

***Authority Budget of:***

***Salem Housing Authority***

**State Filing Year**

**2019**

***For the Period:***

***October 1, 2019***

***to***

***September 30, 2020***

**[www.salemhousingauthority.org](http://www.salemhousingauthority.org)**

**Authority Web Address**



***Division of Local Government Services***

# **2019 HOUSING AUTHORITY BUDGET**

## **Certification Section**

**2019**

**SALEM**

**HOUSING AUTHORITY BUDGET**

**FISCAL YEAR: FROM Oct 1, 2019 TO Sep 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: \_\_\_\_\_ Date: \_\_\_\_\_

**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: \_\_\_\_\_ Date: \_\_\_\_\_

# 2019 PREPARER'S CERTIFICATION

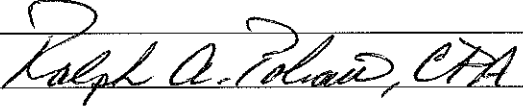
## SALEM

### HOUSING AUTHORITY BUDGET

**FISCAL YEAR:** FROM: Oct 1, 2019 **TO:** Sep 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:			
Name:	Ralph A. Polcari, CPA		
Title:	Fee Accountant		
Address:	2035 Hamburg Turnpike – Unit H Wayne, NJ 07470		
Phone Number:	973-831-6969	Fax Number:	973-831-6972
E-mail address	ralph@polcarico.com		

# 2019 APPROVAL CERTIFICATION

## SALEM

### HOUSING AUTHORITY BUDGET

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 30, 2020

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 25th day of July, 2019.

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@millvillehousing.org		

# INTERNET WEBSITE CERTIFICATION

Authority's Web Address:

[www.salemhousingauthority.org](http://www.salemhousingauthority.org)

All authorities shall maintain either an Internet website or a webpage on the municipality's or county's Internet website. The purpose of the website or webpage shall be to provide increased public access to the authority's operations and activities. N.J.S.A. 40A:5A-17.1 requires the following items to be included on the Authority's website at a minimum for public disclosure. Check the boxes below to certify the Authority's compliance with N.J.S.A. 40A:5A-17.1.

- ☒ A description of the Authority's mission and responsibilities
- ☒ The budgets for the current fiscal year and immediately preceding two prior years
- ☒ The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information (**Similar information are items such as Revenue and Expenditures Pie Charts or other types of Charts, along with other information that would be useful to the public in understanding the finances/budget of the Authority**)
- ☒ The complete (All Pages) annual audits (Not the Audit Synopsis) of the most recent fiscal year and immediately two prior years
- ☒ The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- ☒ Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- ☒ The approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- ☒ The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- ☒ A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

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.

Name of Officer Certifying compliance

Paul F. Dice

Title of Officer Certifying compliance

Executive Director

Signature

# 2019 HOUSING AUTHORITY BUDGET RESOLUTION

## SALEM HOUSING AUTHORITY

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 30, 2019

WHEREAS, the Annual Budget and Capital Budget for the Salem Housing Authority for the fiscal year beginning, October 1, 2019 and ending, September 30, 2020 has been presented before the governing body of the Salem Housing Authority at its open public meeting of July 25, 2019; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$1,982,074, Total Appropriations, including any Accumulated Deficit if any, of \$1,951,594 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$145,000 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 July 25, 2019 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, 2019 and ending, September 30, 2020 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 26, 2019.

\_\_\_\_\_  
(Secretary's Signature)

\_\_\_\_\_  
(Date)

Governing Body  
Member:  
Rebecca Gower-Ferguson  
Cathy Lanard  
Bob Lanard  
Jim Smith

Recorded Vote				
Aye	Nay	Abstain	Absent	

# 2019 ADOPTION CERTIFICATION

## SALEM

### HOUSING AUTHORITY BUDGET

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 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 Salem Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 26<sup>th</sup> day of, September, 2019.

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	<a href="mailto:pdice@millvillehousing.org">pdice@millvillehousing.org</a>		



# 2019 ADOPTED BUDGET RESOLUTION

## SALEM HOUSING AUTHORITY

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 30, 2020

WHEREAS, the Annual Budget and Capital Budget/Program for the Salem Housing Authority for the fiscal year beginning October 1, 2019, and ending, September 30, 2020 has been presented for adoption before the governing body of the Salem Housing Authority at its open public meeting of September 26, 2019; 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 \$1,982,074, Total Appropriations, including any Accumulated Deficit, if any, of \$1,951,594 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$145,000 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 26, 2019 that the Annual Budget and Capital Budget/Program of the Salem Housing Authority for the fiscal year beginning, October 1, 2019 and, ending, September 30, 2020 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)

\_\_\_\_\_  
(Date)

Governing Body

Member:

Rebecca Gower-Ferguson

Cathy Lanard

Bob Lanard

Jim Smith

Recorded Vote

Aye

Nay

Abstain

Absent

# **2019 HOUSING AUTHORITY BUDGET**

## **Narrative and Information Section**

# 2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS SALEM HOUSING AUTHORITY

## AUTHORITY BUDGET

FISCAL YEAR: FROM: Oct 1, 2019 TO: Sep 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).

Budgeted revenues are anticipated to be adequate to cover projected expenses and cover debt service for fiscal year ending 2020, resulting in a budgeted surplus of \$30,480 from operations. Anticipated revenues total \$1,982,074, an increase of \$12,403 (0.6%) when compared to the prior year budget. Total net appropriations of \$1,951,594 are \$2,568 (0.1%) higher than the prior year budget.

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.

### Revenues

Excess utility revenues are \$14,000, or \$9,000 (180.0%) higher than the prior year budget, to be more in-line with actual revenue earned from excess utilities throughout the fiscal year.

Non-dwelling rental revenues are \$0, or \$14,000 (100.0%) lower than the prior year budget. The Authority is not projected to earn any non-dwelling rental revenue during the budgeted fiscal year.

HCV revenues are \$265,284, or \$37,080 (16.2%) higher than the prior year budget. This amount is based on the current HCV funding levels from HUD.

### Expenses

Administration fringe benefits are \$52,070, or \$8,513 (14.1%) lower than the prior year budget, due to a decrease in the costs of projected medical coverage. Fewer employees receive individual plus spouse coverage.

Maintenance salaries and wages expenses are \$75,300, or \$10,456 (16.1%) higher than the prior year budget. Numerous maintenance employees recently received salary increases that are included in the proposed budget.

Utilities expenses are \$539,000, or \$86,000 (13.8%) lower than the prior year budget to be more comparative to actual results through the current fiscal year.

HCV Rent expenses (HAP payments) are \$241,452, or \$35,088 (17.0%) higher than the prior year budget to be more in-line with the current fiscal year expenses and expected results.

3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program.

*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.*

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 )**

*The authority's 9/30/18 audited total equity is \$1,783,470. Unrestricted net position has a \$611,563 deficit primarily because of GASB 68 pension liability. 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

## 2019

Please complete the following information regarding this Housing Authority. All information requested below must be completed.

<b>Name of Authority:</b>	Salem Housing Authority		
<b>Federal ID Number:</b>	210742445		
<b>Address:</b>	205 Seventh Street		
<b>City, State, Zip:</b>	Salem	NJ	08079
<b>Phone: (ext.)</b>	856-935-5022	<b>Fax:</b>	856-935-5290

<b>Preparer's Name:</b>	Ralph A. Polcari, CPA		
<b>Preparer's Address:</b>	Polcari & Company, CPAs 2035 Hamburg Turnpike – Unit H		
<b>City, State, Zip:</b>	Wayne	NJ	07470
<b>Phone: (ext.)</b>	973-831-6969	<b>Fax:</b>	973-831-6972
<b>E-mail:</b>	<a href="mailto:ralph@polcarico.com">ralph@polcarico.com</a>		

<b>Chief Executive Officer:</b>	Paul F. Dice		
<b>Phone: (ext.)</b>	856-935-5022	<b>Fax:</b>	856-935-5290
<b>E-mail:</b>	<a href="mailto:pdice@millvillehousing.org">pdice@millvillehousing.org</a>		

<b>Chief Financial Officer:</b>	None		
<b>Phone: (ext.)</b>		<b>Fax:</b>	
<b>E-mail:</b>			

<b>Name of Auditor:</b>	Anthony Giampaolo		
<b>Name of Firm:</b>	Hymanson, Parnes & Giampaolo		
<b>Address:</b>	467 Middletown-Lincroft Road		
<b>City, State, Zip:</b>	Lincroft	NJ	07738
<b>Phone: (ext.)</b>	732-842-4550	<b>Fax:</b>	732-842-4551
<b>E-mail:</b>	<a href="mailto:tony@hpgnj.com">tony@hpgnj.com</a>		

# HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

## Salem Housing Authority

FISCAL YEAR: FROM: Oct 1, 2019 TO: Sep 30, 2019

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 2017 or 2018**) 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 2017 or 2018**) Transmittal of Wage and Tax Statements: \$101,802
- 3) Provide the number of regular voting members of the governing body: 4
- 4) Provide the number of alternate voting members of the governing body: 0
- 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, 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 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 Authority's procedures for all employees.** *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," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed.*
- 13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority:
- a. First class or charter travel No
  - b. Travel for companions 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 and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? Yes *If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer)*
- 15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? No *If "yes," attach explanation including amount paid.*
- 16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? 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.*
- 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? 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 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.*
- 20) 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, 2019    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.
- 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 former 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 former 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.



Authority Schedule of Commissioners, Officers, Key Employees, Highest Compensated Employees and Independent Contractors (Continued)

Salem Housing Authority  
For the Period October 1, 2019 to September 30, 2020

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T												
Reportable Compensation from Authority (W-2/ 1099)																															
Position				Reportable Compensation from Authority (W-2/ 1099)										Names of Other Public Entities where Individual Is an Employee or Member of the Governing Body (1) See note below						Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O		Reportable Compensation from Other Public Entities (W-2/ 1099)		Estimated amount of other compensation from other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)		Total Compensation All Public Entities					
Average Hours per Week Dedicated to Position				Highest Compensated Employee				Former		Base Salary/ Stipend		Bonus		Other (auto allowance, expense account, payment in lieu of health benefits, etc.)		Estimated amount of other compensation from the Authority (health benefits, pension, etc.)		Total Compensation from Authority		Positions held at Other Public Entities Listed in Column O		Positions at Other Public Entities Listed in Column O		Compensation from Other Public Entities (W-2/ 1099)		Estimated amount of other compensation from other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)		Total Compensation All Public Entities			
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
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Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
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Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
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Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee		Key Employee	
Commissioner				Officer				Key Employee		Key Employee		Key Employee																			

(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

Salem Housing Authority  
For the Period October 1, 2019 to September 30, 2020

		Annual Cost		Total Cost		# of Covered		Annual Cost		Total Prior Year		% Increase	
		# of Covered	Estimate per	Estimate	Members	Current Year	per Employee	Current Year	Cost	Cost	(Decrease)	(Decrease)	
		(Medical & Rx)	Employee	Proposed	(Medical & Rx)	Current Year	per Employee	Current Year	Cost	Cost	(Decrease)	(Decrease)	
		Proposed Budget	Budget	Budget									
<b>Active Employees - Health Benefits - Annual Cost</b>													
Single Coverage		4	\$ 12,570	\$ 50,280	2	\$ 12,335	\$ 25,609	103.8%					
Parent & Child				-			-	#DIV/0!					
Employee & Spouse (or Partner)		1	25,013	25,013	2	24,547	(24,080)	-49.0%					
Family				-			-	#DIV/0!					
Employee Cost Sharing Contribution (enter as negative - )				(1,836)			(1,850)	14					
Subtotal		5		73,458	4		71,914	1.544					
<b>Commissioners - Health Benefits - Annual Cost</b>													
Single Coverage				-			-	#DIV/0!					
Parent & Child				-			-	#DIV/0!					
Employee & Spouse (or Partner)				-			-	#DIV/0!					
Family				-			-	#DIV/0!					
Employee Cost Sharing Contribution (enter as negative - )								#DIV/0!					
Subtotal		0		-	0		-	#DIV/0!					
<b>Retirees - Health Benefits - Annual Cost</b>													
Single Coverage		2	3,889	7,779	2	6,250	(4,722)	-37.8%					
Parent & Child				-			-	#DIV/0!					
Employee & Spouse (or Partner)				-			-	#DIV/0!					
Family				-			-	#DIV/0!					
Employee Cost Sharing Contribution (enter as negative - )								#DIV/0!					
Subtotal		2		7,779	2		(4,722)	-37.8%					
<b>GRAND TOTAL</b>		7		\$ 81,236	6		\$ (3,178)	-3.8%					

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)

Yes

Yes

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)

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

October 1, 2019

to

September 30, 2020

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

Legal Basis for Benefit  
(check applicable items)

Individuals Eligible for Benefit	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability		Approved Labor Agreement	Resolution	Individual Employment Agreement
		\$				
See Attached Schedule		\$	25,385	X		
Total liability for accumulated compensated absences at beginning of current year		\$	25,385			

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

**SALEM HOUSING AUTHORITY  
SEPTEMBER 30, 2018  
ACCRUED COMPENSATED ABSENCES**

<u>Employee Name</u>	<u>Sick Hours</u>	<u>Vacation Hours</u>	<u>Hourly Rate</u>	<u>Sick 50%</u>	<u>Vacation</u>	<u>TOTAL</u>
FRISBY, LAURIE	829.00	350.00	\$18.487	\$ 7,662.86	\$ 6,470.45	\$14,133.31
HESS, JEREMY	363.50	332.00	\$11.000	1,999.25	3,652.00	5,651.25
JACKSON, WILLIAM	523.00	296.00	\$11.510	3,009.87	3,406.96	6,416.83
SUBTOTAL	<u>1715.50</u>	<u>978.00</u>		<u>12,671.98</u>	<u>13,529.41</u>	<u>26,201.39</u>
FICA EXPENSE				969.41	1,035.00	2,004.41
TOTAL ACCRUAL				<u>\$13,641.38</u>	<u>\$14,564.41</u>	<u>\$28,205.79</u>
Current Portion				\$ 1,364.14	\$ 1,456.44	\$ 2,820.58
Non-Current Portion				12,277.24	13,107.97	25,385.21
				<u>\$13,641.38</u>	<u>\$14,564.41</u>	<u>\$28,205.79</u>
NOTE LIABILITY FOR SICK DAY'S ARE 1/2 OF TOTAL DAY'S DUE.						

*FRS# 322*  
*FRS# 354*

## Schedule of Shared Service Agreements

**Salem Housing Authority**

October 1, 2019

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.*

[illegible]

**If No Shared Services X this Box**

1000000

# **2019 HOUSING AUTHORITY BUDGET**

## **Financial Schedules Section**

# SUMMARY

For the Period Salem Housing Authority to September 30, 2020  
October 1, 2019

	FY 2020 Proposed Budget					FY 2019 Adopted Budget	Total All Operations	All Operations	All Operations	% Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations						
<b>REVENUES</b>											
Total Operating Revenues	\$ 1,716,790	\$ -	\$ 265,284	\$ -	\$ 1,982,074	\$ 1,969,671	\$ 1,969,671	\$ 12,403	\$ 12,403	0.6%	0.6%
Total Non-Operating Revenues	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
Total Anticipated Revenues	1,716,790	-	265,284	-	1,982,074	1,969,671	1,969,671	12,403	12,403	0.6%	0.6%
<b>APPROPRIATIONS</b>											
Total Administration	401,710	-	23,832	-	425,542	424,200	424,200	1,342	1,342	0.3%	0.3%
Total Cost of Providing Services	1,284,600	-	241,452	-	1,526,052	1,524,826	1,524,826	1,226	1,226	0.1%	0.1%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	-	-	-	#DIV/0!	#DIV/0!
Total Operating Appropriations	1,686,310	-	265,284	-	1,951,594	1,949,026	1,949,026	2,568	2,568	0.1%	0.1%
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	-	-	-	#DIV/0!	#DIV/0!
Total Other Non-Operating Appropriations	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
Total Non-Operating Appropriations	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
Accumulated Deficit	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
Total Appropriations and Accumulated Deficit	1,686,310	-	265,284	-	1,951,594	1,949,026	1,949,026	2,568	2,568	0.1%	0.1%
Less: Total Unrestricted Net Position Utilized	-	-	-	-	-	-	-	-	-	#DIV/0!	#DIV/0!
Net Total Appropriations	1,686,310	-	265,284	-	1,951,594	1,949,026	1,949,026	2,568	2,568	0.1%	0.1%
<b>ANTICIPATED SURPLUS (DEFICIT)</b>	\$ 30,480	\$ -	\$ -	\$ -	\$ 30,480	\$ 20,645	\$ 20,645	\$ 9,835	\$ 9,835	47.6%	47.6%

## Revenue Schedule

**Salem Housing Authority**

For the Period

October 1, 2019

to

September 30, 2020

	FY 2020 Proposed Budget				FY 2019 Adopted Budget	\$ Increase (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
<b>OPERATING REVENUES</b>							
<i>Rental Fees</i>							
Homebuyers' Monthly Payments					\$ -	\$ -	#DIV/0!
Dwelling Rental	578163				578,163	572,439	1.0%
Excess Utilities	14000				14,000	5,000	180.0%
Non-Dwelling Rental	0				-	14,000	-100.0%
HUD Operating Subsidy	1124207				1,124,207	1,149,642	-2.2%
New Construction - Acc Section 8					-	-	#DIV/0!
Voucher - Acc Housing Voucher			265284		265,284	228,204	16.2%
Total Rental Fees	1,716,370	-	265,284	-	1,981,654	1,969,285	0.6%
<i>Other Operating Revenues (List)</i>							
Investments	420				420	386	8.8%
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)					-	-	#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!
Total Other Revenue	420	-	-	-	420	386	8.8%
Total Operating Revenues	1,716,790	-	265,284	-	1,982,074	1,969,671	0.6%
<b>NON-OPERATING REVENUES</b>							
<i>Other Non-Operating Revenues (List)</i>							
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Type in					-	-	#DIV/0!
Total Other Non-Operating Revenue	-	-	-	-	-	-	#DIV/0!
<i>Interest on Investments &amp; Deposits (List)</i>							
Interest Earned					-	-	#DIV/0!
Penalties					-	-	#DIV/0!
Other					-	-	#DIV/0!
Total Interest	-	-	-	-	-	-	#DIV/0!
Total Non-Operating Revenues	-	-	-	-	-	-	#DIV/0!
<b>TOTAL ANTICIPATED REVENUES</b>	\$ 1,716,790	\$ -	\$ 265,284	\$ -	\$ 1,982,074	\$ 1,969,671	0.6%



# Prior Year Adopted Revenue Schedule

Salem Housing Authority

FY 2019 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>OPERATING REVENUES</b>					
<i>Rental Fees</i>					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	572,439				572,439
Excess Utilities	5,000				5,000
Non-Dwelling Rental	14,000				14,000
HUD Operating Subsidy	1,149,642				1,149,642
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			228,204		228,204
Total Rental Fees	1,741,081	-	228,204	-	1,969,285
<i>Other Revenue (List)</i>					
Type in (Grant, Other Rev)	386				386
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)					-
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	386	-	-	-	386
Total Operating Revenues	1,741,467	-	228,204	-	1,969,671
<b>NON-OPERATING REVENUES</b>					
<i>Other Non-Operating Revenues (List)</i>					
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
Other Non-Operating Revenues	-	-	-	-	-
<i>Interest on Investments &amp; Deposits</i>					
Interest Earned					-
Penalties					-
Other					-
Total Interest	-	-	-	-	-
Total Non-Operating Revenues	-	-	-	-	-
<b>TOTAL ANTICIPATED REVENUES</b>	<b>\$ 1,741,467</b>	<b>\$ -</b>	<b>\$ 228,204</b>	<b>\$ -</b>	<b>\$ 1,969,671</b>

# Appropriations Schedule

Salem Housing Authority  
For the Period October 1, 2019 to September 30, 2020

	<b>FY 2020 Proposed Budget</b>				<b>FY 2019 Adopted Budget</b>	<b>\$ Increase (Decrease) Proposed vs. Adopted</b>	<b>% Increase (Decrease) Proposed vs. Adopted</b>
	<b>Public Housing Management</b>	<b>Section 8</b>	<b>Housing Voucher</b>	<b>Other Programs</b>	<b>Total All Operations</b>	<b>Total All Operations</b>	<b>All Operations All Operations</b>
<b>OPERATING APPROPRIATIONS</b>							
<i>Administration</i>							
Salary & Wages	72,060				\$ 72,060	\$ 71,447	\$ 613 0.9%
Fringe Benefits	52,070				52,070	60,583	(8,513) -14.1%
Legal	61,000				61,000	58,000	3,000 5.2%
Staff Training	4,525				4,525	4,525	- 0.0%
Travel	905				905	905	- 0.0%
Accounting Fees	30,000				30,000	30,000	- 0.0%
Auditing Fees	10,150				10,150	9,900	250 2.5%
Miscellaneous Administration*	171,000		23,832		194,832	188,840	5,992 3.2%
Total Administration	401,710	-	23,832	-	425,542	424,200	1,342 0.3%
<i>Cost of Providing Services</i>							
Salary & Wages - Tenant Services					-	-	#DIV/0!
Salary & Wages - Maintenance & Operation	75,300				75,300	64,844	10,456 16.1%
Salary & Wages - Protective Services					-	-	#DIV/0!
Salary & Wages - Utility Labor					-	-	#DIV/0!
Fringe Benefits	54,411				54,411	60,418	(6,007) -9.9%
Tenant Services	1,100				1,100	1,200	(100) -8.3%
Utilities	539,000				539,000	625,000	(86,000) -13.8%
Maintenance & Operation	448,223				448,223	410,000	38,223 9.3%
Protective Services					-	-	#DIV/0!
Insurance	155,000				155,000	150,000	5,000 3.3%
Payment in Lieu of Taxes (PILOT)	3,916				3,916	-	3,916 #DIV/0!
Terminal Leave Payments					-	-	#DIV/0!
Collection Losses	7,650				7,650	7,000	650 9.3%
Other General Expense					-	-	#DIV/0!
Rents			241,452		241,452	206,364	35,088 17.0%
Extraordinary Maintenance					-	-	#DIV/0!
Replacement of Non-Expendible Equipment					-	-	#DIV/0!
Property Betterment/Additions					-	-	#DIV/0!
Miscellaneous COPS*					-	-	#DIV/0!
Total Cost of Providing Services	1,284,600	-	241,452	-	1,526,052	1,524,826	1,226 0.1%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	- #DIV/0!
Total Operating Appropriations	1,686,310	-	265,284	-	1,951,594	1,949,026	2,568 0.1%
<b>NON-OPERATING APPROPRIATIONS</b>							
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	- #DIV/0!
Operations & Maintenance Reserve					-	-	- #DIV/0!
Renewal & Replacement Reserve					-	-	- #DIV/0!
Municipality/County Appropriation					-	-	- #DIV/0!
Other Reserves					-	-	- #DIV/0!
Total Non-Operating Appropriations	-	-	-	-	-	-	- #DIV/0!
<b>TOTAL APPROPRIATIONS</b>	<b>1,686,310</b>	<b>-</b>	<b>265,284</b>	<b>-</b>	<b>1,951,594</b>	<b>1,949,026</b>	<b>2,568 0.1%</b>
<b>ACCUMULATED DEFICIT</b>					-	-	- #DIV/0!
<b>TOTAL APPROPRIATIONS &amp; ACCUMULATED DEFICIT</b>	<b>1,686,310</b>	<b>-</b>	<b>265,284</b>	<b>-</b>	<b>1,951,594</b>	<b>1,949,026</b>	<b>2,568 0.1%</b>
<b>UNRESTRICTED NET POSITION UTILIZED</b>							
Municipality/County Appropriation	-	-	-		-	-	- #DIV/0!
Other					-	-	- #DIV/0!
Total Unrestricted Net Position Utilized	-	-	-	-	-	-	- #DIV/0!
<b>TOTAL NET APPROPRIATIONS</b>	<b>\$ 1,686,310</b>	<b>\$ -</b>	<b>\$ 265,284</b>	<b>\$ -</b>	<b>\$ 1,951,594</b>	<b>\$ 1,949,026</b>	<b>\$ 2,568 0.1%</b>

\* 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 \$ 84,315.52 \$ - \$ 13,264.20 \$ - \$ 97,579.72

Salem Housing Authority  
Miscellaneous Administrative Expenses  
FYE September 30, 2020 Budget

Executive Director Fees from Millville HA	\$ 90,760
Telephone/Internet	11,000
Payroll Fees	5,200
Computer/IT Supplies and Maintenance	15,000
Office Expenses	<u>49,040</u>
Total - Public Housing	<u><u>\$ 171,000</u></u>

HCV Admin Fees Provided by Millville HA	<u><u>\$ 23,832</u></u>
-----------------------------------------	-------------------------

# Prior Year Adopted Appropriations Schedule

## Salem Housing Authority

FY 2019 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>OPERATING APPROPRIATIONS</b>					
<i>Administration</i>					
Salary & Wages	\$ 71,447				\$ 71,447
Fringe Benefits	60,583				60,583
Legal	58,000				58,000
Staff Training	4,525				4,525
Travel	905				905
Accounting Fees	30,000				30,000
Auditing Fees	9,900				9,900
Miscellaneous Administration*	167,000		21,840		188,840
Total Administration	402,360	-	21,840	-	424,200
<i>Cost of Providing Services</i>					
Salary & Wages - Tenant Services					-
Salary & Wages - Maintenance & Operation	64,844				64,844
Salary & Wages - Protective Services					-
Salary & Wages - Utility Labor					-
Fringe Benefits	60,418				60,418
Tenant Services	1,200				1,200
Utilities	625,000				625,000
Maintenance & Operation	410,000				410,000
Protective Services					-
Insurance	150,000				150,000
Payment in Lieu of Taxes (PILOT)					-
Terminal Leave Payments					-
Collection Losses	7,000				7,000
Other General Expense					-
Rents			206,364		206,364
Extraordinary Maintenance					-
Replacement of Non-Expendible Equipment					-
Property Betterment/Additions					-
Miscellaneous COPS*					-
Total Cost of Providing Services	1,318,462	-	206,364	-	1,524,826
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
Total Operating Appropriations	1,720,822	-	228,204	-	1,949,026
<b>NON-OPERATING APPROPRIATIONS</b>					
Total Interest Payments on Debt	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					-
Municipality/County Appropriation					-
Other Reserves					-
Total Non-Operating Appropriations	-	-	-	-	-
<b>TOTAL APPROPRIATIONS</b>	1,720,822	-	228,204	-	1,949,026
<b>ACCUMULATED DEFICIT</b>					-
<b>TOTAL APPROPRIATIONS &amp; ACCUMULATED DEFICIT</b>	1,720,822	-	228,204	-	1,949,026
<b>UNRESTRICTED NET POSITION UTILIZED</b>					
Municipality/County Appropriation	-	-	-	-	-
Other					-
Total Unrestricted Net Position Utilized	-	-	-	-	-
<b>TOTAL NET APPROPRIATIONS</b>	\$ 1,720,822	\$ -	\$ 228,204	\$ -	\$ 1,949,026

\* 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 \$ 86,041.10 \$ - \$ 11,410.20 \$ - \$ 97,451.30

Debt Service Schedule - Principal

Salem Housing Authority

If Authority has no debt X this box

	Fiscal Year Ending in							Total Principal Outstanding
	Adopted Budget Year 2019	Proposed Budget Year 2020	2021	2022	2023	2024	2025	Thereafter
Capital Fund Financing	\$ 85,000	\$ 90,000	\$ 95,000	\$ 100,000	\$ 100,000	\$ 110,000	\$ 110,000	\$ 55,000
Type in Issue Name								\$ 660,000
Type in Issue Name								-
Type in Issue Name								-
TOTAL PRINCIPAL	85,000	90,000	95,000	100,000	100,000	110,000	110,000	55,000
LESS: HUD SUBSIDY	85,000	90,000	95,000	100,000	100,000	110,000	110,000	55,000
NET PRINCIPAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Indicate the Authority's most recent bond rating and the year of the rating by ratings service.

	Moody's	Fitch	Standard & Poors
Bond Rating	N/A	N/A	N/A
Year of Last Rating	N/A	N/A	N/A

If no Rating type in Not Applicable

Debt Service Schedule - Interest

Salem Housing Authority

If Authority has no debt X this box

	Fiscal Year Ending in							Total Interest Payments Outstanding
	Adopted Budget Year 2019	Proposed Budget Year 2020	2021	2022	2023	2024	2025	Thereafter
Capital Fund Financing	33,717	29,890	25,733	21,150	16,451	11,633	6,463	1,290
Type in Issue Name								112,610
Type in Issue Name								-
Type in Issue Name								-
TOTAL INTEREST	33,717	29,890	25,733	21,150	16,451	11,633	6,463	1,290
LESS: HUD SUBSIDY	33,717	29,890	25,733	21,150	16,451	11,633	6,463	1,290
NET INTEREST	-	-	-	-	-	-	-	-

# Net Position Reconciliation

Salem Housing Authority  
For the Period October 1, 2019 to September 30, 2020

## FY 2020 Proposed Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)</b>	\$ 1,770,758	\$ -	\$ 12,712	\$ -	\$ 1,783,470
Less: Invested in Capital Assets, Net of Related Debt (1)	2,390,935	-	-	-	2,390,935
Less: Restricted for Debt Service Reserve (1)	-	-	-	-	-
Less: Other Restricted Net Position (1)	4,098	-	-	-	4,098
Total Unrestricted Net Position (1)	(624,275)	-	12,712	-	(611,563)
Less: Designated for Non-Operating Improvements & Repairs	-	-	-	-	-
Less: Designated for Rate Stabilization	-	-	-	-	-
Less: Other Designated by Resolution	-	-	-	-	-
Plus: Accrued Unfunded Pension Liability (1)	211,191	-	-	-	211,191
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)	474,460	-	-	-	474,460
Plus: Estimated Income (Loss) on Current Year Operations (2)	30,480	-	-	-	30,480
Plus: Other Adjustments (attach schedule)	-	-	-	-	-
<b>UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET</b>	91,856	-	12,712	-	104,568
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	-	-	-	-	-
<b>PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR</b>	-	-	-	-	-
(4)	\$ 91,856	\$ -	\$ 12,712	\$ -	\$ 104,568

(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.

Maximum Allowable Appropriation to Municipality/County

\$ 84,316 \$ - \$ 13,264 \$ - \$ 97,580

(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  
SALEM  
HOUSING  
AUTHORITY  
CAPITAL  
BUDGET/  
PROGRAM



# 2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

## SALEM HOSUING AUTHORITY

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 30, 2020

[ **X** ]        It is hereby certified that the Housing Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the Salem Housing Authority, on the 26th day of September, 2019.

**OR**

[   ]        It is hereby certified that the governing body of the \_\_\_\_\_ Housing Authority have elected **NOT** to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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	<a href="mailto:pdice@millvillehousing.org">pdice@millvillehousing.org</a>		

# 2019 CAPITAL BUDGET/PROGRAM MESSAGE

## Salem Housing Authority

**FISCAL YEAR:**    **FROM:**    Oct 1, 2019    **TO:**    Sep 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?

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 the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?

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

N/A

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.

As previously noted, rental income is governed by federal regulations and is equal to 30% of adjusted tenant income. Although the local economy is not stable, it is not anticipated that tenant incomes and resultant rents will differ significantly from the prior period. All planned capital projects are funded by HUD's capital fund program and will not be affected by fluctuations in rental income. The proposed capital projects are considered necessary to maintain the dwelling rents at budgeted levels.

6. Have the projects been reviewed and approved by HUD? Yes all capital fund budgets have been approved by HUD.

*Add additional sheets if necessary.*

# Proposed Capital Budget

## Salem Housing Authority

For the Period October 1, 2019 to September 30, 2020

### Funding Sources

	Estimated Total Cost	Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants	Other Sources
<i>Public Housing Management</i>						
Roofing Improvments	\$ 100,000				\$ 100,000	
HVAC Upgrades	20,000				20,000	
Plumbing	25,000				25,000	
Type in Description	-					
Total	145,000	-	-	-	145,000	-
<i>Section 8</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Housing Voucher</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Other Programs</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<b>TOTAL PROPOSED CAPITAL BUDGET</b>	<b>\$ 145,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 145,000</b>	<b>\$ -</b>

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, 2019      to      September 30, 2020

*Fiscal Year Beginning in*

	Estimated Total Cost	Current Budget Year 2020	2021	2022	2023	2024	2025
<i>Public Housing Management</i>							
Roofing Improvments	\$ 100,000	\$ 100,000					
HVAC Upgrades	20,000	20,000					
Plumbing	25,000	25,000					
Type in Description	-	-					
Total	145,000	145,000	-	-	-	-	-
<i>Section 8</i>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<i>Housing Voucher</i>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<i>Other Programs</i>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$ 145,000</b>	<b>\$ 145,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>

*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, 2019 to September 30, 2020

		<i>Funding Sources</i>				
		Renewal &				
		Unrestricted Net	Replacement	Debt	Capital Grants	Other Sources
		Position Utilized	Reserve	Authorization		
Estimated Total	Cost					
<i>Public Housing Management</i>						
Roofing Improvments	\$ 100,000				\$ 100,000	
HVAC Upgrades	20,000				20,000	
Plumbing	25,000				25,000	
Type in Description	-					
Total	145,000	-	-	-	145,000	-
<i>Section 8</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Housing Voucher</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Other Programs</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$ 145,000</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 145,000</b>	<b>\$ -</b>
Total 5 Year Plan per CB-4	\$ 145,000					
Balance check		- If amount is other than zero, verify that projects listed above match projects listed 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.