## Authority Budget of:

## Salem Housing Authority

**State Filing Year** 

2020

For the Period:

October 1, 2020

to

September 30, 2021

## www.salemhousingauthority.org

**Authority Web Address** 



Division of Local Government Services

## 2020 (2020-2021) HOUSING AUTHORITY BUDGET Certification Section

## 2020 (2020-2021)

## **SALEM**

## HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM Oct 1, 2020 TO Sep 30, 2021

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

Ву:	Date:
	CERTIFICATION OF ADOPTED BUDGET
Budget previously ce	that the adopted Budget made a part hereof has been compared with the approved rtified by the Division, and any amendments made thereto. This adopted Budget is to such amendments and comparisons only.
certified with respect	to such americane and comparisons only.
	State of New Jersey
certifica with respect	State of New Jersey
	State of New Jersey

## 2020 (2020-2021) PREPARER'S CERTIFICATION

## **SALEM**

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

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:	Lulah a.	Kulph a Colini, CPA						
Name:	Ralph A. Polcari, Cl							
Title: Fee Accountant								
Address:	2035 Hamburg Turn	pike – Unit H						
	Wayne, NJ 07470							
Phone Number:	973-831-6969	Fax Number:	973-831-6972					
E-mail address	ralph@polcarico.com	n ·						

## 2020 (2020-2021) APPROVAL CERTIFICATION

## **SALEM**

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

It is hereby certified that the Housing Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the Salem Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 27th day of August, 2020.

It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

Officer's Signature:								
Name:	Paul F. Dice							
Title:	Executive Director							
Address:	205 Seventh Street							
	Salem, NJ 08079							
Phone Number:	856-935-5022	Fax Number:	856-935-5290					
E-mail address	pdice@millvillehous	ing.org						

## INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.salemhousingauthority.com
website. The operations a	ne purpose of the we and activities. N.J.S.A minimum for public	r an Internet website or a webpage on the municipality's or county's Interite or webpage shall be to provide increased public access to the authority 40A:5A-17.1 requires the following items to be included on the Authoritisclosure. Check the boxes below to certify the Authority's compliance very support of the compliance of the compli
$\boxtimes$	A description of th	Authority's mission and responsibilities
$\boxtimes$	The budgets for the	urrent fiscal year and immediately preceding two prior years
	information (Similother types of Cha	prehensive Annual Financial Report (Unaudited) or similar financial information are items such as Revenue and Expenditures Pie Charts or, along with other information that would be useful to the public in finances/budget of the Authority)
$\boxtimes$	The complete (All immediately two property)	ges) annual audits (Not the Audit Synopsis) of the most recent fiscal year a
$\boxtimes$	•	, regulations and official policy statements deemed relevant by the governing to the interests of the residents within the authority's service area or
$\boxtimes$	, <u>-</u>	nt to the "Open Public Meetings Act" for each meeting of the Authority, date, location and agenda of each meeting
$\boxtimes$		es of each meeting of the Authority including all resolutions of the board an at least three consecutive fiscal years
	· · · · · ·	dress, electronic mail address and phone number of every person who supervision or management over some or all of the operations of the
	corporation or other	visors, consultants <u>and any other person, firm, business, partnership,</u> <u>organization</u> which received any remuneration of \$17,500 or more during the <u>for any service whatsoever</u> rendered to the Authority.
webpage as	identified above con	authorized representative of the Authority that the Authority's website lies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 above boxes signifies compliance.
Name of Off	icer Certifying compl	nce Paul F. Dice
Title of Office	er Certifying complia	ce Executive Director
Signature		

## 2020 (2020-2021) HOUSING AUTHORITY BUDGET RESOLUTION SALEM HOUSING AUTHORITY

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

WHEREAS, the Annual Budget and Capital Budget for the Salem Housing Authority for the fiscal year beginning, October 1, 2020 and ending, September 30, 2021 has been presented before the governing body of the Salem Housing Authority at its open public meeting of August 27, 2020; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$2,078,733, Total Appropriations, including any Accumulated Deficit if any, of \$1,971,027 and Total Unrestricted Net Position utilized of \$0

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$220,000 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$0; and

WHEREAS, the schedule of rents, fees and other charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Salem Housing Authority, at an open public meeting held on August 27 2020 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Salem Housing Authority for the fiscal year beginning, October 1, 2020 and ending, September 30, 2021 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and

BE IT FURTHER RESOLVED, that the governing body of the Salem Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on September 24, 2020.

(Secretary's Signature)				(Date)
Governing Body	Recorded	Vote		
Member:	Aye	Nay	Abstain	Absent
Rebecca Gower-Ferguson				

Rebecca Gower-Ferguson Cathy Lanard Bob Lanard Jim Smith

## 2020 (2020-2021) ADOPTION CERTIFICATION

## **SALEM**

## HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

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 Salem Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 24th day of, September, 2020.

Officer's Signature:			
Name:	Paul F. Dice		
Title:	Executive Director		
Address:	205 Seventh Street		
	Salem, NJ 08079		
Phone Number:	856-935-5022	Fax Number:	856-935-5290
E-mail address	pdice@millvillehous	ing.org	

## 2020 (2020-2021) 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

## SALEM HOUSING AUTHORITY

FISCAL YEAR: FROM: Oct 1, 2020 TO: Sep 30, 2021

WHEREAS, the Annual Budget and Capital Budget/Program for the Salem Housing Authority for the fiscal year beginning October 1, 2020 and ending, September 30, 2021 has been presented for adoption before the governing body of the Salem Housing Authority at its open public meeting of September 24, 2020; and

WHEREAS, the Annual Budget and Capital Budget as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services; and

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$2,078,733, Total Appropriations, including any Accumulated Deficit, if any, of \$1,971,027 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$220,000 and Total Unrestricted Net Position planned to be utilized of \$0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Salem Housing Authority, at an open public meeting held on September 24, 2020 that the Annual Budget and Capital Budget/Program of the Salem Housing Authority for the fiscal year beginning, October 1, 2020 and, ending, September 30, 2021 is hereby adopted and shall constitute appropriations for the purposes stated; and

BE IT FURTHER RESOLVED, that the Annual Budget and Capital Budget/Program as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services.

(Secretary's Signature)		. <u></u>		(Date)	_
Governing Body	Recorded	Vote			
Member:	Aye	Nay	Abstain	Absent	
Rebecca Gower-Ferguson	•	•			
Cathy Lanard					
Bob Lanard					
Jim Smith					

## 2020 (2020-2021) HOUSING AUTHORITY BUDGET

**Narrative and Information Section** 

## 2020(2020-2021) HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS SALEM HOUSING AUTHORITY

## **AUTHORITY BUDGET**

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

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

1. Complete a brief statement on the 2020/2020-2021 proposed Annual Budget and make comparison to the 2019/2019-2020 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).

Budgeted revenues are anticipated to be adequate to cover projected expenses and cover debt service for fiscal year ending 2021, resulting in a budgeted surplus of \$107,706 from operations. Anticipated revenues total \$2,078,733, an increase of \$96,659 (4.9%) when compared to the prior year budget. Total net appropriations of \$1,971,027 are \$19,433 (1.0%) higher than the prior year budget.

### Revenue Variances +/- 10%

CARES Act grant revenue increased from \$0 in the prior year budget to \$40,000 in the current year budget. This grant recently became available as a result of COVID-19 and the Authority plans to use a portion of the funding in the next fiscal year. This also causes total other revenue to significantly increase from the prior year budget.

### Expense Variances +/- 10%

PILOT expense decreased \$3,316, or 84.7%, from the prior year fiscal budget as rental revenue decreased and utilities increased when compared to last year.

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

The local / regional economy is not stable but unfortunately depressed which has a negative impact on the residents. It is simply not feasible for the vast majority of residents to earn a living wage in Salem.

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.).

The Authority is required to pay the Town of Salem PILOT each year. The calculation is equal to rental revenue less utilities x 10%.

5. The proposed budget must not reflect an anticipated deficit from 2020/2020-2021 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 authority's 9/30/19 audited total equity is \$1,251,645. Unrestricted net position has a \$1,076,971 deficit primarily because of the Authority's pension and OPEB liabilities. The Authority would need additional HUD funding or a new revenue stream to eliminate this deficit. The Authority does not anticipate additional deficit in the proposed budget.

## HOUSING AUTHORITY CONTACT INFORMATION AUTHORITY CONTACT INFORMATION 2020 (2020-2021)

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

Name of Authority:	Salem Housing Authority					
Federal ID Number:	210742445					
Address:	205 Seventh Street					
City, State, Zip:	Salem		NJ	08079		
Phone: (ext.)	856-935-5022	Fax:	856-9	35-5290		
Preparer's Name:	Ralph A. Polcari, CPA					
Preparer's Address:	Polcari & Company, CPA 2035 Hamburg Turnpike -					
City, State, Zip:	Wayne		NJ	07470		
Phone: (ext.)	973-831-6969	Fax:	973-83	31-6972		
E-mail:	ralph@polcarico.com					
Chief Executive Officer:(1)	Paul F. Dice					
(1)Or person who performs the	se functions under another Tit	le				
(1)OI borgott and borrotting me	be fulletions affect affection in					
Phone: (ext.)	856-935-5022	Fax:	856-93	5-5290		
		Fax:	856-93	5-5290		
Phone: (ext.) E-mail:	856-935-5022	Fax:	856-93	5-5290		
Phone: (ext.)	856-935-5022  pdice@millvillehousing.or  None	Fax:	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1)	856-935-5022  pdice@millvillehousing.o  None  ese functions under another Ti	Fax:	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1)  (1) Or person who performs th	856-935-5022  pdice@millvillehousing.o  None  ese functions under another Ti	Fax: rg	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1) (1) Or person who performs the Phone: (ext.)	856-935-5022  pdice@millvillehousing.o  None  ese functions under another Ti	Fax: rg	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1) (1) Or person who performs the Phone: (ext.) E-mail:  Name of Auditor:	856-935-5022  pdice@millvillehousing.or  None  ese functions under another Ti	Fax:   rg  tle ax:	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1) (1) Or person who performs th Phone: (ext.) E-mail:  Name of Auditor: Name of Firm:	856-935-5022  pdice@millvillehousing.or  None ese functions under another Ti  Fa  Anthony Giampaolo	Fax:   rg  tle ax:	856-93	5-5290		
Phone: (ext.) E-mail:  Chief Financial Officer(1) (1) Or person who performs the Phone: (ext.) E-mail:  Name of Auditor: Name of Firm: Address: City, State, Zip:	856-935-5022  pdice@millvillehousing.or  None ese functions under another Ti  Fa  Anthony Giampaolo  Hymanson, Parnes & Giar	Fax:   rg  tle ax:	856-93 NJ	07738		
Phone: (ext.) E-mail:  Chief Financial Officer(1) (1) Or person who performs th Phone: (ext.) E-mail:  Name of Auditor: Name of Firm: Address:	856-935-5022  pdice@millvillehousing.or  None ese functions under another Ti  Fa  Anthony Giampaolo  Hymanson, Parnes & Giar  467 Middletown-Lincroft	Fax:   rg  tle ax:		07738		

## HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

## **Salem Housing Authority**

**FISCAL YEAR: FROM:** Oct 1, 2020 **TO:** Sep 30, 2021

Answer all questions below completely and attach additional information as required.

- 1) Provide the number of individuals employed in (Use Most Recent W-3 Available 2018 or 2019) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 5
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2018 or 2019) Transmittal of Wage and Tax Statements:\$101,802
- 3) Provide the number of regular voting members of the governing body: 4 (Even if not all commissioners have been appointed (Total Commissioners are either 5 or 7 as per statute for your Authority)
- 4) Provide the number of alternate voting members of the governing body: 0 (Maximum is 2)
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No *If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.*
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (Most Recent Filing that March 31. 2019 or 2020 deadline has passed 2019 or 2020) 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 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:
  - 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 transferor. No If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.
- 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 individuals listed on Page N-4 (2 of 2). The Board of Commissioners approves all initial employee salaries based on a comparability analysis prior to the beginning of each fiscal year. Any increases granted during the year require Board approval, at which time an additional comparability analysis is performed. All employees are evaluated annually by their immediate supervisor and those evaluations are considered when determining compensation for the next fiscal year.

- 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," <u>attach a detailed list of all travel expenses</u> 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 No
  - 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) No

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 <u>and</u> 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? No 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? No 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 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.
- 21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? No If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

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

FISCAL YEAR: FROM: Oct 1, 2020 TO: Sep 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.
- 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: (<u>Use the Most Recent W-2 available 2018 or 2019</u>. 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, 2020, the <u>most recent W-2</u> and 1099 should be used 2019 or 2018 (60 days prior to start of budget year is November 1, 2019, with 2018 being the most recent calendar year ended), and for fiscal years ending June 30, 2020, the calendar year 2019 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2019 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.

J÷		Total Compensation All Public Entities \$ 49,320 0 68,870 153,636 0 52,740 0 0	\$ 324,566
5		Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)  29,880 29,880 19,000	\$ 48,880
æ		Reportable Compensation from Other Public Entitles (W-2/ 1099) 38,990 134,636	\$ 173,626
G		Average Hours per Week Dedicated to I Positions at c Other Public in Column 0 \$ 0 0 0 0 0 0 0 0 0 0 0 0	
۵		Positions held at Other Public  1) Entities Listed in Column O None None None Commissioner d   Executive Directs None	
o O	147.1	Names of Other Public Entities where Individual is an Employee or Positions held Member of the at Other Public Sation Governing Body (1) Entitles Listed in hority See note below Column O 19,320 None None 0 None 0 Penns Grove Commissioner 0 Millville & Wildwood   Executive Directs	<b>←</b>
N		Total Compensation from Authority \$ 49,320 0 0 52,740 52,740	\$ 102,060
M		Estim amount t comper from Arth the pension \$	\$ 30,000
7	ensation from -2/ 1099)	_	· .
ing Authority September 30, 2021 J K	Reportable Compen Authority (W-2	m vs	\$ 69,060 \$ 3,000
Salem Housing Authority to September 3C	Position	Former Highest Compensated Employee	88
4 4	S	Key Employee × × × Officer	
For the Period October 1, 2020	L	Average Hours per Week Dedicated to Position 1 x 1 x 1 x 1 0 10 40	
For the Period		Asst Prop Mgr Susc Commissioner Commissioner Commissioner Commissioner Commissioner Executive Director Property Manager	
A B		Name Title  I Lauire Frisby Asst Prop Mgr 2 Rebecca Gower-Fergusc Commissioner 3 Cathy Lanard Commissioner 4 Bob Lanard Commissioner 5 Jim Smith Commissioner 5 Jim Smith Executive Dire 7 Tom Laperriere Property Mans 9 10 11 12 13 14	1970

(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	For the Period	Salem Housing Authority October 1, 2020	lousing Authority October 1, 2020	ģ	Septemi	September 30, 2021	·	
	# of Covered Members (Medical & Rx) Pronosed Budget	Annual Cost Estimate per Employee Proposed	Total Cost Estimate Proposed	# of Covered Members (Medical & Rx)	Annual Cost per Employee	Total Prior Year		% Increase (Decrease
Active Employees - Health Benefits - Annual Cost	3000		129000	בחובון וכמו	Current rear	1800	(Decrease)	_
Single Coverage Parent & Child	4	\$ 12,044	\$ 48,178	4	\$ 12,570	\$ 50,280	\$ (2,102)	-4.2%
Employee & Spouse (or Partner) Family	н	23,958	23,958	⋳	25,013	25,013	(1,055)	#DIV/0! -4.2%
Employee Cost Sharing Contribution (enter as negative - ) Subtotal	3	200	(3,954)	5		(3,694)	[ (260) (3.418)	#0//0! 7.0% 4.
Commissioners - Health Benefits - Annual Cost								è
Single Coverage Parent & Child			<b>1</b>			• Control of the cont	1	#DIV/0!
Employee & Spouse (or Partner) Family							т 1	#DIV/0!
Employee Cost Sharing Contribution (enter as negative - )		A Control of the Cont					1	10/\10# #DI\\01
Subjudici Professional Transfer of the Professional Control of the Professiona Control of the Professional Control of the Professional Control	0			0	ing and and and the Residence of			#DIV/0!
Neurees - nealth benefits - Annual Cost Single Coverage	1	3,771	3,771	T	3,783	3.783	(11)	%E U-
Parent & Child Employee & Spouse (or Partner) Family			1 1 1					10/NIQ# 10/NIQ#
Employee Cost Sharing Contribution (enter as negative - )								i0/\la #DI\/\0i
Subtoral	<b>□</b>		3,771	1		3,783	(11)	-0.3%
GRAND TOTAL	9		\$ 71,952	9		\$ 75,381	\$ (3,429)	4.5%
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)	ıswer in Box) Place Answer in Bo		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

Salem Housing Authority

For the Period Octo

October 1, 2020

р

September 30, 2021

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

Legal Basis for Benefit (check applicable items)	Gross Days of Accumulated Accrued Compensated Absences at Compensated beginning of Current Year Absence Liability								ing of current year \$ 30 500
	Gross Dar Compen: Individuals Eligible for Benefit beginnir	See Attached Schedule							Total liability for accumulated compensated absences at beginning of criment year &

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

## SALEM HOUSING AUTHORITY SEPTEMBER 30, 2019 ACCRUED COMPENSATED ABSENCES

Employee Name BURGESS, VINLYN FRISBY, LAURIE HESS, JEREMY JACKSON, WILLIAM	Sick <u>Hours</u> 180.00 917.00 369.50 529.00	Vacation <u>Hours</u> 152.00 343.00 352.00 252.00	Rate \$11.000 \$18.857 \$13.500 \$11.740	Sick 50% \$ 990.00 8,645.93 2,494.13 3,105.23	<u>Vacation</u> \$ 1,672.00 6,467.95 4,752.00 2,958.48	TOTAL \$ 2,662.00 15,113.89 7,246.13 6,063.71	
LAPIERRE, THOMAS SUBTOTAL	131.25 2,126.75	56.00 1,155.00	\$20.737	1,360.87 14,245.29	1,161.27 14,178.43	2,522.14 28,423.72	
FICA EXPENSE TOTAL ACCRUAL				1,089.76 \$15,335.05	1,084.65 \$15,263.08	2,174.41 \$30,598.14	
Current Portion Non-Current Portion				\$ 1,533.51 13,801.55 \$15,335.05	\$ 1,526.31 13,736.77 \$15,263.08	\$ 3,059.81 27,538.32 \$30,598.14	FD5#3, FD5#3.

## Schedule of Shared Service Agreements

September 30, 2021 Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services. Salem Housing Authority 2 October 1, 2020 For the Period If No Shared Services X this Box

Amount to be

Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	Comments (Enter more specifics if needed)	Agreement Effective Date	Agreement End Date	Received by/ Paid from Authority
			The state of the s			
Miliville Housing Authority	Salem Housing Authority	Executive Mgmt Scvs		12/12/2019	12/12/2019 12/12/2015 \$	\$ 87550
Millville Housing Authority	Salem Housing Authority	HCV Admin Services		12/12/2019	12/12/2019 12/12/2020 \$	\$ 25,380
			111777771111111111111111111111111111111			
			1117			

## 2020 (2021) HOUSING AUTHORITY BUDGET

## **Financial Schedules Section**

## SUMMARY

September 30, 2021

Salem Housing Authority October 1, 2020 to

For the Period

	-	FY 2	FY 2021 Proposed Budget	d Budget			FY 2020 Adopted Budget	'opted :t	\$ Increase (Decrease) Proposed vs. Adopted		% Increase (Decrease) Proposed vs. Adooted
	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations	Total All Operations		All Opera	tions All	All Operations All Operations
REVENUES											į
Total Operating Revenues	\$ 1,789,585	·	\$ 289,148	₩	<b>€</b> }-	2,078,733	\$ 1,9	1,982,074	96 \$	96,659	4.9%
Total Non-Operating Revenues	t	2	-		1	*		ı		•	#DIV/0!
Total Anticipated Revenues	1,789,585	*	289,148	***************************************	1	2,078,733	1,93	1,982,074	96	96,659	4.9%
APPROPRIATIONS											
Total Administration	390,288	ı	30,380		ı	420,668	.4	425,542	4)	(4,874)	1.1%
Total Cost of Providing Services	1,291,591	t	258,768		i	1,550,359	1,5	1,526,052	24	24,306	1.6%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX		•		1			#D!V/0!
Total Operating Appropriations	1,681,879	t	289,148		ı	1,971,027	μ 9	1,951,594	门	19,433	1.0%
Total Interest Payments on Debt Total Other Non-Operating Appropriations		~ XXXXXXXXXXX		XXXXXXXXXX	,			1 1		1 1	#DIV/0! #DIV/0!
Total Non-Operating Appropriations	1	1	1		-	1		1		•	10/\01#
Accumulated Deficit	-	1			ı	-				'	#DIV/0i
Total Appropriations and Accumulated Deficit	1,681,879	,	289,148		ŧ	1,971,027	9,1	1,951,594	13	19,433	1.0%
Less: Total Unrestricted Net Position Utilized	1	ı			t	1		1		t	#DIV/0!
Net Total Appropriations	1,681,879	1	289,148	***************************************	ı İ	1,971,027	1,9	1,951,594	11	19,433	1.0%
ANTICIPATED SURPLUS (DEFICIT)	\$ 107,706	\$	\$	\$	٠.	107,706	\$	30,480	\$ 77	77,226	253.4%

## **Revenue Schedule**

Salem Housing Authority

For the Period

October 1, 2020

to

September 30, 2021

\$ Increase

% Increase

		FY 2021	Proposed	Budget		FY	2020 Adopted Budget	(Decrease) Proposed vs. Adopted	% increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations		Total All Operations	All Operations	All Operations
OPERATING REVENUES									
Rental Fees  Homebuyers' Monthly Payments					1\$ -	\$		\$ -	#DIV/0!
Dwelling Rental	561,000				561,000	Ą	578,163	(17,163)	-3.0%
Excess Utilities	14,000				14,000		14,000	(17,103)	0.0%
Non-Dwelling Rental	14,000				1-,000		14,000	_	#DIV/0!
HUD Operating Subsidy	1,179,125				1,179,125		1,124,207	54,918	4.9%
New Construction - Acc Section 8	2,173,223				-		-		#DIV/0!
Voucher - Acc Housing Voucher			284,148		284,148		265,284	18,864	7.1%
Total Rental Fees	1,754,125		284,148	<u>-</u>	2,038,273	-	1,981,654	56,619	2.9%
Other Operating Revenues (List)				*****					
Investments	460			*** **	460		420	40	9.5%
CARES Act Grant	35,000		5,000		40,000		_	40,000	#DIV/0!
Type in (Grant, Other Rev)	·		ŕ				-	· -	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					_		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/01
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	-	#DIV/0!
Type in (Grant, Other Rev)					-		<del></del>		#DIV/0!
Total Other Revenue	35,460	-	5,000	·	40,460		420	40,040	9533.3%
Total Operating Revenues	1,789,585	-	289,148	_	2,078,733		1,982,074	96,659	4.9%
NON-OPERATING REVENUES									
Other Non-Operating Revenues (List)	T								upu dal
Type in					_		-	-	#DIV/0!
Type in					_		-	-	#DIV/01
Type in					-		-	-	#DIV/0! #DIV/0!
Type in					_		-	-	#DIV/0!
Type in Type in					-		-		#DIV/01
Total Other Non-Operating Revenue				<del></del>	<u> </u>				#DIV/01
Interest on Investments & Deposits (List)			<del></del>	· · · · · · · · · · · · · · · · · · ·					#DIV/OI
Interest Earned					_		_	_	#DIV/0!
Penalties					_		_	_	#DIV/01
Other					- -		-	-	#DIV/01 #DIV/01
Total Interest	-		<del>-</del>		<u>-</u>		<del>-</del>	-	#DIV/0!
Total Non-Operating Revenues	-	-	-···- <u>-</u>		-		-	-	#DIV/01
TOTAL ANTICIPATED REVENUES	\$ 1,789,585	\$ - :	\$ 289,148 \$	· -	\$ 2,078,733	\$	1,982,074	\$ 96,659	4.9%

## Prior Year Adopted Revenue Schedule

FY 2020 Adopted Budget

## **Salem Housing Authority**

	•			<del></del>	
	Public Housing	Castian G	Housing	Oth Di	Total All
OPERATING REVENUES	Management	Section 8	Voucher	Other Programs	Operations
Rental Fees					
Homebuyers' Monthly Payments					\$ -
	F70 163				
Dwelling Rental Excess Utilities	578,163				578,163
	14,000				14,000
Non-Dwelling Rental	1 124 207				4 424 207
HUD Operating Subsidy New Construction - Acc Section 8	1,124,207				1,124,207
			265 284		-
Voucher - Acc Housing Voucher	4.746.070		265,284		265,284
Total Rental Fees	1,716,370	-	265,284	<u>-</u>	1,981,654
Other Revenue (List)					
Investments	420				420
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)					-
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)				ſ	· -
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)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Total Other Revenue	420	_	-	-	420
<b>Total Operating Revenues</b>	1,716,790	-	265,284		1,982,074
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)					
Type in					-
Type in					-
Type in					-
Type in					-
Type in				İ	-
Type in					_
Other Non-Operating Revenues	-	_	-	-	
Interest on Investments & Deposits					
Interest Earned					_
Penalties					_
Other				ļ	_
Total Interest	<u> </u>	<u>.</u>			
Total Non-Operating Revenues		غيوا		<b>+</b>	
TOTAL ANTICIPATED REVENUES	\$ 1,716,790 \$	\$ - \$	265,284	\$ - :	\$ 1,982,074
	,, ±0,, 50 y	г Ү		T	,00-,01-

## **Appropriations Schedule**

## Salem Housing Authority

For the Period

October 1, 2020

3

September 30, 2021

		F	/ 2021 Propos	ed Budget			20 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs		Total All Operations	otal All perations	All Operations	: All Operations
OPERATING APPROPRIATIONS									
Administration									
Salary & Wages	73,502				\$	73,502	\$ 72,060	\$ 1,442	2.0%
Fringe Benefits	50,716					50,716	52,070	(1,354)	
Legal	55,000					55,000	61,000	(6,000)	
Staff Training	4,100					4,100	4,525	(425)	
Travel	820					820	905	(85)	
Accounting Fees	31,000					31,000	30,000	1,000	3.3%
Auditing Fees	10,150				1	10,150	10,150	-	0.0%
Miscellaneous Administration*	165,000		30,380			195,380	 194,832	548	- 0.3%
Total Administration	390,288	-	30,380	<del>.</del>		420,668	 425,542	(4,874)	-1,1%
Cost of Providing Services					٦.				
Salary & Wages - Tenant Services						-	-	-	#ĐIV/01
Salary & Wages - Maintenance & Operation	71,125					71,125	75,300	(4,175)	
Salary & Wages - Protective Services	Ì					-	-	-	#DIV/0!
Salary & Wages - Utility Labor					Ì	<del>-</del>		-	#DIV/0!
Fringe Benefits	49,466					49,466	54,411	(4,945)	-9.1%
Tenant Services	1,000					1,000	1,100	(100)	-9.1%
Utilities	555,000					555,000	539,000	16,000	3.0%
Maintenance & Operation	450,000				1	450,000	448,223	1,777	0.4%
Protective Services						-	-	-	#DIV/01
Insurance	156,000					156,000	155,000	1,000	0.6%
Payment in Lieu of Taxes (PILOT)	600					600	3,916	(3,316)	-84.7%
Terminal Leave Payments						-	-	-	#DIV/01
Collection Losses	8,400					8,400	7,650	750	9.8%
Other General Expense						-	-	-	#DIV/01
Rents	ĺ		258,768			258,768	241,452	17,316	7.2%
Extraordinary Maintenance						-	-	-	#DIV/01
Replacement of Non-Expendible Equipment						-	-	-	#DIV/OI
Property Betterment/Additions						-	-	_	#DIV/OI
Miscellaneous COPS*	1.001.001		200 700		.L	4 550 050	 4.505.050		#DIV/OI
Total Cost of Providing Services	1,291,591	-	258,768	<del>-</del>		1,550,359	 1,526,052	24,306	1.6%
Total Principal Payments on Debt Service in Lieu of	VVVVVVVVVVVV	VVVVVVVVVV	VVVVVVVVVVVV	VVVVVVVVVVV					#D8//01
Depreciation  Total Operating Appropriations			XXXXXXXXXXX	XXXXXXXXXX		1 071 027	 1,951,594	10 422	#DIV/0! 1.0%
Total Operating Appropriations	1,681,879	-	289,148	-		1,971,027	 1,331,334	19,433	1.0%
NON-OPERATING APPROPRIATIONS Total Interest Payments on Debt	xxxxxxxxxx	VVVVVVVV	<b>YYYYYYY</b>	xxxxxxxxxx					#DIV/01
Operations & Maintenance Reserve	^^^^^	ΑΛΛΛΛΛΛΛΑ	^^^^^	ΛΛΛΛΛΛΛΛΛΛ	1	-		-	#DIV/01
Renewal & Replacement Reserve						_			#DIV/0!
Municipality/County Appropriation						•			#DIV/0!
Other Reserves						•			#DIV/0!
Total Non-Operating Appropriations	L						 <del></del>		#DIV/0
TOTAL APPROPRIATIONS	1,681,879		289,148			1,971,027	 1,951,594	19,433	1.0%
ACCUMULATED DEFICIT	1,001,079		209,140		1	1,371,027	1,331,334	13,433	#DIV/01
TOTAL APPROPRIATIONS & ACCUMULATED		* ***	<del></del>	*******	L		 		#510/01
DEFICIT	1 691 970		200 140	_		1 071 027	1 051 504	10.422	1.0%
UNRESTRICTED NET POSITION UTILIZED	1,681,879		289,148			1,971,027	 1,951,594	19,433	1.0%
									#DIV/0!
Municipality/County Appropriation Other				-	ī	-	•	-	#DIV/0!
Total Unrestricted Net Position Utilized	L		-		l	<del>-</del>	 		#DIV/0!
TOTAL NET APPROPRIATIONS	\$ 1,681,879			<u>-</u> \$ -	Ś	1,971,027	\$ 1,951,594	\$ 19,433	#Div/0!
TO THE PET PET PROFESSIONS	v 1,001,013	Y	y 203,140	<u> </u>	Υ	1,511,041	 ±,55±,554	~ 13,433	1.070

<sup>\*</sup> 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

\$ 84,093.95 \$

- \$ 14,457.40 \$

\$ 98,551.35

## Salem Housing Authority Miscellaneous Administrative Expenses FYE September 30, 2021 Budget

Executive Director Fees from Millville HA	\$	87,550
Telephone/Internet		12,000
Payroll Fees		5,200
Computer/IT Supplies and Maintenance		18,000
Office Expenses	_	42,250
Total - Public Housing		165,000
HCV Admin Fees Provided by Millville HA		25,380
Office Expenses		5,000
Total - HCV		30,380
Grand Total	\$	195,380

## **Prior Year Adopted Appropriations Schedule**

### **Salem Housing Authority**

FY 202	) Adopted	Budaet
--------	-----------	--------

	Public Housing					Total Ali
	Management	Section 8	Housing Voucher	Other Programs		Operations
OPERATING APPROPRIATIONS						
Administration					٦.	
Salary & Wages	72,060				\$	72,060
Fringe Benefits	52,070					52,070
Legal	61,000					61,000
Staff Training	4,525					4,525
Travel	905					905
Accounting Fees	30,000					30,000
Auditing Fees	. 10,150					10,150
Miscellaneous Administration*	171,000		23,832		L	194,832
Total Administration	401,710		23,832			425,542
Cost of Providing Services					-1	
Salary & Wages - Tenant Services						-
Salary & Wages - Maintenance & Operation	75,300					75,300
Salary & Wages - Protective Services		•				-
Salary & Wages - Utility Labor						-
Fringe Benefits	54,411					54,411
Tenant Services	1,100					1,100
Utilities	539,000				ĺ	539,000
Maintenance & Operation	448,223					448,223
Protective Services					į	
Insurance	155,000				i	155,000
Payment in Lieu of Taxes (PILOT)	3,916					3,916
Terminal Leave Payments	· ·					_
Collection Losses	7,650					7,650
Other General Expense						
Rents			241,452			241,452
Extraordinary Maintenance			•			
Replacement of Non-Expendible Equipment						_
Property Betterment/Additions					ŀ	_
Miscellaneous COPS*						_
Total Cost of Providing Services	1,284,600	w	241,452	_		1,526,052
Total Principal Payments on Debt Service in Lieu of			1.71,131			2,020,002
Depreciation	xxxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxx	xxxxxxxxxxxx		-
Total Operating Appropriations	1,686,310	-	265,284	-		1,951,594
NON-OPERATING APPROPRIATIONS	2,000,020		200,201			2,002,02
Total Interest Payments on Debt	xxxxxxxxxxxxx	xxxxxxxxxxxx	xxxxxxxxxxxx	xxxxxxxxxxxx		_
Operations & Maintenance Reserve		7011011011101101101	777777777777777777777777777777777777777	777777777777777777777777777777777777777		_
Renewal & Replacement Reserve						_
Municipality/County Appropriation						_
Other Reserves						_
Total Non-Operating Appropriations						
	1,686,310		265,284	-		1,951,594
TOTAL APPROPRIATIONS	1,080,310		200,204			1,951,594
ACCUMULATED DEFICIT						
TOTAL APPROPRIATIONS & ACCUMULATED	4.606.040		0.55.004			4 054 50 5
DEFICIT	1,686,310	<del>-</del>	265,284	<u>-</u>		1,951,594
UNRESTRICTED NET POSITION UTILIZED						
Municipality/County Appropriation		-	-			-
Other						-
Total Unrestricted Net Position Utilized		-				4 054 504
TOTAL NET APPROPRIATIONS	\$ 1,686,310	\$ -	\$ 265,284	\$ -	\$	1,951,594

13,264.20 \$

97,579.72

\* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount

84,315.52 \$

shown below, then the line item must be itemized above. 5% of Total Operating Appropriations \$

## Debt Service Schedule - Principal

If Authority has no debt X this box			0,	Salem Housing Authority	hority				
•				ŭ	Fiscal Year Ending in	in f			
	Adopted Budget Year 2020	Proposed Budget Year 2021		2022	2023	2024	2025	2026	 Total Principal
Capital Fund Financing Type in Issue Name Type in Issue Name	000'06 \$	\$ 95,000	<b>√</b>	\$ 000,000	1	B .		55,000	\$ 570,000
TOTAL PRINCIPAL LESS: HUD SUBSIDY NET PRINCIPAL	000'06 \$	95,000	\w\	100,000	100,000	110,000	110,000	55,000	\$ 570,000 570,000 5

Moody's         Fitch         Standard & Poors           Bond Rating         N/A         N/A         N/A           Year of Last Rating         N/A         N/A         N/A	Indicate the Authority's most	Indicate the Authority's most recent bond rating and the year of the rating by ratings service.	of the rating by ratin	ıgs service.
N/A N/A N/A		Moody's	Fitch	Standard & Poors
N/A N/A	Bond Rating	N/A	N/A	N/A
	Year of Last Rating	N/A	N/A	N/A

## Debt Service Schedule - Interest

Salem Housing Authority

## **Net Position Reconciliation**

## Salem Housing Authority

For the Period

October 1, 2020

September 30, 2021 2

FY 2021 Proposed Budget

# 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)

Less: Designated for Non-Operating Improvements & Repairs

(1,076,971)

10,911

10,911

17,970

(1,094,941)

\$ 28,881

1,222,764 2,317,705

\$ 1,251,645 2,317,705

Operations Total All

Other Programs

Housing

**Public Housing** 

Voucher

Section 8

Management

107,706

756,384

295,489

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)

756,384

107,706

295,489

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

<u>4</u>

- 82,608	The state of the s	t	r	7	\$ \$ 5,008
17,970	ı	•	j	1	\$ 17,970 \$
٠	1		,	1	\$
64,638	ł	•	•	1	64,638 \$
					ۍ د

(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.

\$ 14,457 \$ 84,094 \$ Maximum Allowable Appropriation to Municipality/County

98,551 (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 <u>deficit, including the timeline for elimination of the deficit,</u> if not already detailed in the budget narrative section. 2020 (2020-2021) SALEM HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

## 2020 (2020-2021) CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

## SALEM HOUSING AUTHORITY

FISCAL	YEAR:	FROM:	Oct 1, 2020	TO:	Sep 30, 2020		
[ X ] enter X to the left if the It is hereby certified that the of the Capital Budget/Program by the governing body of the	Housing n approv	Authority Capit ed, pursuant to	al Budget/Progr V.J.A.C. 5:31-2	. <u>2</u> , alon	g with the Annual Budge		
		(	)R				
[ ] enter X to the left if this It is hereby certified that the g to adopt a Capital Budget /Pr following reas	governin	g body of the _	Hous				
Officer's Signature:							
Name:	Paul F	. Dice					
Title:							
Address:	205 Seventh Street Salem, NJ 08079						
Phone Number:		5-5022	Fax Number:	850	6-935-5290		

pdice@millvillehousing.org

E-mail address

## 2020 (2020-2021) CAPITAL BUDGET/PROGRAM MESSAGE

## **Salem Housing Authority**

(Name)

FISCAL YEAR:

FROM:

Oct 1, 2020

TO:

Sep 30, 2021

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?

Yes – reviewed and approved by municipal government and residents of the developments affected.

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?

Yes.

3. Has a long-term (5 years or more) infrastructure needs and other capital items (Vehicles, Equipment) needs assessment been prepared?

In accordance with HUD requirements, the Authority has prepared a 5 year capital plan and performed a physical needs assessment.

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)

## **HUD Funding**

5. Have the current capital projects been reviewed and approved by HUD?

Yes

Add additional sheets if necessary.

## **Proposed Capital Budget**

## **Salem Housing Authority**

For the Period

October 1, 2020

to

September 30, 2021

		Funding Sources						
			Renewal &					
	Estimated Total	Unrestricted Net	Replacement	Debt		Other		
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Sources		
Public Housing Management								
Roof Upgrades	\$ 95,000				\$ 95,000			
Alarm Panel	100,000				100,000			
Boilers	25,000				25,000			
Type in Description								
Total	220,000		-	-	220,000	<u>-</u>		
Section 8		<u></u>						
Type in Description	-							
Type in Description	-							
Type in Description	-							
Type in Description								
Total			-	-	-			
Housing Voucher								
Type in Description	-					]		
Type in Description	-					· ·		
Type in Description	-							
Type in Description								
Total	**	-		_	-			
Other Programs	_							
Type in Description	-					i		
Type in Description	-							
Type in Description	-					į		
Type in Description								
Total	+-	-	-	-	-			
TOTAL PROPOSED CAPITAL BUDGET	\$ 220,000	\$ -	\$ -	\$ -	\$ 220,000 \$			

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**

## **Salem Housing Authority**

For the Period

October 1, 2020

to

September 30, 2021

Fiscal Year Beginning in

	F-4!	market and maked							
	ESTI	Estimated Total Cost		rent Budget ear 2021	2022	2023	2024	2025	2026
Public Housing Management									
Roof Upgrades	\$	231,000	\$	95,000	\$ 136,000				
Alarm Panel		100,000		100,000	-				
Boilers		50,000		25,000	25,000				
Type in Description		•		-					
Total		381,000		220,000	161,000	-	ь	÷-	-
Section 8									
Type in Description		-		-					
Type in Description		-		-					
Type in Description		-		-					
Type in Description		-		-					
Total		_		_	_	-		-	-
Housing Voucher									
Type in Description		-		-					
Type in Description		-		-					
Type in Description		_		-					
Type in Description		-		-					
Total				_	_	-	+	-	_
Other Programs	-								
Type in Description		_		- [					
Type in Description		-		-					
Type in Description		-		-					
Type in Description		-		-					
Total		-		-	_	_	-	-	
TOTAL	\$	381,000	\$	220,000	\$161,000 \$	- !	<u> </u>	\$ -	\$ -

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**

**Salem Housing Authority** 

For the Period October 1, 2020 to

September 30, 2021

If amount is other than zero, verify that projects listed above match projects listed on CB-4.

	Estimated Total  Cost		Funding Sources						
				Renewal &					
· ·			<b>Unrestricted Net</b>	Replacement	Debt		Other Sources		
			Position Utilized	Reserve	Authorization	<b>Capital Grants</b>			
Public Housing Management							·		
Roof Upgrades	\$	231,000				\$ 231,000			
Alarm Panel		100,000				100,000			
Boilers		50,000				50,000			
Type in Description									
Total		381,000	-	-	-	381,000	-		
Section 8	,					·			
Type in Description		-							
Type in Description		<b>-</b>							
Type in Description		-							
Type in Description		-							
Total		ber	-	_	_	_	_		
Housing Voucher									
Type in Description		-							
Type in Description		-							
Type in Description		-							
Type in Description									
Total		-	-	-	-	-			
Other Programs		_							
Type in Description		-							
Type in Description		-							
Type in Description		-							
Type in Description									
Total		_	-	-	-	-	_		
TOTAL	\$	381,000	\$	\$ -	\$ -	\$ 381,000	\$ -		
Total 5 Year Plan per CB-4	\$	381,000							
		<del></del>							

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.

Balance check