Budget Document
X X	2 copies of the Introduced budget document that includes all pages completed Authority Name and Fiscal Year are filled in Signature blocks on Pages C-2, C-3, and C-4 are filled in along with title, address, e-mail address, phone number and fax number.
X	Page C-5 Resolution of the Authority governing body approving the introduced budget is enclosed with recorded vote
Note:	Aye Votes must total a majority of the full membership of the governing body (Not including Alternates in total)
$\mathbf{x}$	Page C-5 Proposed hearing date for adoption of Budget reflected in Authority Budget Resolution
X	Page C-5 Authority Budget Resolution is signed with original handwritten signature
X	Budget Narrative (N Pages) and Information Section is complete (All items answered or indicated N/A)
X	Pages N-6 and F-8 applicable amounts agree to the most recent issued audit report of the Authority
×	Sheets not completed have an explanation on them (Such as Authority has no Debt Service)
	upital Budget (Page CB-1 through CB-5)
	· · · · · · · · · · · · · · · · · · ·
X	Authority Name and Fiscal Year are filled in
	Control of the second of the standard with title address e-mail address phone number and fax number

### Introdu

لخف	
X	Signature blocks on Page CB-1 are filled in along with title, address, e-mail address, phone number and fax number
	and proper Box Checked off (Top Box 1 Have a Capital Budget or Bottom Box 2 Don't have a Capital Budget)
X	Page CB-2 has all questioned answered or an explanation why question does not apply

Page CB-5-Balance Check amount equals Zero X

Official's Signature:	- AL									
Name:	DOUGEAS DZEMA	DOUGIEAS DZEMA								
Title:	EXECUTIVE DIRECTO	EXECUTIVE DIRECTOR								
Address:	1 CHURCH STREET KEANSBURG, NJ 0773	4	10-20-00-00-00-00-00-00-00-00-00-00-00-00							
Phone Number:	732-787-6151	Fax Number:	732-787-5204							
E-mail address:	ddzema@perthamboyha.org									

### 2021 (2021-2022)

### KEANSBURG

(Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM OCTOBER 1, 2021 TO SEPTEMBER 30, 2022

### For Division Use Only

### CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Paul D Cwest CPA RAS Date: 10/15/202,

### CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is certified with respect to such amendments and comparisons only.

State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services

By: Paul D Cwet CPA RMS Date: 1/26/2022

### 2021 (2021-2022) PREPARER'S CERTIFICATION

### KEANSBURG

(Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

10-01-2021

TO:

09-30-2022

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:	Jhm 8	ine /							
Name:	THOMAS FURLO	THOMAS FURLONG, CPA							
Title:	DIRECTOR OF FINANCIAL OPERATIONS								
Address:		881 AMBOY AVE., P.O. BOX 390 PERTH AMBOY, NJ 08862							
Phone Number:	732-826-3118	Fax Number:	732-826-3111						
E-mail address	tfurlong@perthamboyha.org								

### 2021 (2021-2022) APPROVAL CERTIFICATION

### KEANSBURG

FROM:

FISCAL YEAR:

(Name)

### HOUSING AUTHORITY BUDGET

10-01-2021

TO:

09-30-2022

body of the KEANSBUF N.J.A.C. 5:31-2.3, on the16	get and Capital Budget/Pr RG Housing Authori TH day of SEPTEM	ogram approved ty, at an open pu MBER,20	thedules appended hereto, are a by resolution by the governing ablic meeting held pursuant to 021							
majority of the full membersh	ip of the governing body t	hereof.	ion represents not less than a							
Officer's Signature:										
Name:	DOUGLAS DZEMA									
Title:	EXECUTIVE DIRECT	OR								
Address:	1 CHURCH STREET									
X	KEANSBURG, NJ 077	34								
Phone Number:	732-787-6151	Fax Number:	732-787-5204							
E-mail address ddzema@perthamboyha.org										

### INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.keansburgha.org
website. The	purpose of the webs d activities. N.J.S.A. minimum for public	er an Internet website or a webpage on the municipality's or county's Internet site or webpage shall be to provide increased public access to the authority's 40A:5A-17.1 requires the following items to be included on the Authority's disclosure. Check the boxes below to certify the Authority's compliance with
X	A description of the	Authority's mission and responsibilities
X	The budgets for the	current fiscal year and immediately preceding two prior years
<b>x</b>	information (Simila other types of Char	nprehensive Annual Financial Report (Unaudited) or similar financial r information are items such as Revenue and Expenditures Pie Charts or ts, along with other information that would be useful to the public in finances/budget of the Authority)
x	The complete (All P immediately two pri	ages) annual audits (Not the Audit Synopsis) of the most recent fiscal year and or years
x	The Authority's rule body of the authority jurisdiction	es, regulations and official policy statements deemed relevant by the governing y to the interests of the residents within the authority's service area or
X	Notice posted pursu setting forth the time	ant to the "Open Public Meetings Act" for each meeting of the Authority, e, date, location and agenda of each meeting
x	The approved minutheir committees, fo	tes of each meeting of the Authority including all resolutions of the board and r at least three consecutive fiscal years
x	The name, mailing a exercises day-to-day Authority	address, electronic mail address and phone number of every person who supervision or management over some or all of the operations of the
X	corporation or other preceding fiscal year	organization which received any remuneration of \$17,500 or more during the for any service whatsoever rendered to the Authority.
It is hereby webpage as	certified by the belo	w authorized representative of the Authority that the Authority's website or aplies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as

Signature

DOUGLAS DZEMA

EXECUTIVE DIRECTOR

listed above. A check in each of the above boxes signifies compliance.

Name of Officer Certifying compliance

Title of Officer Certifying compliance

### 2021 (2021-2022) HOUSING AUTHORITY BUDGET RESOLUTION KEANSBURG (Name)

F	ISCAL YEAR:	FROM:	10	-1-2021	TO:	09-30-2022	
WHEREAS, the Annual I beginning, 10-01-2021 KEANSBURG House	_ and ending, 09-30	-2022 has	been pres	ented before the	e governing	body of the	'ear
WHEREAS, the Annual I including any Accumulate 0, and	Budget as introduced and Deficit if any, of \$	reflects Tota 4,084	l Revenue 550	s of \$4,166 and To	.000 tal Unrestri	, Total Appricted Net Position u	ropriations, tilized of
WHEREAS, the Capital B Net Position planned to be	udget as introduced re utilized as funding t	eflects Total hereof, of \$_	Capital A <sub>I</sub>	ppropriations of	£\$0	and Total U	Inrestricted
WHEREAS, the schedule anticipated revenues to sa outlays, debt service requ contracts and agreements;	atisfy all obligations airements, and to pro	to the holde	rs of bond	ls of the Author	rity, to me	et operating expen	ses, capital
WHEREAS, the Capital I funds; rather it is a docu authorization to expend fi resolution, by a project fir other means provided by I	iment to be used as unds for the purposes inncing agreement, by	part of the described in	said Auth n this sect	ority's planning ion of the bud	g and managet, must b	agement objectives e granted elsewher	. Specific
NOW, THEREFORE BE public meeting held on of the KEANSBURG is hereby	0-16-2021 that the Housing Au	Annual Bud	get, includ	ing all related s	chedules, ar	nd the Capital Budg	at an open et/Program
BE IT FURTHER RESOI meet all proposed expend outstanding debt obligatio	itures/expenses and a	ll covenants,	terms and	provisions as:	stipulated i	n the said Housing	amount to Authority's
BE IT FURTHER RESOL Budget and Capital Budge	VED, that the govern	ing body of	the KEA			-	the Annual
6				0			
(Secretary's Signature)				(D	1-11 2 ate)		
Governing Body	Rec	orded Vote					
Member:		Aye	Nay	Abstain	Absent	7	
Note Fill in the name	of Each Commis	sioner and	indicate	their recorde	ed Vote		
DIANE NELSON	×						
CAROL DE BLASIO							
MARY FOLEY	×						
MATTIE ANDERSO	N X						
THOMAS FOLEY					Х		
TAMMY CARRIER	X						
VOI ANDA ANNICO	MANAAD A TO				Y		

### 2021 (2021-2022) ADOPTION CERTIFICATION

### **KEANSBURG**

(Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

10-01-2021

TO:

09-30-2022

Note: This is filled on for Adoption of the Budget Don't fill in for Introduction of the Budget

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the <u>KEANSBURG</u> Housing Authority, pursuant to <u>N.J.A.C. 5:31-2.3</u>, on the <u>17<sup>TH</sup></u> day of, <u>NOVEMBER</u>, <u>2021</u>.

Officer's Signature:		/ \	
Name:	DOUGLAS DZEM	A A	*
Title:	EXECUTIVE DIR	ECTOR	
Address:	1 CHURCH STRE	ET	
***************************************	KEANSBURG, NJ	07734	
Phone Number:	732-787-6151	Fax Number:	732-787-5204
E-mail address	ddzema@perthaml	ooyha.org	

### 2021 (2021-2022) ADOPTED BUDGET RESOLUTION

Important -- The Amounts on this page need to agree with budget pages F-1 and CB-3. Fill these amounts in after you finalize the amounts on pages F-1 and CB-3. Re-check before this resolution is adopted

### KEANSBURG (Name)

### HOUSING AUTHORITY

FISCAL	YEAR:	FROM:	10-01-2021	TO:	09-30-2022
WHEREAS, the Annual Budget an beginning <u>10-1-2021</u> , and en KEANSBURG Housing Author	od Capital Bud ding, <u>09-30-</u> prity at its oper	get/Program fo 2022 has b n public meetir	r the <u>KEANSBURG</u> een presented for ado ag of <u>11-17-2021</u>	Housing	g Authority for the fiscal year re the governing body of the nd
WHEREAS, the Annual Budget an in the same amount and title as se which have been approved by the I	d Capital Bud	get as presente	d for adoption reflects	s each item	
WHEREAS, the Annual Budget as including any Accumulated Deficit \$0 and	presented for a	dantion reflect	a Total Dayson Co	4 1 4 4 4 4 4 4	O, Total Appropriations, icted Net Position utilized of
WHEREAS, the Capital Budget as Unrestricted Net Position planned	s presented for to be utilized o	r adoption refl	ects Total Capital A	propriation	ns of \$0 and Total
NOW, THEREFORE BE IT RESO meeting held on11-17-2021 Authority for the fiscal year beginn appropriations for the purposes stat	ning 10-1-2				
BE IT FURTHER RESOLVED, the item of revenue and appropriation is amendments thereto, if any, which					
(Sccretary's Signature)		-	(D	ate)	
Governing Body Member: Note Fill in the name of Eacl	Recorded Vot Aye n Commissio	Nav	Abotoin	,	
DIANE NELSON CAROL DE BLASIO	×				
MARY FOLEY			X		
MATTIE ANDERSON X THOMAS FOLEY			. ,		
TAMMY CARRIER X			*		
YOLANDA ANN COMMAR	RATO X				

### 2021 (2021-2022) HOUSING AUTHORITY BUDGET Narrative and Information Section

### 2021 (2021-2022) HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS KEANSBURG

(Name)

### **AUTHORITY BUDGET**

FISCAL YEAR:

FROM:

10-01-2021

TO:

09-30-2022

Answer all questions below. Attach additional pages and schedules as needed.

- 1. Complete a brief statement on the 2021/2021-2022 proposed Annual Budget and make comparison to the 2020/2020-2021 adopted budget for each *Revenues and Appropriations*. Explain any variances over +/-10% (As shown on budget pages F-2 and F-4 explain the reason for changes for each <u>revenue</u> and <u>appropriation</u> changing more than 10%) for each individual revenue and appropriation line item. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. (Example Rate Increase authorized by resolution or by HUD). SEE ATTACHED
- 2. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. Example would be effect on a recession in the economy on the housing Authority.

  NONE
- 3. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. N/A
- 4. Identify any sources of funds transferred to the County/Municipality as a Pilot Payments, or a shared service and explain the reason for the transfer -- Housing Authorities cannot transfer Unrestricted Net Position (i.e.: to balance the County/Municipality budget, etc.). N/A
- 5. The proposed budget must not reflect an anticipated deficit from 2021/2021-2022 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question.

(Prepare a response to deficits in most recent audit report pertaining to Deficits to Unrestricted Net Position caused by recording <u>Pension and Post-Employment Benefits liabilities as required by GASB 68 and GASB 75).</u>

The deficit is a result of the GASB 68 and GASB 75 liabilities. The PHA is budgeting a surplus each year to try and reduce the noted liabilities.

### KEANSBURG HOUSING AUTHORITY BUDGET VARIANCES IN EXCESS OF 10% September 30<sup>th</sup>, 2022

### **Operating Revenues:**

Voucher-ACC (+23.7%)-Increase in landlord rents have caused an increase in amounts projected to be received from HUD

### **Operating Appropriations:**

Legal-(+10%)-expected increase due to change in attorney firms

Insurance-(+15.4%) Increase expected in insurance premiums

Rents-(+24.9%) Increase in landlord rents have caused an increase in amounts projected to be paid for rental subsidies

### HOUSING AUTHORITY CONTACT INFORMATION AUTHORITY CONTACT INFORMATION 2021 (2021-2022)

Please complete the following information regarding this Authority. <u>All</u> information requested below must be completed.

Name of Authority:	KEANSBURG HOUSING AUTHORITY 22-1757617 1 CHURCH STREET								
Federal ID Number:									
Address:									
City, State, Zip:	KEANSBURG			NJ	07734				
Phone: (ext.)	732-787-6151		Fax:	732-7	87-5204				
Preparer's Name:	THOMAS FURLONG								
Preparer's Address:	881 AMBOY AVENUE, P.O. BOX 390								
City, State, Zip:	PERTH AMBOY			NJ	08862				
Phone: (ext.)	732-826-3118		Fax:	732-8	26-3111				
E-mail:	tfurlong@perthamboyha.or	g							
Chief Executive Officer:(1)	DOUGLAS DZEMA								
(1)Or person who performs the	ese functions under another Ti	tle							
Phone: (ext.)	732-787-6151	ax:	732-78	7-5204					
E-mail:	ddzema@perthamboyha.org								
Chief Financial Officer:(1)	JANET SILVESTRI								
(1) Or person who performs the	nese functions under another T	itle							
Phone: (ext.)	732-787-6151 F EXT 102	ax:	732-787-520		)4				
E-mail:	janet@keansburgha.org								
Name of Auditor:					in a				
Name of Firm:	NOVOGRADAC & CON	/PAN	Y, LLI	P					
Address:	1433 HOOPER AVENUI								
City, State, Zip:	TOMS RIVER			NJ	08753				
					177				
Phone: (ext.)	732-503-4257	Fa	ax:	732-34	1-1424				

### HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

KEANSBURG (Name)

	FISCAL YE	AR: FR	OM:	7-1-2020	TO:	6-30-2021
1)	swer all questions below complet Provide the number of individual reported on the Authority's Form	s employed: 1 W-3, Trans	in (Use Mos mittal of Wa	t Recent W-3 Avage and Tax State	vailable 20 ements:	<u> </u>
2)	Provide the amount of total salar	es and wage	s as reported	I on the Authority	y's Form W	/-3, (Use MLost
3)	Recent W-3 Available 2018 or 2 Provide the number of regular vo	1019) Transn ting member	nittal of Was	ge and Tax Stater erning body:	nents:1	(Even if not all
	commissioners have been appoi Authority)	nted (Total	Commission	ners are either 5	or 7 as per	statute for your
4)	Provide the number of alternate v	oting memb	ers of the go	verning body:	0	(Maximum is 2)
	Did any person listed on Page Non Page Non Page N-4 during the current fis including the names of the indivi	cal year?	YESIf	`"yes," attach a d	lescription (	of the relationship
Fol	ev are mother and son					
6)	Did all individuals that were requ	uired to file	r Financial I	Disclosure Statem	ent for the	hecause of their
	(Most Recent Filing that March relationship with the Authority f	ile the form	as required?	(Checked to see i	if individua	is actually filed at
	http://www.state.nj.us/dea/div "no," provide a list of those ind	dsions/digs	follad to fil	e a Financial Dis	ulogure Sta	tement and an
	explanation as to the reason for	heir failure	to file.	ie a Pilianciai Dis	ciosure ora	tomont and an
7)	Does the Authority have any am	ounts receiv	able from ci	irrent or former o	commission	ers, officers, key
	employees or highest compensat	ed employed	s? NO	If "yes," atto	ach a list of	those individuals,
	their position, the amount receiv	able, and a	description (	of the amount due	e to the Aut ina parties	nority.
8)	Was the Authority a party to a ba. A current or former commission	usiness trans	sacuon wun ev emplovee	or highest compet	nsated emple	ovee? NO
	<ul><li>a. A current or former commission</li><li>b. A family member of a current</li></ul>	nt or former	commissione	r, officer, key emp	oloyee, or h	ighest compensated
	employee? NO					
	c. An entity of which a current employee (or family member t	or former c	ommissioner p officer or d	, officer, key emp irect or indirect ow	mer? NO	ignest compensated
	If the answer to any of the above	e is "ves."	attach a des	cription of the tro	ansaction ii	ncluding the name
	of the commissioner, officer, I	tev emplove	e, or highes	st compensated e	employee (d	or family member
	thereof) of the Authority; the ne	ame of the e	ntity and rel	ationship to the 1	individual c	or family member;
	the amount paid; and whether to Did the Authority during the me	he transactio	on was subje	ect to a competitive	ve bia proce	etly on a nersonal
9)	benefit contract? A personal be	ost recent ris nefit contrac	car year pay st is generall	v anv life insuran	ice, annuity	, or endowment
	contract that benefits directly of	or indirectly.	the transfer	or, a member of t	he transfero	or's family, or any
	other person designated by the t	ransferor,	NOI	"yes," attach a de	escription o	f the arrangement,
	the premiums naid and indicat	e the benefic	ciary of the c	contract.		
10	Explain the Authority's proces Include whether the Authority'	s for determ	ining compe	nsation for all pe	rsons nsted Treview an	on rage N-4.
	commissioners or a committee	thereof: 2) s	tudy or surv	ey of compensati	on data for	comparable
	nositions in similarly sized enti-	ities: 3) annu	al or period	ic performance ev	valuation; 4	) independent
	compensation consultant; and/o	or 5) written	employmen	t contract. Attacl	h a narrat	ive of your
	Authorities procedures for a	ll individue	ıls listed or	Page N-4 (2 of	2). PHA c	contracts with the
$P\epsilon$	erth Amboy Housing Authority	for an Exe	cutive Dire	ector. Cost is ne	gotiated ea	ich year.

Page N-3 (1 of 2)

11) Did the Authority pay for meals or catering during the current fiscal year? \_\_no \_\_If "yes," attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed. 12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? no If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed. 13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority? a. First class or charter travel no b. Travel for companions \_\_\_\_\_ c. Tax indemnification and gross-up payments \_\_\_\_\_no\_\_ d. Discretionary spending account no e. Housing allowance or residence for personal use no f. Payments for business use of personal residence no g. Vehicle/auto allowance or vehicle for personal use no h. Health or social club dues or initiation fees no i. Personal services (i.e.: maid, chauffeur, chef) If the answer to any of the above is "yes," attach a description of the transaction including the name and position of the individual and the amount expended. 14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by employees and/or commissioners during the course of Authority business and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? \_\_yes\_\_ If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer) 15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? \_\_\_\_ no \_\_\_ If "yes," attach explanation including amount paid. 16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? If "yes," attach explanation including amount paid. 17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required? n/a If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future. (If no bonded Debt answer is Not Applicable) (Loans from a Bank or State Agencies are not bonded Debt) 18) Did the Authority receive any notices from the Department of Environmental Protection or any other entity regarding maintenance or repairs required to the Authority's systems to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? If "yes," attach explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe the Authority's plan to address the conditions identified. 19) Did the Authority receive any notices of fines or assessments from the Department of Environmental Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow, etc.)? no If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment. 20) Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban Development or any other entity due to noncompliance with current regulations? no "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment. 21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

(This page is directions for filling in page (N-4 (2-of 2)) (No answers should be entered on this page)

### AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES, HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS

### KEANSBURG

(Name)

FISCAL YEAR:

FROM:

10-01-2021

TO:

09-30-2022

Complete the attached table for all persons required to be listed per #1-4 below.

1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.

List all of the Authority's key employees and highest compensated employees other than a commissioner or
officer as defined below and amount of compensation from the Authority and any other public entities.

- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
  - a) The individual received reportable compensation from the authority and other public entities in excess of \$150,000 for the most recent fiscal year completed; and
  - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: (Use the Most Recent W-2 available 2019 or 2020. The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2021, the most recent W-2 and 1099 should be used 2020 or 2019 (60 days prior to start of budget year is November 1, 2020, with 2019 being the most recent calendar year ended), and for fiscal years ending June 30, 2021, the calendar year 2020 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2021, with 2020 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

	Total Compensation All Public	DIE	\$ 40,471	0 00	DOE"	1300	200	9 6	309,434	0	0	O	0	a	0	0	\$ 355,405
<b>5</b> 1	Estimated amount of other compensation from Other Public Entities (health banefits, pension, payment in lieu of health	Actions, son															
éc	Reportable Compensation from Other Public Entitles	10004 7	40,474	A ann		1.200			309,434								5 355,405
۵	Average Hours per Week Dedicated to t Positions at Other Public of Entitles Listed in Entitles Listed	, T	7	טע	1	LT	1		or 35+								350
•	Positions held at Other Public Entitles Listed in Column O	Sarratary	Dollard	Retired Commissioner		Deputy Mayor			Executive Director 35+								
g	Names of Other Public Entities where individual is an Employee or Member of the Governing Body (1) See note below	Heant Brins and	O Vesor Ed of Ed	e Abaths bolot bo © MC Bavshore Quifall Auth, Commissioner	Ø Nane	0 Keansburg Borough	0 None	O None	0 Perth Amboy H.A.								<
	Total Compensation from Authority	10		9 10	0	0	0	D	0	Q	a	0	D	0	0	0	
*	Other (auto Estimated allowance, amount of other expense compensation from the payment in Authority lieu of health [health benefits, benefits, etc.) penylan, etc.)									24							
t. ensation from 27.1099)	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)																
aing Authority  July 2022  Reportable Compensation from  Authority (Wyz) 3093)	Base Salary/ Stipsend Bonus	None	None	None	None	ากะ	one .	Nane	ne								
Keansburg Housing Authority to September 30, F. G. H. I. J. A. Reportsble C. Position Authority	Formel Highest Compensated Employee Key Employee	2			ž	N	N	N									∾∥
For the Period October 3, 2021	Average Hours per Week Dedicated to Position	× × S	×	: ×	× 5	×	×	× 52	88								
For the Period	TT the	Chairperson	Vice Chair	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Executive Director								
18 18	Name	1 Diane Nelson	2 Carol DeBlasto	3 Mary Foley	4 Mattle Anderson	5 Thomas Foley	5 Tammy Carrier	7 Yolanda Ann Commarato	8 Douglas Dzema	n C	2	11	12	1.3	14		10(3)

[1] Insert "None" in this column for each Individual that does not hold a position with another Public Entity

## Schedule of Health Benefits - Detailed Cost Analysis

Inout- X - in Box Below IF this Page is Non-Applicable	K For the Period	Keansburg Housing Authority October 1, 2021	g Authority 1, 2021	đ	Septemb	September 30, 2022		
	# of Covered	Annual Cost Estimate per	Total Cost	# of Covered				Ω.
	(Medical & Rx) Proposed Budget	Proposed Budget	Proposed	(Medical & Rx) Current Year	Annual Cost per Employee Current Year	Total Prior Year	\$ Increase	% Increase
Active Employees - Health Benefits - Annual Cost						Ton Ton	(veci ease)	(accease)
Single Coverage		<i>₹</i> ∧				\$	\$	#DIV/OI
rarent & Collo Employee & Spouse (or Partner)	H	20,672	20,672	ਜ਼	20,168	20,168	504	2.5%
Family						)) <u>3</u>	• (4)	#DIV/0I
Employee Cost Sharing Contribution (enter as negative - )			(2,128)			(2,077)	(51)	2.5%
Subtotal	1		18,544	1		180'81	453	2.5%
Commissioners - Health Benefits - Annual Cost								
Single Coverage			•					#DIV/0I
Parent & Child		-	¥II			A	1.0	#DIV/0I
Employee & Spouse (or Partner)			i.•°		11	£	ř	#DIV/01
Family			•			3(4.0	186	#DIV/01
Employee Cost Sharing Contribution (enter as negative - )	3						9	#DIV/0I
Subtotal	0		•	0	0	•	٠	#DIV/01
Retirees - Health Benefits - Annual Cost								
Single Coverage			*					#DIV/01
Parent & Child			*/			*	*	#DIV/01
Employee & Spouse (or Partner)						(10)	•	#DIV/0!
Family	1	18,043	18,043	F	17,603	17,603	440	2.5%
Employee Cost Sharing Contribution (enter as negative - )	が対対ながら	<b>支配数据等证据</b>						#DIV/01
Subtotal	ī	温度服务	18,043	1	THE PERSONAL PROPERTY.	17,603	440	2.5%
GRAND TOTAL	2	v.	36,587	2	- 11	\$ 35,694	\$ 893	2.5%
Is medical coverage provided by the SHBP (Yes or No)?     (Place Answer in Box) Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	Answer in Box) (Place Answer in Box)	YES		Yes or No Yes or No				

Note: Remember to Enter an amount in rows for Employee Cost Sharing

# Schedule of Accumulated Liability for Compensated Absences

Keansburg Housing Authority For the Period

October 1, 2021

September 30, 2022

2

Complete the below table for the Authority's accrued liability for compensated absences.

Agreement (check applicable items) Legal Basis for Benefit Employment | subivibu Resolution Agreement Approved Labor Absence Liability Dollar Value of Compensated Accrued **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit See attached

The total Amount Should agree to most recently issued audit report for the Authority

Total liability for accumulated compensated absences at beginning of current year \$

KEANSBURG HOUSING AUTHORITY SCHEDULE OF ACCRUED COMP. ABSENCES F.Y.E. 9/30/20

Ē	2	Vacation	oct-	Vacation	Daffy	Vacation Cost Sick	<u>8</u>	oct.	Total Sick Accrued	Fotal Sick Accrued Dally Refe Sick Cost	Sick Cost	Personal	oct- dec	Personal Accrued	Dally Rate	Personal	Total
HILE		(alan)															
SEC B COORDINATOR	DIANA AT BIND	5.89	000	5.88	184,62	1,097.41	O	0.001	0.00	184.82	0,00	0.00	000	00.00	184.82	000	1,087.41
CLERK	LANET SILVESTRI	6.23	0.00		95.00		0	0.001	00'0	00.00	00.0	0.00	00.00	00.00	95.00	0.00	591.85
	14101					1 879 28					0.00				-	0.00	1,679.26

Notes:

Hours every two weeks

Diana-70 Janet S-50

### Schedule of Shared Service Agreements

Keansburg Housing Authority

Amount to be September 30, 2022 Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services. October 1, 2021 For the Period If No Shared Services X this Box

Received by/

Agreement

			Comments (Enter more specifics if	Effective	Agreement	Paid from
Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	needed)	Date	End Date	Authority
Perth Amboy Housing Authority	Keansburg Housing Authority	Management Services		1/1/2021	1/1/2021   12/31/2021   \$	\$ 29,040
Perth Amboy Housing Authority	Keansburg Housing Authority	Accounting Services		1/1/2021	1/1/2021 12/31/2021 \$	\$ 15,480
			.1			

### 2021 (2022) HOUSING AUTHORITY BUDGET

**Financial Schedules Section** 

Keansburg Housing Authority October 1, 2021 to

For the Perjod

September 30, 2022

									\$ Increase	% Increase
							FV 2020 2021	1001	(Decrease)	(Decrease)
		FY	FY 2022 Proposed Budget	d Budget			Adopted Budget	udget	Adopted vs.	Adopted
	<b>Public Housing</b>		Housing			Total All	Total All			
	Management	Section 8	Voucher	Other Programs		Operations	Operations	i	All Operations	All Operations All Operations
REVENUES										
Total Operating Revenues	\$	\$.	\$ 4,165,410	₩	\$	4,165,410	\$ 3,37	3,375,990	\$ 789,420	23.4%
Total Non-Operating Revenues	•	5/4/5	290			290		540	50	9.3%
Total Anticipated Revenues		*	4,166,000		,	4,166,000	3,37	3,376,530	789,470	23.4%
APPROPRIATIONS										
Total Administration	D	*	307,950			307,950	30	303,940	4,010	1.3%
Total Cost of Providing Services	*:	*	3,776,600		*3	3,776,600	3,02	3,026,790	749,810	24.8%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXX					ï	#DIV/0i
Total Operating Appropriations	2001		4,084,550		88	4,084,550	3,33(	3,330,730	753,820	22.6%
Total Interest Payments on Debt Total Other Non-Operating Appropriations Total Non-Operating Appropriations	XXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX		e 3 3				#DIV/0! #DIV/0!
Accumulated Deficit	*	A11.	¥3		•	•		1	P.S.	#DIV/0i
Total Appropriations and Accumulated Deficit	,	*	4,084,550		$\overline{x}$	4,084,550	3,330	3,330,730	753,820	22.6%
Less: Total Unrestricted Net Position Utilized	•	*				•				#DIV/0!
Net Total Appropriations	6		4,084,550		36	4,084,550	3,330	3,330,730	753,820	22.6%
ANTICIPATED SURPLUS (DEFICIT)	· ·	\$	\$ 81,450	₩.	₩.	81,450	\$ 45	45,800 \$	35,650	77.8%

### Revenue Schedule

Keansburg Housing Authority
October 1, 2021 to

For the Period

September 30, 2022

		EV 2/	177 Propose	l Rudast		FY 2020.2021	\$ Increase (Decrease) Proposed vs.	% Increase (Decrease) Proposed vs.
	Public Housing	FIZU	122 Proposed Housing	buaget		Adopted Budget	Adopted	Adopted
	Management	Section 8	Voucher	Other Programs	Total All Operations	Total All Operations	All Omovetions	All Constitutes
OPERATING REVENUES	Stocker Williams			The state of the s	Operations	Operations	All Operations	All Operations
Rental Fees								
Homebuyers' Monthly Payments					Ts .	Š ·	s -	4004/01
Dwelling Rental						· -	9 -	#DIV/01
Excess Utilities						25	*	#DIV/01
Non-Dwelling Rental								#DIV/01
HUD Operating Subsidy					73	ar.		#DIV/OI
New Construction - Acc Section 8					2			#DIV/01 #DIV/01
Voucher - Acc Housing Voucher			4,119,410		4,119,410	3,331,490	787,920	23.7%
Total Rental Fees	-	7.0	4,119,410		- 4,119,410	3,331,490	787,920	23.7%
Other Operating Revenues (List)					7,223,120	3,034,130	707,320	23.770
Frauds			1,000		1,000	1,000		0.0%
Portable Fees			45,000		45,000	43,500	1,500	3.4%
Type in (Grant, Other Rev)			,		45,000	45,500	1,500	#DIV/01
Type In (Grant, Other Rev)	1							#DIV/OI
Type In (Grant, Other Rev)	1					10		#DIV/OI
Type In (Grant, Other Rev)						20		
Type In (Grant, Other Rev)								#DIV/0!
Type In (Grant, Other Rev)						27		#DIV/01
Type In (Grant, Other Rev)							-	#DIV/01
Type in (Grant, Other Rev)							5	#DIV/01
Type In (Grant, Other Rev)					3			#DIV/OI
Type In (Grant, Other Rev)							-	#DIV/OI
Type in (Grant, Other Rev)							-	#DIV/01
Type In (Grant, Other Rev)						1		#DIV/01
Type in (Grant, Other Rev)							-	#DIV/OI
Type in (Grant, Other Rev)	1							#DIV/OI
Type In (Grant, Other Rev)							5	#DIV/01
Type In (Grant, Other Rev)								#DIV/01
Type In (Grant, Other Rev)					201			#DIV/01
Type in (Grant, Other Rev)	1					-		#DIV/OI
Total Other Revenue			46,000		- 46,000	44 500	4 500	#DIV/01
Total Operating Revenues			4,165,410		- 4,165,410	44,500 3,375,990	1,500	3.4%
NON-OPERATING REVENUES			4,105,410		4,103,410	2,373,990	789,420	23.4%
Other Non-Operating Revenues (List)								
Type In	T					Cest		un made t
Type in					3			#DIV/OI
Type in								#DIV/01
Type in						10.50		#DIV/OI
Type in					50		•	#D(V/O)
Type In							*	#DIV/Ol
Total Other Non-Operating Revenue	·							#DIV/01
Interest on Investments & Deposits (List)							-	#DIV/01
Interest Earned			590		7			
Penalties	1		330		590	540	50	9.3%
Other					240	( to 2	\$	#DIV/01
Total Interest	1		590		F00			#DIV/01
Total Non-Operating Revenues			590		- 590 - 590	540	50	9.3%
TOTAL ANTICIPATED REVENUES	\$ .		\$ 4,166,000	¢	- \$ 4,166,000	\$ 3,376,530	50	9.3%
THE PART OF			V -1,200,000	Y	- 3 4,100,000	\$ 3,376,530	\$ 789,470	23.4%

### **Prior Year Adopted Revenue Schedule**

### **Keansburg Housing Authority**

		FY 2020	.2021 Adopted	Budget	
	Public Housing	Continue C	Housing	Out -	Total All
OPERATING REVENUES	Management	Section 8	Voucher	Other Programs	Operations
Rental Fees					
Homebuyers' Monthly Payments					
Dwelling Rental					\$ -
Excess Utilities					150
Non-Dwelling Rental					180
HUD Operating Subsidy					
New Construction - Acc Section 8					
Voucher - Acc Housing Voucher			2 224 400		
Total Rental Fees			3,331,490		3,331,490
Other Revenue (List)	-		3,331,490		3,331,490
Frauds			1.000		1 1000
Portable Fees			1,000		1,000
Type in (Grant, Other Rev)			43,500		43,500
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					
Type In (Grant, Other Rev)					7
Type in (Grant, Other Rev)	1				
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					:+:
Type in (Grant, Other Rev)	1.				-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					14
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)	()				
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)					3.5
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev) Total Other Revenue			44.500		
	-	-	44,500		- 1,000
Total Operating Revenues			3,375,990		3,375,990
NON-OPERATING REVENUES	7				
Other Non-Operating Revenues (List)					1
Type in					*
Type in					=
Type in					
Type in					
Type in					-
Type in					
Other Non-Operating Revenues	*		-	1/4	-
Interest on Investments & Deposits					-1
Interest Earned			540		540
Penalties					
Other	<u> </u>				
Total Interest	2	-	540		540
Total Non-Operating Revenues			540		540
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 3,376,530	\$ -	\$ 3,376,530

### **Appropriations Schedule**

### Keansburg Housing Authority

to

For the Period

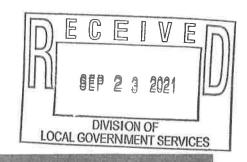
October 1, 2021

September 30, 2022

\$ Increase

% Increase

	<del>300-00-00-00-00-00-00-00-00-00-00-00-00-</del>	FY.	2022 Propose	d Budget				2020.2021 Sted Budget	(D Pro	ecrease) posed vs. dopted	(Decrease) Proposed vs Adapted
	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations		otal All	Δ11 r	Inerations	All Operatio
PPERATING APPROPRIATIONS				The state of the s	_			201410113	All C	peracions	All Operatio
Administration											
Salary & Wages			87,150		\$	87,150	\$	83,400	\$	3,750	4.
Fringe Benefits			72,000		1	72,000		78,640		(6,640)	-8.
Legal	1		11,000		1	11,000		10,000		1,000	10.
Staff Training			3,000		1	3,000		3,000		=,555	0
Travel			3,000		1	3,000		3,000			0
Accounting Fees	li .		13,800			13,800		13,400		400	3
Auditing Fees			8,000			8,000		7,500		500	6
Miscellaneous Administration*			110,000			110,000		105,000		5,000	4
Total Administration	-		307,950		-	307,950		303,940	_	4,010	. 4
ost of Providing Services								303/240	_	4,010	
Salary & Wages - Tenant Services					1	7.0		2			#DIV/0I
Salary & Wages - Maintenance & Operation					1					<u>.</u>	#DIV/01
Salary & Wages - Protective Services					1	5.00		323			#DIV/0
Salary & Wages - Utility Labor	1				1			- 3		12	#DIV/0
Fringe Benefits					1	36				- 5	#DIV/01
Tenant Services						-		50		-	#DIV/01
Utilities			5,000		1	5,000		5,000		- 57	
Maintenance & Operation			5,555		1	2,000		3,000			0
Protective Services						700				-	#DIV/0
Insurance	4		15,000			15,000		12.000		2.000	#DIV/01
Payment in Lieu of Taxes (PILOT)			13,000		1	15,000		13,000		2,000	15
Terminal Leave Payments										-	#DIV/01
Collection Losses	1				l .					3.	#DIV/0!
Other General Expense	1		1.000		f	4.500		4 4 4 4 4		- 7	#DIV/01
Rents	4		1,600		1	1,600		1,600		:::	0
Extraordinary Maintenance			3,750,000		1	3,750,000		3,002,190		747,810	24
Replacement of Non-Expendible Equipment			E 000								#DIV/ÓI
Property Betterment/Additions	.1		5,000	14	1	5,000		5,000		*	0
Miscellaneous COPS*											#DIV/0I
							-	<u>:•</u>	_	- 4	#DIV/01
Total Cost of Providing Services			3,776,600			3,776,600	-	3,026,790		749,810	24
otal Principal Payments on Debt Service in Lieu of epreciation		***************************************									
,	XXXXXXXXXX			XXXXXXXXX		727442.0107	_				#DIV/01
Total Operating Appropriations ON-UPERATING APPROPRIATIONS	· · · · · · · · · · · · · · · · · · ·	-	4,084,550			4,084,550		3,330,730		753,820	22
	2000/00/10/20/20/20/20/20/20/20/20/20/20/20/20/20		TO HOUSE SHOW I	NO SOLVE CONTROL LIMITARY							
etal Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXX	7	3.43				-	#DIV/0!
perations & Maintenance Reserve	6				1	7 (4)		•		12	#0IV/0I
newal & Replacement Reserve					1	7.53		+		19	#DIV/0I
unicipality/County Appropriation					1	*		30		79	#DIV/01
ther Reserves	L				1_	•	_		-	- 2	#DIV/01
Total Non-Operating Appropriations						1				-	#DIV/01
TAL APPROPRIATIONS			4,084,550		-	4,084,550		3,330,730		753,820	22
CCUMULATED DEFICIT							_			- 4	#DIV/0!
TAL APPROPRIATIONS & ACCUMULATED											
FICIT			4,084,550			4,084,550		3,330,730		753,820	22
RESTRICTED NET POSITION UTILIZED	9										
unicipality/County Appropriation		er <sup>i</sup>	*		6			3.0			#DIV/0I
ther					1			920		v.	#DIV/01
Total Unrestricted Net Position Utilized	745	-			1		-		_		#DIV/01
OTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 4,084,550		Š	4,084,550	\$	3,330,730	\$	753,820	22.
	Professional Control of the Control				1967	· · · · · · · · · · · · · · · · · · ·	~	A TOWN OF THE		123,010	22



### KEANSBURG HOUSING AUTHORITY HOUSING PROGRAMS BUDGET WORKSHEETS

ACCOUNT NAME	ACTUAL	BUDGET	BUDGET	BUDGET
7.0000117121112	9/30/2020	9/30/2020	9/30/2021	9/30/2022
INTEREST INCOME	1,159	500	540	590
SECTION 8 ADMIN FEES	344,916	315.220	329,300	369,410
SECTION 8 HAP FEES	3,261,174	2,910,000	3,002,190	3,750,000
OTHER INCOME	36,343	41,000	44,500	46,000
TOTAL INCOME	3,643,592	3,266,720	3,376,530	4,166,000
ADMINISTRATIVE SALARIES	76,399	73,740	83,400	87,150
LEGAL	10.569	10.000	10,000	11,000
TRAINING/TRAVEL	1,784	6,000	6,000	6,00
AUDITING	7,930	7,000	7,500	8,00
ACCOUNTING	15,628	13,000	13,400	13,80
SUNDRY	87,191	102,000	105,000	110,00
TOTAL ADMIN.	199,501	211,740	225,300	235,95
UTILITIES	0	5,000	5,000	5,000
TOTAL UTILITIES	0	5,000	5,000	5,00
INSURANCE	579	13,000	13,000	15,00
EMPLOYEE BENEFIT CONTR.	74,132	90,970	78,640	·
HAP PAYMENTS	3,261,174	2,910,000	3,002,190	
PORTABLE FEES	753	5,000	1,600	
EQUIPMENT	0	5,000	5,000	
TOTAL GENERAL	3,336,638	3,023,970	3,100,430	3,843,60
TOTAL EXPENDITURES	3,536,139	3,240,710	3,330,730	4,084,55
RESIDUAL RECEIPTS(DEFICIT)	107,453	26,010	45,800	81,45
RESERVE - OCTOBER 1ST	-777,144	-669,691	-643,681	-597,88
RESERVE - SEPTEMBER 30TH	-669,691	-643,681	-59 <b>7</b> ,881	-516,43

### **Prior Year Adopted Appropriations Schedule**

### **Keansburg Housing Authority**

		FY 2	020.2021 Adopted B	udget	
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
OPERATING APPROPRIATIONS					Operations
Administration					
Salary & Wages			\$ 83,400		\$ 83,400
Fringe Benefits			78,640		78,640
Legal			10,000		10,000
Staff Training			3,000		3,000
Travel	T.		3,000		3,000
Accounting Fees			13,400		13,400
Auditing Fees			7,500		7,500
Miscellaneous Administration*			105,000		105,000
Total Administration					303,940
Cost of Providing Services			200,010		303,340
Salary & Wages - Tenant Services					
Salary & Wages - Maintenance & Operation					
Salary & Wages - Protective Services					2
Salary & Wages - Utility Labor					
Fringe Benefits	1				_
Tenant Services	li i				5 5
Utilíties			5,000		5,000
Maintenance & Operation			2,000		3,000
Protective Services					
Insurance			13,000		13,000
Payment in Lieu of Taxes (PILOT)			23,000		13,000
Terminal Leave Payments					151
Collection Losses					-
Other General Expense			1,600		1 600
Rents			3,002,190		1,600
Extraordinary Maintenance			3,002,130		3,002,190
Replacement of Non-Expendible Equipment			5,000		F 000
Property Betterment/Additions			3,000		5,000
Miscellaneous COPS*					
Total Cost of Providing Services			2 026 700		2,000,000
Total Principal Payments on Debt Service in Lieu of			3,026,790		3,026,790
Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	
Total Operating Appropriations		AAAAAAAAAAAAA	3,330,730	^^^^^	2 220 700
NON-OPERATING APPROPRIATIONS			3,330,730		3,330,730
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	
Operations & Maintenance Reserve	AMARAMANA	AAAAAAAAAAA		^^^^^	
Renewal & Replacement Reserve					***
Municipality/County Appropriation					
Other Reserves					76
Total Non-Operating Appropriations					*
TOTAL APPROPRIATIONS			2,220,720		
ACCUMULATED DEFICIT			3,330,730		3,330,730
TOTAL APPROPRIATIONS & ACCUMULATED					
DEFICIT DEFICIT					
UNRESTRICTED NET POSITION UTILIZED			3,330,730	(e.	3,330,730
Municipality/County Appropriation					
Other			4		
					(2)
Total Unrestricted Net Position Utilized TOTAL NET APPROPRIATIONS					-
TOTAL HET APPROPRIATIONS	\$ -	\$ -	\$ 3,330,730	\$ -	\$ 3,330,730
* Miccellaneous Basilian			*		
* Miscellaneous line items may not exceed 5% of to	tal operating approp	riations shown below	<ol> <li>If amount in miscell</li> </ol>	laneous is greater tha	in the amount
snown below, then the line item must be itemized a	bove.				
5% of Total Operating Appropriations	\$ -	\$ -	\$ 166,536.50	\$ -	\$ 166,536.50

### Debt Service Schedule - Principal

	Total Principal Outstanding		((*))	(90)	•	55 <b>4</b>	3	•
	Tol Thereafter Ot	S.				t		\$
	Ther							\$
	2027							35
	2026					:::		\$
,c	2025					*		
Authority Fiscal Year Ending in	2024					*		\$ -
Keansburg Housing Authority Fiscal Yea	2					·		s,
Keansburg H	2023							10
	Proposed Budget Year 2022							
	Proposed Budget Ye 2022							\$
×	Adopted Budget Year 2020.2021							
If Authority has no debt X this box		Type in Issue Name	Iype in Issue Name	lype in Issue Name	Type in Issue Name	TOTAL PRINCIPAL	LESS: HUD SUBSIDY	NET PRINCIPAL

	indicate the Authority's most recent bond rating and the year of the rating by ratings service.	t the rating by rating	s service.
11	Moody's	Fitch	Standard & Poors
Year of Last Rating			

### Debt Service Schedule - Interest

Keansburg Housing Authority

		Total Interest	Payments	Outstanding		•	ů,	3	•	•	١	
		,-		Thereafter					ē.		\$ -	
					17.5				•		\$,	
				2027					ī		\$	
				2026							\$	
	ng in			2025							\$	
tilonity	Fiscal Year Ending in			2024							•	
iconsonis nonsing Anthonic	F.			33					ě		ţ	
Maclos			2023							⟨Դ		
	Proposed	<b>Budget Year</b>	2022					*				
	×		Adopted Budget	Year 2020,2021					×		\$	
To the safety of the same of the safety of t	II Authority nas no debt A this box				Type in Issue Name	TOTAL INTEREST	LESS: HUD SUBSIDY	NET INTEREST				

### Net Position Reconciliation

**Keansburg Housing Authority** For the Period

October 1, 2021

September 30, 2022 2

FY 2022 Proposed Budget

Housing Voucher

Public Housing Management

Operations

Other Programs

Total All

61,690

61,690

673,933

1,202,491

S

(528,558)

Section 8

140,133 (668,691

472,110

1,140,801

140,133

696,275 45,800

45,800

596,275

383,502

383,502

## **FOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)**

Less: Invested in Capital Assets, Net of Related Debt (1)

Less: Restricted for Debt Service Reserve (1)

Less: Other Restricted Net Position (1)

Total Unrestricted Net Position (1)

Less: Designated for Non-Operating Improvements & Repairs

Less: Designated for Rate Stabilization

Less: Other Designated by Resolution

Plus: Accrued Unfunded Pension Liability (1)

Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)

Plus: Estimated Income (Loss) on Current Year Operations (2)

Plus: Other Adjustments (attach schedule)

# UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET

Unrestricted Net Position Utilized to Balance Proposed Budget Unrestricted Net Position Utilized in Proposed Capital Budget Appropriation to Municipality/County (3)

PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR Total Unrestricted Net Position Utilized in Proposed Budget

(4)

1,597,687	×			•	1,140,801 \$1,597,687
1,140,801	ř	£	â	3	1,140,801
					⟨^
e:	91	x	ě.	3	36
					↔
456,886	(P)	*	E.	(1)	456,886
					↔
ı			ı	U	*
					÷

(1) Total of all operations for this line item must agree to audited financial statements.

(2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.

(3) Amount may not exceed 5% of total operating appropriations. See calculation below.

\$ 204,228 \$ Maximum Allowable Appropriation to Municipality/County

\$ 204,228

(4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

### 2021 (2021-2022) KEANSBURG

(Name)

## HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

### 2021 (2021-2022) CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

### KEANSBURG (Name)

	FISCAL YEAR:	FROM:	10-01-2021	ro:	09-30-2022			
It is hereby certif of the Capital Bu by the governing	dget/Program approv	Authority Cap ed, pursuant to	ital Budget/Progra N.J.A.C. 5:31-2.2	, along v	ed hereto is a true copy with the Annual Budget he day o			
			OR					
<b>NOT</b> to adopt a C	Capital Budget /Prog	ram for the afor	esaid fiscal year, p	ursuant	Authority have elected to N.J.A.C. 5:31-2.2 for ring a RAD conversion			
Officer's	Signature:	<u> </u>						
Name:		GLA DZEMA						
Title:	EXEC	UTIVE DIRE	CTOR					
Address:		1 CHURCH STREET KEANSBURG, NJ 07734						
Phone Nu	mber: 732-7	87-6151	Fax Number: 732-787-5204					
E-mail ad	dress ddzen	na@perthambo	yha.org					

### 2021 (2021-2022) CAPITAL BUDGET/PROGRAM MESSAGE

### KEANSBURG Housing Authority

(Name)

FISCAL YEAR:

FROM:

10-01-2021

TO: 09-30-2022

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

- 1. Has each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program (This may include the governing body or certain officials such as planning boards, Construction Code Officials) as to these Projects?
- 2. Has each capital project/project financing been developed from a specific plan or report and have the full life cycle costs of each been calculated?
- 3. Has a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared?
- 4. If amounts are on Page CB-3 in the column Debt Authorizations. Indicate the primary source of funding the debt service for the Debt Authorizations (Example HUD Funding or Other sources)
- 5. Have the current capital projects been reviewed and approved by HUD?

Add additional sheets if necessary.

### **Proposed Capital Budget**

### Keansburg Housing Authority

For the Period October 1, 2021

to

September 30, 2022

		Funding Sources							
	Estimated Total	Unrestricted Net	Renewal &	<b>5</b> 1.					
	Cost	Position Utilized	Replacement Reserve	Debt	Carrier I Carrie	Other			
Public Housing Management		T OSICIOTI OTINZEO	vezetve	Authorization	Capital Grants	Sources			
Type in Description	\$ -								
Type In Description									
Type in Description	-								
Type in Description									
Total									
Section 8									
Type in Description	-								
Type in Description		Į.							
Type in Description									
Type in Description	3.00								
Total		-	-						
Housing Voucher									
Type in Description	-								
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Type in Description									
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Total	-	(# I	-		-				
Other Programs									
Type in Description	1900								
Type in Description	540								
Type in Description	121								
Type in Description	127								
Total		(#.9	-	-					
TOTAL PROPOSED CAPITAL BUDGET	\$	\$ -	\$ -	\$ -	\$ - :	5 -			

Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

### **5 Year Capital Improvement Plan**

**Keansburg Housing Authority** 

For the Period

October 1, 2021

to

September 30, 2022

Fiscal Year Beginning in

	Estimate Cos		Current Budge Year 2022	et 202	3	2024	2025	2026	2027
Public HousIng Management									
Type in Description	\$	+	\$	=					
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Type In Description		-		9					
Type in Description		-							
Total		2		:!!				-	
Section 8	,		***************************************						
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Total		-		÷	975	-	-	:+	
Housing Voucher									
Type in Description	6	1722		*					
Type in Description		72		9					1
Type in Description		160		2					1
Type in Description		14		3					
Total		-		3	-				
Other Programs		72							
Type in Description									
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Type in Description		2		-					1
Type in Description		14		-					
Total			-	-	*			-	
TOTAL	\$	-	\$	- \$	- \$	- \$	- (		\$ -

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

### **5 Year Capital Improvement Plan Funding Sources**

Keansburg Housing Authority
For the Period October 1, 2021 to September 30, 2022

			Funding Sources							
				Renewal &						
		ted Total	Unrestricted Net	Replacement	Debt					
	C	ost	Position Utilized	Reserve	Authorization	<b>Capital Grants</b>	Other Sources			
Public Housing Management										
Type In Description	\$	-								
Type in Description		-								
Type in Description		-					1			
Type in Description		) <b>*</b> 0								
Total				-	-					
Section 8										
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Total				2		-				
Housing Voucher										
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Total										
Other Programs				21						
Type in Description		:#0								
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Total	+									
TOTAL	\$		\$ -	\$ -	\$ -	\$ -	\$ -			
Total 5 Year Plan per CB-4	\$	120			3	2 -	<b>P</b> -			
Balance check										
paratice check		- If	amount is other than ze	ero, verify that proj	ects listed above m	atch projects listed	d on CB-4.			

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.