Authority Budget of:

ADOPTED COPY

Keansburg Housing Authority

State Filing Year

2019

For the Period:

October 1, 2019

to

September 30, 2020

www.keansburgha.org
Authority Web Address

APARON FED COPY



Division of Local Government Services

A BELL COVERNO

2019 HOUSING AUTHORITY BUDGET

Certification Section

KEANSBURG

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM OCTOBER 1, 2019 TO SEPTEMBER 30, 2020

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. Curent CPA, RMA Date: 9/6/2019

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. Circh CPA, RMA Date: 9/19/2017

2019 PREPARER'S CERTIFICATION

KEANSBURG

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM: 10-1-2019

TO:

9-30-2020

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:	Jm Full				
Name:	THOMAS FURLONG, CPA				
Title:	DIRECTOR OF FINAN	DIRECTOR OF FINANCIAL OPERATIONS			
Address:	881 AMBOY AVE., P.O	881 AMBOY AVE., P.O. BOX 390			
	PERTH AMBOY, NJ 0	PERTH AMBOY, NJ 08862			
Phone Number:	732-826-3118	Fax Number:	732-826-3111		
E-mail address	tfurlong@perthamboyha	a.org			

2019 APPROVAL CERTIFICATION

KEANSBURG

(Name)

HOUSING AUTHORITY BUDGET

10-1-2019

TO:

9-30-2020

FISCAL YEAR: FROM:

true c body N.J. <u>A</u> It is	of the Annual Budg of the <u>KEANSBURG</u> .C. 5:31-2.3, on the	Housing Authority Budge get and Capital Budget/Pr G Housing Authority 10 th day of JULY e recorded vote appearing of the governing body to	ogram approved ty, at an open pu , 2019 ag in the resolut	by resolution by the government by the governmen	erning ant to
	Officer's Signature:	H			
	Name:	DOUGLAS DZEMA			
	Title:	EXECUTIVE DIRECT	OR		
	Address:	1 CHURCH STREET			
		KEANSBURG, NJ 077	34		
	Phone Number:	732-787-6151	Fax Number:	732-787-5204	
	E-mail address	ddzema@perthamboyha	ı.org		

INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.keansburgha.org
website. The operations a	ne purpose of the web and 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
x	information (Simila other types of Char	mprehensive Annual Financial Report (Unaudited) or similar financial r information are items such as Revenue and Expenditures Pie Charts or rts, 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		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		ant to the "Open Public Meetings Act" for each meeting of the Authority, e, date, location and agenda of each meeting
x		tes of each meeting of the Authority including all resolutions of the board and at least three consecutive fiscal years
X		ddress, electronic mail address and phone number of every person who supervision or management over some or all of the operations of the
X		dvisors, consultants and any other person, firm, business, partnership, organization which received any remuneration of \$17,500 or more during the

It is hereby certified by the below authorized representative of the Authority that the Authority's website or webpage as identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as listed above. A check in each of the above boxes signifies compliance.

preceding fiscal year for any service whatsoever rendered to the Authority.

Name of Officer Certifying compliance

Title of Officer Certifying compliance

Signature

DOUGLAS DZEMA

EXECUTIVE DIRECTOR

Page C-4

2019 HOUSING AUTHORITY BUDGET RESOLUTION

KEANSBURG (Name)

FISCAL YEAR:	FROM:	10/1/2019	TO:	9/30/2020)
WHEREAS, the Annual Budget and Capita beginning, <u>10/1/2019</u> and ending, <u>9/30/</u> Housing Authority at its open public meeting	2020 has been	presented before	ore the governing	ng Authority for good good good good good good good go	or the fiscal year KEANSBURG
WHEREAS, the Annual Budget as introduced including any Accumulated Deficit if any,	d reflects Total R of \$3,240,7	evenues of \$_10 a	3,266,720 nd Total Unres	, Tota	l Appropriations, sition utilized of
WHEREAS, the Capital Budget as introduced Total Unrestricted Net Position planned to be	reflects Total Ca utilized as fundin	pital Appropri g thereof, of \$	ations of \$	0 and	and
WHEREAS, the schedule of rents, fees and canticipated revenues to satisfy all obligations outlays, debt service requirements, and to precontracts and agreements; and	to the holders o	f bonds of the	Authority, to 1	neet operating	expenses, capital
WHEREAS, the Capital Budget/Program, purfunds; rather it is a document to be used as authorization to expend funds for the purpose resolution, by a project financing agreement, or other means provided by law.	s part of the said es described in th	Authority's priscible Authority's principle	lanning and ma	anagement objet be granted els	ectives. Specific ewhere; by bond
NOW, THEREFORE BE IT RESOLVED, by public meeting held on	that the Anr	nual Budget, i	ncluding all rel	ated schedules.	and the Capital
BE IT FURTHER RESOLVED, that the anti- meet all proposed expenditures/expenses and a outstanding debt obligations, capital lease arra-	all covenants, terr	ns and provisi	ons as stipulated	l in the said Hou	using Authority's
BE IT FURTHER RESOLVED, that the gov Annual Budget and Capital Budget/Program for	erning body of the adoption on	ne <u>KEANS</u> 9/11/2019	BURG Hous	sing Authority	will consider the
tal .			7.12	a	
(Secretary's Signature)			(Date)	*	91
Governing Body	Recorded Vot	e			: THE 0
Member:	Aye	Nay	Abstain	Absent	
DIANE NELSON	*	ž)			
CAROL DeBLASIO	×				
MARY FOLEY	×				
MATTIE ANDERSON	×				
YOLANDA ANN COMMARATO	×				
THOMAS FOLEY				×	
TAMMY CARRIER	×				
	Page (C-5			

2019 ADOPTION CERTIFICATION

KEANSBURG

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

10/1/2019

TO:

9/30/2020

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>16TH</u> day of <u>SEPTEMBER</u>, <u>2019</u>.

Officer's Signature:	\doldow				
Name:	DOUCLAS DZEMA				
Title:	EXECUTIVE DIRECT	EXECUTIVE DIRECTOR			
Address:	1 CHURCH STREET	1 CHURCH STREET			
	KEANSBURG, NJ 077	34			
Phone Number:	732-787-6151	Fax Number:	732-787-5204		
E-mail address	ddzema@perthamboyha	.org			

	Vs.		

2019 ADOPTED BUDGET RESOLUTION

KEANSBURG (Name)

HOUSING AUTHORITY

	FISCAL YEAR:	FROM:	10/1/2019	TO:	9/30/2020	
year beginning 10/		30/2020 has be	en presented	for adoption b	Housing Authority for the fiscal efore the governing body of the nd	
appropriation in the		set forth in the	introduced an	d approved bu	cts each item of revenue and idget, including all amendments ent Services; and	
Appropriations, inclu	nual Budget as presented ding any Accumulated De gand				3,266,720 , Total Total Unrestricted Net Position	
	ital Budget as presented fo					
public meeting held of KEANSBURG	on9/14/2019	that the A	nnual Budget ginning, <u>10</u> /	and Capital B	_ Housing Authority, at an open udget/Program of the ending, 9/30/2020 _ is hereb	
item of revenue and a	appropriation in the same	amount and title	as set forth in	the introduced	esented for adoption reflects each d and approved budget, including Local Government Services.	
(Secretary's Signature	e)			Qlul. (Date)	9	
Governing Body Member:	R	lecorded Vote Aye	Nay	Abstain	Absent	

DIANE NELSON CAROL DeBLASIO MARY FOLEY MATTIE ANDERSON YOLANDA ANN COMMARATO THOMAS FOLEY TAMMY CARRIER

2019 HOUSING AUTHORITY BUDGET

Narrative and Information Section

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	es G	

2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS KEANSBURG

(Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:

10/1/2019

TO:

9/30/2020

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

- 1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. 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. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). SEE ATTACHED
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget.

SEE ATTACHED

- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. NONE
- 4. 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
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). N/A
- 6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 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 caused by the implementation of GASB 68, 45) PHA is budgeting a surplus each year in order to pay down the GASB 68 deficit.

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KEANSBURG HOUSING AUTHORITY BUDGET VARIANCES IN EXCESS OF 10% September 30th, 2020

Operating Revenues:

Dwelling Rent- (-100%) PHA will be converting to Rad effective 4/1/19

HUD Operating Subsidy-(-100%) PHA will be converting to Rad effective 4/1/19

Frauds-(-50%) Based on prior year actuals.

Laundry Commissions-(-100%) PHA will be converting to Rad effective 4/1/19

Capital Fund Operations-(-100%) PHA will be converting to Rad effective 4/1/19

Operating Appropriations:

Admin Salary & Wages-(-11.7%) Due to retirement of an administrative employee and replaced by a lower salaried individual.

Admin Fringe Benefits-(-18.5%) Due to the elimination of maintenance employees due to RAD conversion and a reduced retiree benefit cost.

Maintenance & Operation Salary & Wages-(-100%) PHA will be converting to Rad effective 4/1/19

Utility Labor Salary & Wages-(-100%) PHA will be converting to Rad effective 4/1/19

Maintenance Fringe Benefits-(-100%) PHA will be converting to Rad effective 4/1/19

Tenant Services- (-100%) PHA will be converting to Rad effective 4/1/19

Maintenance & Operations-(-100%) PHA will be converting to Rad effective 4/1/19

Insurance-(-51.9%) PHA will be converting to Rad effective 4/1/19

Utilities-(-90.4) PHA will be converting to Rad effective 4/1/19

PILOT-(-100%) PHA will be converting to Rad effective 4/1/19

Collection Losses-(-100%) PHA will be converting to Rad effective 4/1/19

Other General Expense-(-61.6%) Due to the reduction in RAD conversion expenses.

		9	

HOUSING AUTHORITY CONTACT INFORMATION 2019

Please complete the following information regarding this Housing Authority. $\underline{\textbf{All}}$ information requested below must be completed.

Name of Authority:	KEANSBURG HOUSING AUTHORITY					
Federal ID Number:	22-1757617					
Address:	1 CHURCH STREET					
City, State, Zip:	KEANSBURG	KEANSBURG NJ 07				
Phone: (ext.)	732-787-6151	Fax:	732-7	87-5204		
Preparer's Name:	THOMAS FURLONG					
Preparer's Address:	881 AMBOY AVENUE, P.C). BOX 390)			
City, State, Zip:	PERTH AMBOY NJ 088					
Phone: (ext.)	732-826-3118	Fax:	732-8	26-3111		
E-mail:	tfurlong@perthamboyha.org					
Chief Executive Officer:	DOUGLAS DZEMA					
Phone: (ext.)	732-826-3114	Fax:	732-82	6-3111		
E-mail:	ddzema@perthamboyha.or		132-02	0-3111		
CILL ATILL A LOGGE						
Chief Financial Officer:	NONE					
Phone: (ext.)	Fax	X:				
E-mail:						
Name of Auditor:						
Name of Firm:	NOVOGRADAC & CO., I	LLP				
Address:	1433 HOOPER AVE., SUI	TE 329				
City, State, Zip:	TOMS RIVER		NJ	08753		
Phone: (ext.)	732-503-4257	Fax:	732-34	1-1424		
E-mail:	rich.larsen@novoco.com					

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

KEANSBURG (Name)

	FISCAL YEAR: FROM: 10/1/2019 TO: 9/30/2020							
	Provide the number of individuals employed in (Use Most Recent W-3 Available 2017 or 2018) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 6							
2)	Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2017 or 2018) Transmittal of Wage and Tax Statements: 211,163.81							
3)	Provide the number of regular voting members of the governing body: 7							
	Provide the number of alternate voting members of the governing body: 0							
7) 5)	Did any person listed on Page N-4 have a family or business relationship with any other person listed							
٠,	on Page N-4 during the current fiscal year? <u>yes</u> If "yes," attach a description of the relationship							
	including the names of the individuals involved and their positions at the Authority. Many & Thomas Foley are							
6)	Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal mother s. cor							
٠,	5) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal mother & syear (Most Recent Filing that March 31. 2018 or 2019 deadline has passed 2018 or 2019) because							
	of their relationship with the Authority file the form as required? (Checked to see if individuals							
	actually filed at http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html before answering)							
	yes If "no," provide a list of those individuals who failed to file a Financial Disclosure							
	Statement and an explanation as to the reason for their failure to file.							
7)	Does the Authority have any amounts receivable from augment or former commission and afficiency and any amounts receivable from augment or former commission and afficiency and any amounts receivable from augment or former commission and afficiency and any amounts are considered.							
′)	Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? no If "yes," attach a list of those individuals,							
	their position, the amount receivable, and a description of the amount due to the Authority.							
8)	Was the Authority a party to a business transaction with one of the following parties:							
0)	a. A current or former commissioner, officer, key employee, or highest compensated employee?							
	no							
	b. A family member of a current or former commissioner, officer, key employee, or highest							
	compensated employee? no							
	c. An entity of which a current or former commissioner, officer, key employee, or highest							
	compensated employee (or family member thereof) was an officer or direct or indirect owner?							
	no							
	If the answer to any of the above is "yes," attach a description of the transaction including the name							
	of the commissioner, officer, key employee, or highest compensated employee (or family member							
	thereof) of the Authority; the name of the entity and relationship to the individual or family member;							
	the amount paid; and whether the transaction was subject to a competitive bid process.							
9)	Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal							
,	benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment							
	contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any							
	other person designated by the transferornoIf "yes," attach a description of the							
	arrangement, the premiums paid, and indicate the beneficiary of the contract.							
	5							

10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. Attach a narrative of your Authorities procedures for all employees. No one Listed on pg. N-4 receives Compensation.	
11) Did the Authority pay for meals or catering during the current fiscal year and provide an a detailed list of all meals and/or catering invoices for the current fiscal year and provide an	
12) Did the Authority pay for travel expenses for all travel expenses for the current fiscal year and If "yes," attach a detailed list of all travel expenses for the current fiscal year and	
comployee of the Authority: a. First class or charter travel no b. Travel for companions no c. Tax indemnification and gross-up payments no	
e. Housing allowance or residence for personal asset in personal asset in payments for business use of personal residence in payments for business use of personal residence in payments for business use of personal use in payments for business use of personal use in payments in payments in payments in payments in payments in personal services (i.e.: maid, chauffeur, chef) in payments in payments in payments in payments in personal use in payments	
14) Did the Authority follow a written policy regarding payment by employees and/or commissioners during the course of Authority business and does that policy by employees and/or commissioners 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 is	8
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 tornal considered discretionary bonuses? contingent upon the performance of the Authority or that were considered discretionary bonuses?	
17) Did the Authority comply with its Continuing Disclosure Agreements, annual operating data, and notice of 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 material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace MACCESS (EMMA) as required? N/A If "no," attach a description of the Authority's plan to	of
ensure compliance with its Continuing Disclosure Agreement of Housing and Urban Development or 18) Did the Authority receive any notices from the Department of Housing and Urban Development or any other entity regarding maintenance or repairs required to the Authority's facilities to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? 10	If
the amount of the fine or assessment. 20) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? 10 If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.	5

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

KEANSBURG

(Name)

FISCAL YEAR:

FROM:

10/1/2019

TO:

9/30/2020

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.
- 2) 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 all 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: 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, 2019 Most recent available W-2 and 1099 should be used (2017 or 2018 Forms)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 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.

Average Hours Average Hours Per Week Commissioner Name Title Position Position Assorting Assorting Analysis Assorting Assortin	snung pudits /Arejes Former Highest Compensated	Other (auto Other (auto allowance, ampunt of other expense compensation from the payment in from the heard of health (health benefits, etc.) benefits, etc.)	Total Compensation from Authority	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (1) See note Below Keans, Eband of Ed	Positions held at Other Public Entitles Listed in Colitinn O	Average Hours per Week Dedicated to Positions at Other public Entiries Listed In Column O	Repor Comper from (Public E	Estimated amount of other compensation from Orber Public Entitle (health benefits, pension, payment in lieu of health innefits ere?)	Total Compensation All Public
Average Hours Per Week Commissionet Dedicated Position Chairmercan S X X S X	Base Salary/ Stipend		Total Compensation from Authority	iames of Other Public cities where Individual is an Employee or miber of the Governing Body (1) See note below and, Board of Fei		Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column 0			Total Compensation All Public
Average Hours Per Week Commissioner Position Chainseron S X X Average Hours Per Week Position S X X X	Base Salary/ Stipend		Total Compensation from Authority	idities where Individual is an Employee or in the for the Governing Body (1) See note below arts. Board of Fed		Week Dedicated to Positions at Other Public Entities Litted In Column O			Total Compensation All Public
Average Hours and Performance Performance Performance Profition Profit Pr	Base Salary/		Total Compensation from Authority	is an Employee or mber of the Governing Body (1) See note below ans, Board of Ed		Positions at Other Public Entities (Etod In Column O	- W. C.		Total Compensation All Public
per Week Dedicated of particular Position Dedicated of particular position Dedicated of particular particul	Base Salary/		Total Compensation from Authority	mber of the Governing Body (1) See note below ans, Board of Ed		Other Public Entities Litted In Column O			Compensation All Public
Title Position 5 X X	Stipend	_	from Authority	below ans, Board of Ed	Column O	In Column O		Samplify etc.)	ALLFUZIK
lug.	None		. Kea	ans, Board of Ed			l	The state of the s	Entities
	IN COLUE		The second second		Secretary	\$ 40	N AUCT		5 40,471
2 Carol DeBlasio Vice Chair 5 X X	None		D Xea		Retired	0			0
3 Mary Foley Commissioner 5 X	None		0 MC	0 MC Bayshore Outfall Auth. Commissioner	Commissioner	и	4,300		4,300
a Martie Anderson Commissioner 5 X	Nane		o Nane	36					0
5 Yolanda Ann Commarato Commissioner 5 X	None		0 Nare	36					Û
6 Thomas Foley Cormπissioner S X	None		0 Kear	0 Keansburg Borough	Deputy Mayor, Planning Bo	UTI	1,200		1,200
7 Yammy Carrier Commissioner 5 X	None		0 None	16					0
8 Douglas Dzema Executive Director 8 X	Nobe		0 Pert	0 Perth Amboy H.A.	Executive Director	35+	20B,9B9	79,000	287,389
9 Thomas Furlong Director of Finance 32	None		D Perl	0 Perth Ambay H.A.	Director of Finance	32	107,582	49,000	156,592
	α		0						0
			0						0
			0						0
			0						0
			0						0
			0						0

(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

September 30, 2020

ţ

Keansburg Housing Authority
Joctober 1, 2019

For the Period

	# of Covered Members	Annual Cost Estimate per Fmolovee	Total Cost Estimate	# of Covered Members	Annual Cost			
	(Medical & Rx)	Proposed	Proposed	(Medical & Rx)	per Employee	Total Prior Year		% Increase
	Proposed Budget	Budget	Budget	Current Year	Current Year	Cost	(Decrease)	(Decrease)
Active Employees - Health Benefits - Annual Cost								
Single Coverage			\$	1	\$ 12,086	\$ 12,086	\$ (12,086)	-100.0%
Parent & Child	1	22,331	22,331	ਜ	21,787	21,787	544	2.5%
Employee & Spouse (or Partner)						(U	ii.	#DIV/0!
Family						7.	1	#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)			(632)	有及原用的		(616)	(16)	7.6%
Subtotal	1		21,699	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	33,257	(11,558)	-34.8%
							111	
Commissioners - Health Benefits - Annual Cost								
Single Coverage			245				OF	#DIV/0!
Parent & Child						j	×	#DIV/0i
Employee & Spouse (or Partner)			19			Ē	90.	#DIV/0!
Family			*			×	er.	#DIN/0i
Employee Cost Sharing Contribution (enter as negative -)							e.	#DIV/0j
Subtotal	0	HIS SAM	67.	0		100	э	#DIV/0i
							,	
Retirees - Health Benefits - Annual Cost								
Single Coverage	П	4,592	4,592	1	4,480	4,480	112	2.5%
Parent & Child			x			**	ı	#DIV/0!
Employee & Spouse (or Partner)	1	8,672	8,672	Н	8,460	8,460	212	2.5%
Family	1	2,180	2,180	1	2,126	2,126	54	2.5%
Employee Cost Sharing Contribution (enter as negative -)							9	#DIV/0i
Subtotal	3		15,444	3		15,066	378	2.5%
GRAND TOTAL	4		\$ 37,143	5	V.T.)	\$ 48,323	\$ (11,180)	-23.1%
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	Answer in Box)	-	YES	Yes or No				
Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	ነ? (Place Answer in Bo		YES	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, 2019

t 2

September 30, 2020

Legal Basis for Benefit

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

Agreement (check applicable items) Employment leubivibal Resolution Agreement Labor Approved 6,916 214 6,245 457 Absence Liability **Dollar Value of** Compensated Accrued Total liability for accumulated compensated absences at beginning of current year **Gross Days of Accumulated Compensated Absences at** beginning of Current Year 162 V hrs & 255.5 S hrs 10 V hrs & 11.5 S hrs 12.5 V hrs Individuals Eligible for Benefit Joseph Garofano Paul McAllister Pat Mahoney

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

×		

Schedule of Shared Service Agreements

Keansburg Housing Authority

October 1, 2019

For the Period

September 30, 2020

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services.

דווופן ווופ אומופת אפו אורכ חלו בכיווביור	בוונבו וזוכ אומוכת אכועוב תלוכביווכיווא יוותר יווב שמיונטיון בתורכיות ביומתמבי זו מיים יבכינית) ביוב פיייכיית					Amount to be	t to be
				Agreement		Received by/	/kq pa
			Comments (Enter more specifics if	Effective	Agreement	Paid from	from
Name of Entity Providing Service	Name of Entity Receiving Service Type of Shared Service Provided	Type of Shared Service Provided	needed)	Date	End Date	Authority	ority
Perth Amboy Housing Authority	ř	Management Services		1/1/2019	1/1/2019 12/31/2019 \$		33,209
Perth Amboy Housing Authority	Keansburg Housing Authority	Accounting Services		1/1/2019	1/1/2019 12/31/2019 \$		17,566
			If No Shared Services X this Box		" —		

,		

2019 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Keansburg Housing Authority October 1, 2019 to

For the Period

September 30, 2020

% Increase

\$ Increase

		FY	FY 2020 Proposed Budget	d Budget			FY 201 Adopted	FY 2018.2019 Adopted Budget	(Decrease) Proposed vs. Adopted	(Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations	Tot	Total All Operations	All Operations All Operations	All Operations
REVENUES										
Total Operating Revenues	٠ •	₩.	\$ 3,266,220	\$	\$>	3,266,220	٠,	3,673,840	\$ (407,620)	-11.1%
Total Non-Operating Revenues)(i		200		a	200		25,460	(24,960)	-98.0%
Total Anticipated Revenues			3,266,720		n)	3,266,720		3,699,300	(432,580)	-11.7%
APPROPRIATIONS										
Total Administration	8		302,710		3965	302,710		337,085	(34,375)	-10.2%
Total Cost of Providing Services	.v•		2,938,000		а	2,938,000		3,347,215	(409,215)	-12.2%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXX		ē.		œ	(*)	#DIV/0!
Total Operating Appropriations			3,240,710		110	3,240,710		3,684,300	(443,590)	-12.0%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXXXX	XXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXX	×	* * *		x x 6	K 0 1	i0/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Accumulated Deficit					a 4 8					#DIV/0i
Total Appropriations and Accumulated Deficit	301	200	3,240,710		æ	3,240,710		3,684,300	(443,590)	-12.0%
Less: Total Unrestricted Net Position Utilized		a			8.			1		#DIV/0!
Net Total Appropriations			3,240,710		Ġ	3,240,710		3,684,300	(443,590)	-12.0%
ANTICIPATED SURPLUS (DEFICIT)	⋄	\$	\$ 26,010	\$ (\$	26,010	ς.	15,000	\$ 11,010	73.4%

Revenue Schedule

Keansburg Housing Authority

For the Period

October 1, 2019

to

September 30, 2020

% Increase

\$ Increase

							(Decrease)	(Decrease)
						FY 2018.2019	Proposed vs.	Proposed vs.
		EV 2020	Proposed L	Sudaet		Adopted Budget	Adopted	Adopted
a	Public Housing	FIZUZU	Housing	Judget	Total All	Total All		
	Management	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operations
OPERATING REVENUES								
Rental Fees								
Homebuyers' Monthly Payments					\$ -	\$	\$ -	#DIV/0!
Dwelling Rental						77,780	(77,780)	
Excess Utilities					*	>		#DIV/01
Non-Dwelling Rental					8	2		#DIV/01
HUD Operating Subsidy					*	76,410	(76,410)	
New Construction - Acc Section 8							-	#DIV/0!
Voucher - Acc Housing Voucher			3225220		3,225,220	3,475,900	(250,680)	-7.2%
Total Rental Fees			3,225,220		3,225,220	3,630,090	(404,870)	-11.2%
Other Operating Revenues (List)								
Frauds			1000		1,000	2,000	(1,000)	-50.0%
Portable Fees			40000		40,000	40,000	38	
Laundry Commissions						1,750	(1,750)	-100.0%
Type in (Grant, Other Rev)					=			#DIV/01
Type in (Grant, Other Rev)						4	52	#DIV/01
Type in (Grant, Other Rev)					9	30		#DIV/01
Type in (Grant, Other Rev)							74	#DIV/0!
Type in (Grant, Other Rev)					· ·	183	55	#DIV/0!
Type in (Grant, Other Rev)							02	#DIV/0!
Type in (Grant, Other Rev)					*		SE	#DIV/0!
Type in (Grant, Other Rev)						3	72	#DIV/0!
Type in (Grant, Other Rev)					*	360	.06	#DIV/0!
Type in (Grant, Other Rev)							72	#DIV/0!
Type in (Grant, Other Rev)							39	#DIV/01
Type in (Grant, Other Rev)							72	#DIV/0!
							De	#DIV/0I
Type in (Grant, Other Rev)							172	#DIV/0!
Type in (Grant, Other Rev)								
Type in (Grant, Other Rev)						·	12	#DIV/0!
Type in (Grant, Other Rev)								
Type in (Grant, Other Rev)			41,000		41,000	43,750	(2,750	
Total Other Revenue			3,266,220			3,673,840	(407,620	_
Total Operating Revenues			3,200,220		5/200/220		****	
NON-OPERATING REVENUES								
Other Non-Operating Revenues (List)					_	25,000	(25,000	-100.0%
Capital Fund Operations						23,000	(==,===	#DIV/0!
Type in						76		
Type in					1	0.00		
Type in						-		#DIV/0!
Type in					9	190	_	#DIV/01
Type in						25,000	(25,000	-
Total Other Non-Operating Revenue	1.4		:+0			23,000	\25,500	, 200.07.
Interest on Investments & Deposits (List)			F00		500	460	40	8.7%
Interest Earned			500		300	400		#DIV/0!
Penalties								#DIV/0!
Other			F00		500	460	40	-
Total Interest					- 500 - 500	25,460	(24,960	_
Total Non-Operating Revenues	7/8/		500			\$ 3,699,300	\$ (432,580	
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 3,266,720	\$	- \$ 3,266,720	2 3,555,200	3 (432,380	-11./7

Prior Year Adopted Revenue Schedule

Keansburg Housing Authority

OPERATING REVENUES Rental Fees Homebuyers' Monthly Payments Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	77,780 76,410 154,190	Section 8	3,475,900 3,475,900 2,000 40,000	Other Programs	\$ - 77,780 - 76,410 - 3,475,900 3,630,090
OPERATING REVENUES Rental Fees Homebuyers' Monthly Payments Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	77,780 76,410 154,190		3,475,900 3,475,900 2,000	Other Programs	\$ - 77,780 - 76,410 - 3,475,900 3,630,090
Rental Fees Homebuyers' Monthly Payments Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	76,410 154,190	*	3,475,900 2,000	-	77,780 - 76,410 - 3,475,900 3,630,090
Homebuyers' Monthly Payments Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	76,410 154,190	•	3,475,900 2,000		77,780 - 76,410 - 3,475,900 3,630,090
Dwelling Rental Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	76,410 154,190	•	3,475,900 2,000		77,780 - 76,410 - 3,475,900 3,630,090
Excess Utilities Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	76,410 154,190	-	3,475,900 2,000	-	76,410 - 3,475,900 3,630,090
Non-Dwelling Rental HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	154,190	•	3,475,900 2,000	-	3,475,900 3,630,090
HUD Operating Subsidy New Construction - Acc Section 8 Voucher - Acc Housing Voucher	154,190	*	3,475,900 2,000	+	3,475,900 3,630,090
New Construction - Acc Section 8 Voucher - Acc Housing Voucher	154,190	•	3,475,900 2,000	-	3,475,900 3,630,090
Voucher - Acc Housing Voucher		•	3,475,900 2,000	-	3,630,090
			3,475,900 2,000	*	3,630,090
		•	2,000	-	
Total Rental Fees	1750		·		2,000
Other Revenue (List)	1750		·		2,000
Frauds	1750		40,000		
Portable Fees	1750				40,000
Laundry Commissions					1,750
Type in (Grant, Other Rev)					*
Type in (Grant, Other Rev)					12
Type in (Grant, Other Rev)					3
Type in (Grant, Other Rev)					=
Type in (Grant, Other Rev)					*
Type in (Grant, Other Rev)					12
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					1700 1700
Type in (Grant, Other Rev)					.
Type in (Grant, Other Rev)					:=:
Type in (Grant, Other Rev)					323
Type in (Grant, Other Rev)					3
Type in (Grant, Other Rev)					12.5
Type in (Grant, Other Rev)					Æ
Type in (Grant, Other Rev)					54X
Type in (Grant, Other Rev)					- (2)
Type in (Grant, Other Rev)					101
Total Other Revenue	1,750	₩	42,000	: #):	43,750
Total Operating Revenues	155,940	3	3,517,900	(4)	3,673,840
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)					•
Capital Fund Operations	25,000				25,000
Type in					25:
Type in					-
Type in					520
Type in					
Type in					
Other Non-Operating Revenues	25,000	i i	12		25,000
Interest on Investments & Deposits					
Interest Earned			460		460
Penalties					./5!
Other					
Total Interest			460	(#S	460
Total Non-Operating Revenues	25,000		460	112	25,460
	180,940	\$	\$ 3,518,360	\$ -	\$ 3,699,300

Appropriations Schedule

Keansburg Housing Authority

For the Period

the line item must be itemized above.

October 1, 2019

September 30, 2020

\$ Increase

% Increase

									\$ Increase (Decrease)	% Increase (Decrease)
								018.2019	Proposed vs.	Proposed vs.
		FY	2020 Propos	ed Budget			Adop	ted Budget	Adopted	Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total Operat			otal All erations	All Operations	All Operations
OPERATING APPROPRIATIONS										
Administration			73,740		1\$	73,740	\$	83,500	\$ (9,760)	-11.7%
Salary & Wages			90,970		*	90,970	*	111,585	(20,615)	
Fringe Benefits			10,000		1	10,000		10,000	9	0.0%
Legal			3,000			3,000		3,000	100	0.0%
Staff Training			3,000			3,000		3,000	(in)	0.0%
Travel			13,000			13,000		14,000	(1,000)	-7.1%
Accounting Fees			7,000		1	7,000		7,000	766	0.0%
Auditing Fees			102,000			102,000		105,000	(3,000)	-2.9%
Miscellaneous Administration*			302,710			302,710	_	337,085	(34,375)	
Total Administration			302,710			302,720	-	337,000	(= ,,===,	•
Cost of Providing Services					7	-		50	12	#DIV/01
Salary & Wages - Tenant Services	1							28,480	(28,480)	
Salary & Wages - Maintenance & Operation						-		20,100	(==/:==/	#DIV/01
Salary & Wages - Protective Services						- 2		370	(370)	•
Salary & Wages - Utility Labor					1			5,430	(5,430)	
Fringe Benefits					1	- 2		630	(630)	
Tenant Services			5.000			5,000		52,160	(47,160)	
Utilities	1		5,000			3,000		29,500	(29,500)	
Maintenance & Operation						- 1		25,500	(25,500)	#DIV/0I
Protective Services			40.000		1	12 000		27,000	(14,000)	
Insurance			13,000			13,000		2,525	(2,525)	
Payment in Lieu of Taxes (PILOT)						2.5		2,323	(2,323)	#DIV/01
Terminal Leave Payments									(700)	
Collection Losses						F 000		700	•	
Other General Expense			5,000			5,000		13,020	(8,020)	,
Rents			2,910,000		2,	910,000		3,182,400	(272,400)	, -6.6% #DIV/01
Extraordinary Maintenance					1	15				
Replacement of Non-Expendible Equipment			5,000			5,000		5,000	5	0.0%
Property Betterment/Additions						-			-	#DIV/01
Miscellaneous COPS*								-	110001	#DIV/01
Total Cost of Providing Services	- TE	140	2,938,000		2,	938,000		3,347,215	(409,215	12.2%
Total Principal Payments on Debt Service in Lieu of										4004/01
Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXX					1272 222	#DIV/01
Total Operating Appropriations	. 121		3,240,710	9	- 3,	240,710		3,684,300	(443,590	12.0%
NON-OPERATING APPROPRIATIONS										
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXX		170		=	-	#DIV/01
Operations & Maintenance Reserve								= :		#DIV/01
Renewal & Replacement Reserve						-		25	-	#DIV/01
Municipality/County Appropriation						120			-	#DIV/01
Other Reserves					il					#DIV/01
Total Non-Operating Appropriations		283	Te:				-	2	9	#DIV/01
TOTAL APPROPRIATIONS			3,240,710		. 3,	240,710		3,684,300	(443,590	
ACCUMULATED DEFICIT								*		#DIV/01
TOTAL APPROPRIATIONS & ACCUMULATED										
DEFICIT	2	22	3,240,710		- 3,	240,710	0.5	3,684,300	(443,590	<u>)</u> -12.0%
UNRESTRICTED NET POSITION UTILIZED										
Municipality/County Appropriation	*	Sec.		8				2		#DIV/01
Other						2,62		*		#DIV/01
Total Unrestricted Net Position Utilized	-					72.				#DIV/01
TOTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 3,240,710	\$	\$ 3,	240,710	\$	3,684,300	\$ (443,590	-12.09
										_

5% of Total Operating Appropriations \$ - \$ - \$ 162,035.50 \$ - \$ 162,035.50

*		
	9	

Prior Year Adopted Appropriations Schedule

Keansburg Housing Authority

		FY 20	018.2019 Adopted Bu	dget	
	Public Housing				Total All
	Management	Section 8	Housing Voucher	Other Programs	Operations
OPERATING APPROPRIATIONS					
Administration					
Salary & Wages	\$ 5,100		\$ 78,400		\$ 83,500
Fringe Benefits	4,570		107,015		111,585
Legal	1,300		8,700		10,000
Staff Training	230		2,770		3,000
Travel	300		2,700		3,000
Accounting Fees	1,700		12,300		14,000
Auditing Fees	680		6,320		7,000
Miscellaneous Administration*	10,030		94,970		105,000
Total Administration	23,910		313,175	(4)	337,085
Cost of Providing Services					i i
Salary & Wages - Tenant Services					U#3
Salary & Wages - Maintenance & Operation	28,480				28,480
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor	370				370
Fringe Benefits	5,430				5,430
Tenant Services	630				630
Utilities	52,160				52,160
Maintenance & Operation	29,500				29,500
Protective Services					1992
Insurance	10,000		17,000		27,000
Payment in Lieu of Taxes (PILOT)	2,525				2,525
Terminal Leave Payments					
Collection Losses	700				700
Other General Expense	8,020		5,000		13,020
Rents	,		3,182,400		3,182,400
Extraordinary Maintenance					120
Replacement of Non-Expendible Equipment	5,000				5,000
Property Betterment/Additions					(#:
Miscellaneous COPS*					1365
Total Cost of Providing Services	142,815	**	3,204,400	190	3,347,215
Total Principal Payments on Debt Service in Lieu of					
Depreciation	XXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	.6
Total Operating Appropriations	166,725		3,517,575	*)	3,684,300
NON-OPERATING APPROPRIATIONS					
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	521
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					98
Municipality/County Appropriation					(*)
Other Reserves					(4)
Total Non-Operating Appropriations	191		-	190	-
TOTAL APPROPRIATIONS	166,725	-	3,517,575	(*)	3,684,300
ACCUMULATED DEFICIT	100,120				
TOTAL APPROPRIATIONS & ACCUMULATED					
	166,725		3,517,575		3,684,300
UNRESTRICTED NET POSITION UTILIZED	100,723	<u>&</u> _	3,317,373		3,00.,000
		_	2	1	12
Municipality/County Appropriation					i i
Other Total Unrestricted Net Position Utilized		3	=======================================	200	-
TOTAL NET APPROPRIATIONS	\$ 166,725		\$ 3,517,575		\$ 3,684,300
IOTAL NET AFFRORMATIONS	7 100,723	Ψ	+ 3,527,575	7	. 3,55.,536

^{*} Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$ 8,336.25 \$ - \$ 175,878.75 \$ - \$ 184,215.00

		s .		

Debt Service Schedule - Principal

		Total Principal	Outstanding	· ·	nar.	33435	7500	51075	Seri	\$	
			Thereafter					162		\$	
ling in		2025					Ü		\$		
		2024					<u>ii</u>		\$		
		2023					W.		\$ -		
ing Authority	Fiscal Year Ending in		2022							\$ -	П
Keansburg Housing Authority			2021							\$	
		Proposed Budget Year	2020					ē		î	
		Adopted Budget	Year 2018.2019	150,000				150,000	150,000	\$	
		Adop	Year	ςş							
	If Authority has no debt X this box			Debt Leveraging CFFP	Type in Issue Name	Type 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.	Moody's Fitch Standard & Poors	N/A N/A N/A	ating N/A N/A N/A	
Indicate the Authority's		Bond Rating	Year of Last Rating	

	8	

Debt Service Schedule - Interest

		Total Interest Payments	Outstanding	il.	29.	SE.	1	0.5	T.	\$	
		Thereafter					3		T		
			2025							\$	
Authority Fiscal Year Ending in		2024					à		\$		
							11		\$		
		2023					ñ.		\$		
ing Authority	Fiscal Yea		2022					Will.		\$ -	
Keansburg Housing Authority			2021								
×		Proposed Budget Year	2020							\$	
		Adopted Budget	Year 2018.2019	3,476				3,476	3,476	\$	
	If Authority has no debt X this box		9	Debt Leveraging CFFP	Type in Issue Name	Type in Issue Name	Type in Issue Name	TOTAL INTEREST	LESS: HUD SUBSIDY	NET INTEREST	

Net Position Reconciliation

Keansburg Housing Authority

For the Period Octo

October 1, 2019

September 30, 2020

2

FY 2020 Proposed Budget

Housing Voucher

Public Housing

Section 8

Management

TOTAL 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)

(835,175)

(366, 126)

15,058

149 (469,049)

885,577

416,677

15,207

885,577

Operations \$ 65,609

Other Programs

\$(351,068)

Total All

15,000

785

14,215

225,923 346,371

396,806

345,212

522,729 691,583

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)

394,137	1	1	1	• 1	394,137
5	*	90			\$
3	ŧ	,		* i	3 \$
206,953					\$ 206,953
*		381	Y.	X	740
187,184	Ķ	30	1	*	187,184 \$
					₩

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)

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

(4)

(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.

\$ 162,036 Maximum Allowable Appropriation to Municipality/County

\$ 162,036

(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.

2019 KEANSBURG

(Name)

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

KEANSBURG

(Name)

10/1/2019

TO:

9/30/2020

FISCAL YEAR: FROM:

day of	rning body of the	Housin	J.A.C. 5:31-2.2, along with g Authority, on the
	C)R	
thority have elected NOT	to adopt a Capital Budge	t /Program for the	KEANSBURG House aforesaid fiscal year, pursu
	^		
Officer's Signature:			
Officer's Signature:	DOUGLAS DZEMA		
		OR	
Name:	DOUGLAS DZEMA	OR	
Name: Title:	DOUGLAS DZEMA EXECUTIVE DIRECT		
Name: Title:	DOUGLAS DZEMA EXECUTIVE DIRECT 1 CHURCH STREET		732-787-5204

2019 CAPITAL BUDGET/PROGRAM MESSAGE

KEANSBURG Housing Authority

(Name)

FISCAL YEAR: FROM: 10/1/2019

2019 **TO**:

9/30/2020

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 the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?
- 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 the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?
- 4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives.
- 5. Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules.
- 6. Have the projects been reviewed and approved by HUD?

Add additional sheets if necessary.

Proposed Capital Budget

Keansburg Housing Authority

For the Period

October 1, 2019

to

September 30, 2020

				nding Sources		
		\ 	Renewal &			
	Estimated Total	Unrestricted Net	Replacement	Debt		Other
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Sources
Public Housing Management						
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TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ =	\$ ==	\$ =	\$ /=	\$ -

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.

9			

5 Year Capital Improvement Plan

Keansburg Housing Authority

For the Period

October 1, 2019

to

September 30, 2020

Fiscal Year Beginning in

	Estimated Total	Current Budget					
	Cost	Year 2020	2021	2022	2023	2024	2025
Public Housing Management		,	,				
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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, 2019 to

September 30, 2020

			Funding Sources						
				Renewal &					
	Estimated Total Cost		Unrestricted Net Position Utilized	Replacement Reserve	Debt Authorization	Capital Grants			
							Other Sources		
Public Housing Management									
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TOTAL	\$	160	\$ -	\$.	\$:=	\$ -	\$ =		
Total 5 Year Plan per CB-4	\$	180							
Balance check	4	- If	amount is other than z	ero, verify that pro	jects listed above	match projects lis	ted 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.

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