ADOPTED GOPY

JAN 1 5 2019

### LAKEWOOD HOUSING AUTHORITY

State Filing Year

Garjin-1

2019

For the Period:

January 1, 2019

to

December 31, 2019

### www.lakewoodha.org

**Authority Web Address** 





**PY**.

Division of Local Government Services

BY:.....

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

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

### Proposed Introduced Authority Budget Document

X 2 copies of the Introduced budget document that includes all pages completed X Authority Name and Fiscal Year are filled in X Signature blocks on Pages C-2, C-3, and C-4 are filled in along with title, address, e-mail address, phone number and fax number. X Page C-5 Resolution of the Authority governing body approving the introduced budget is enclosed with recorded vote Note: Aye Votes must total a majority of the full membership of the governing body (Not including Alternates in total) Page C-5 Proposed hearing date for adoption of Budget reflected in Authority Budget Resolution  $\mathbf{x}$ Page C-5 Authority Budget Resolution is signed with original hand written signature X Budget Narrative (N Pages) and Information Section is complete (All items answered or indicated N/A) X Pages N-6 and F-8 applicable amounts agree to the most recent issued audit report of the Authority X

### Introduced Capital Budget (Page CB-1 through CB-5)

X

X Authority Name and Fiscal Year are filled in
 X Signature blocks on Page CB-1 are filled in along with title, address, e-mail address, phone number and fax number and proper Box Checked off (Top Box 1 Have a Capital Budget or Bottom Box 2 Don't have a Capital Budget)
 X Page CB-2-- has all questioned answered or an explanation why question does not apply
 X Page CB-5—Balance Check amount equals Zero

Official's Signature:	morey	Moura		
Name:	MARY JO GRAUSO			
Title:	EXECUTIVE DIRECTOR			
Address:	317 SAMPSON AVE., P.O.	317 SAMPSON AVE., P.O. BOX 1599 LAKEWOOD, NJ 08701		
Phone Number:	732-364-1300	Fax Number:	732-367-3299	
E-mail address:	mgrauso@lakewoodha.org			

Sheets not completed have an explanation on them (Such as Authority has no Debt Service)

### 2019 HOUSING AUTHORITY BUDGET

**Certification Section** 

### **LAKEWOOD**

(Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM JANUARY 1, 2019 TO DECEMBER 31, 2019

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 <u>N.J.S.A.</u> 40A:5A-11.

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

By: Paul D. Circt CPA, RMA Date: 12/14/2018

### CERTIFICATION OF ADOPTED BUDGET

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

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

By: Paul D. Curt CPA, RMA Date: 1/16(2019

### 2019 PREPARER'S CERTIFICATION

### **LAKEWOOD**

(Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM: 1-1-2019

TO:

12-31-2019

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:	The Full	U		
Name:	THOMAS FURLONG, CPA			
Title:	FEE ACCOUNTANT			
Address:	470 HIGHWAY 79, SUITE 2			
	MORGANVILLE, NJ 07751			
Phone Number:	732-591-2300 Fax Number: 732-591-2525			
E-mail address thomasfurlongcpa@gmail.com				

### 2019 APPROVAL CERTIFICATION

### LAKEWOOD (Name)

### HOUSING AUTHORITY BUDGET

1-1-2019

TO:

12-31-2019

FROM:

FISCAL YEAR:

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 <u>LAKEWOOD</u> Housing Authority, at an open public meeting held pursuant to N.J.A.C.
5:31-2.3, on the <u>27<sup>th</sup></u> day of <u>NOVEMBER</u> , 2018 .

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.

	T			
Officer's Signature:	-many	Draux	Ø	
Name:	MARY JO GRAUSO			
Title:	EXECUTIVE DIRECT	EXECUTIVE DIRECTOR		
Address:	317 SAMPSON AVENUE, P.O. BOX 1599			
	LAKEWOOD, NJ 08701			
Phone Number:	732-364-1300	Fax Number:	732-367-3299	
E-mail address	mgrauso@lakewoodha.o	org		

### INTERNET WEBSITE CERTIFICATION

Authority's	www.lakewoodha.org
All authorit	ies shall maintain either an Internet website or a webpage on the municipality's or county's Internet
website. Th	ne purpose of the website or webpage shall be to provide increased public access to the authority's
	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. 40	
X	A description of the Authority's mission and responsibilities
X	The budgets for the current fiscal year and immediately preceding two prior years
x	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)
X	The complete (All Pages) annual audits (Not the Audit Synopsis) of the most recent fiscal year and immediately two prior years
X	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
X	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
X	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
X	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
X	A list of attorneys, advisors, consultants <u>and any other person</u> , <u>firm</u> , <u>business</u> , <u>partnership</u> , <u>corporation or other organization</u> which received any remuneration of \$17,500 or more during the preceding fiscal year <u>for any service whatsoever</u> rendered to the Authority.
webpage as	certified by the below authorized representative of the Authority that the Authority's website or identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as . A check in each of the above boxes signifies compliance.

Title of Officer Certifying compliance

Name of Officer Certifying compliance

Many Many

MARY JO GRAUSO

Signature

Page C-4

### **RESOLUTION 5227**

### 2019 LAKEWOOD HOUSING AUTHORITY BUDGET RESOLUTION

1-1-2019

TO:

12-31-2019

FROM:

FISCAL YEAR:

WHEREAS, the Annual Budget and Capital Budget for the Lakewood Housing Authority for the fiscal year beginning <u>JANUARY 1, 2019</u> and ending <u>DECEMBER 31, 2019</u> have been presented before the governing body of the Lakewood Housing Authority at its open public meeting of <u>NOVEMBER 27, 2018</u> ; and
WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$15,919,440, Total Appropriations, including any Accumulated Deficit if any, of \$15,901,140, and Total Unrestricted Net Position utilized of \$0,000; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of  $\frac{$410,034}{}$  and Total Unrestricted Net Position planned to be utilized as funding thereof, of  $\frac{$0}{}$ ; and

WHEREAS, the schedule of rents, fees and other user 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 Lakewood Housing Authority, at an open public meeting held on <u>NOVEMBER 27, 2018</u>, that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Lakewood Housing Authority for the fiscal year period beginning <u>JANUARY 1, 2019</u> and ending <u>DECEMBER 31, 2019</u> 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 Lakewood Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on <u>JANUARY 22, 2019</u>.

Marcy Member 1/-27-15 (Secretary's Signature) (Date)

Governing Body	Recorded Vote			
Member	Aye	Nay	Abstain	Absent
Miriam Medina	X			
Gregory Stafford Smith	X			
Shabsi Ganzweig	X			
Nechama Heinemann	X			
Angela R. Caldwell	X			
Denise Douglas	X			
Joseph Weingarten				X

### **2019 ADOPTION CERTIFICATION**

### LAKEWOOD (Name)

### HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

It is hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the <u>LAKEWOOD</u> Housing Authority, pursuant to <u>N.J.A.C. 5:31-2.3</u>, on the  $2^{nd}$  day of, <u>January</u>, 2019.

Officer's Signature:	may ju.	Mause	7
Name:	Mary Jo Grauso		
Title:	Executive Director		
Address:	317 Sampson Avenue		
	Lakewood, NJ 08701		
Phone Number:	732-364-1300	Fax Number:	732-367-3299
E-mail address	mgrauso@lakewoodha.	org	

### **RESOLUTION NO. 5230**

### 2019 ADOPTED BUDGET RESOLUTION LAKEWOOD HOUSING AUTHORITY

**FISCAL YEAR:** 

**FROM** 

01-01-2019

TO

12-31-2019

WHEREAS, the Annual Budget and Capital Budget/Program for the Lakewood Housing Authority for the fiscal year period beginning January 1, 2019 and ending December 31, 2019 has been presented for adoption before the governing body of the Lakewood Housing Authority at its open public meeting of January 2, 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 \$15,919,440, Total Appropriations, including any Accumulated Deficit if any, of \$15,901,140 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$410,034 and Total Unrestricted Net Position planned to be utilized of \$ 0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Lakewood Housing Authority, at an open public meeting held on January 2, 2019 that the Annual Budget and Capital Budget/Program of the Lakewood Housing Authority for the fiscal year beginning January 1, 2019 and ending December 31, 2019 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.

More by Meeuse 1-2-2019
(Secretary's Signature) (Date)

### **Governing Body Recorded Vote**

Member	Aye	Nay	Abstain	Absent
Miriam Medina	X			
Gregory Stafford Smith	X			
Shabsi Ganzweig			X	
Angela Caldwell	X			
Denise Douglas	X			
Joseph Weingarten		.,		X
Eli Rennert	X			

### 2019 HOUSING AUTHORITY BUDGET

**Narrative and Information Section** 

### 2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS LAKEWOOD

(Name)

### **AUTHORITY BUDGET**

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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

- 1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). SEE ATTACHED
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. SEE ATTACHED
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. NONE
- **4.** Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered.

  N/A
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). N/A
- 6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68, 45)

### Lakewood Housing Authority

### Budget Variances over 10%

### 2019

### Revenues:

Management Services (-100%) - Loss of Princeton Management contract

Laundry Commissions (+56.3%) - Based on collections in the prior year

Interest (+102.4%) - Increase in interest rates

### Appropriations:

Admin Fringe Benefits (+16.4%) – Due to additional employee moved from Maintenance to Administration

Travel (-51.5%) – PHA is not expected to travel to many conferences in the upcoming year

Salary & Wages Maintenance (+33.5%) – Additional employee added

Salary & Wages Utility Labor (+33.5%) – Additional employee added

Utilities (-13.6%) – Based on prior year actuals and PHA has entered into a contract that will reduce gas and electric costs

Other General Expense (-35.2%) – Reduction of vouchers that have ported out to other jurisdictions.

### HOUSING AUTHORITY CONTACT INFORMATION 2019

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

Name of Authority:	LAKEWOOD HOUSING AUTHORITY			
Federal ID Number:			······································	
Address:	317 SAMPSON AVENUE, P.O	D. BOX 159	9	
City, State, Zip:	LAKEWOOD		NJ	08701
Phone: (ext.)	732-364-1300	Fax:	732-30	67-3299

Preparer's Name:	THOMAS FURLONG	7		
Preparer's Address:	470 HIGHWAY 79, SUITE 2			
City, State, Zip:	MORGANVILLE		NJ	07751
Phone: (ext.)	732-591-2300	Fax:	732-5	91-2525
E-mail:	thomasfurlongcpa@gmail.com			

Chief Executive Officer:	MARY JO GRAUSO		
Phone: (ext.)	732-364-1300	Fax:	732-367-3299
E-mail:	mgrauso@lakewoodha.or	g	

Chief Financial Officer:	SCOTT PARSONS	S		
Phone: (ext.)	732-364-1300	Fax:	732-367-3299	
E-mail:	sparsons@lakewoo	dha.org		

Name of Auditor:	RICHARD LARSEN			
Name of Firm:	NOVOGRADAC & C	COMPANY, LL	,P	
Address:	1433 HOOPER AVE	NUE, SUITE 32	29	
City, State, Zip:	TOMS RIVER		NJ	08753
Phone: (ext.)	732-503-4257	Fax:	732-34	1-1424
E-mail:	rich.larsen@novoco.c	om		

### HOUSING AUTHORITY INFORMATIONAL **QUESTIONNAIRE**

### $\frac{LAKEWOOD}{(\text{Name})}$

		FISCAL YEAR:	FROM:	1/1/2019	10:	12/31/2019	
A1	Provide the number	s below completely an per of individuals emp	loyed in (Use M	ost Recent W-3	3 Available		
2)	Provide the amou	Authority's Form W-3, ant of total salaries and ilable 2017 or 2018)	d wages as report	ed on the Author	ority's Form	21 n W-3, (Use Most 1,161,042	
3)	Provide the numb	oer of regular voting m	nembers of the go	overning body:	7		
4)	Provide the numb	per of alternate voting	members of the	governing body	: 0	_	
5)	Did any person li	isted on Page N-4 have	e a family or bus	iness relationsh	ip with any	other person listed	
	on Page N-4 during	ng the current fiscal ye	ear? no <i>It</i>	` ''ves, '' attach a	a description	n of the relationship	
	including the nan	nes of the individuals i	involved and thei	r positions at th	ie Authority	· -	
6)	Did all individual	ls that were required to	o file a Financial	Disclosure Stat	ement for the	he current fiscal	
	year (Most Recei	nt Filing that March	31. 2018 or 2019	deadline has	passed 201	8 or 2019) because	
	of their relationsh	ip with the Authority	file the form as r	equired? (Chec	ked to see in	f individuals	
	actually filed at h	ttp://www.state.nj.us	s/dca/divisions/	dlgs/resources	<u>/fds.html</u> t	efore answering)	
	yesIf "	no," provide a list of	those individuals	who failed to f	ile a Financ	ial Disclosure	
<i>a</i> \	Statement and an	explanation as to the	reason for their f	ailure to file.			
/)	Does the Authori	ty have any amounts r	eceivable from c	urrent or forme	r commissio	oners, officers, key	
	their position the	hest compensated emp	oloyees? <u>no</u>	If "yes," a	ttach a list	of those individuals,	,
۲9	Was the Authority	e amount receivable, a	na a aescripiion	of the amount a	iue to the A	uthority.	
0)	a A current or	a party to a business	officer box ome	one of the follo	wing partie	S:	
	no	former commissioner,	, officer, key emp	ployee, or nighe	est compens	ated employee?	
	b. A family mer compensated	mber of a current or fo employee?no				-	
	c. An entity of v	which a current or form	ner commissione	er, officer, key e	mployee, o	r highest	
		employee (or family i	member thereof)	was an officer	or direct or	indirect owner?	
	If the groups to	gran of the above is "-					
	of the commission	any of the above is "y	ves, attach a ae. plouae or highe	scription of the	transaction	including the name	?
	thereof) of the A	oner, officer, key emp uthority; the name of	pioyee, or nighe	si compensaied	i empioyee	(Or family member	^
	the amount paid	and whether the tran	saction was subj	iaiionsnip io in	e inaiviaua itiva hid pu	i or jamuy member;	•
9)	Did the Authority	during the most recer	nt fiscal vear pay	premiums dire	ectly or indi	rectly on a personal	1
,	benefit contract?	A personal benefit co	ntract is generall	v anv life insura	ance, annui	tv. or endowment	1
	contract that bene	efits, directly or indire	ctly, the transfer	or, a member of	f the transfe	ror's family or any	
	other person desi	gnated by the transfer	or. no $I_{J}$	"yes," attach d	a description	n of the	
	arrangement, the	premiums paid, and i	indicate the bene	ficiary of the co	ntract.	J	

10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. Attach a narrative of your Authorities procedures for all employees. E.D. reviews all employees and Board approves salary increases. 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? 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 b. Travel for companions c. Tax indemnification and gross-up payments no d. Discretionary spending account no e. Housing allowance or residence for personal use no f. Payments for business use of personal residence no g. Vehicle/auto allowance or vehicle for personal use no h. Health or social club dues or initiation fees 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 "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer) 15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? no \_ If "yes," attach explanation including amount paid. 16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? If "yes," attach explanation including amount paid. 17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required? n/a If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future. 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? \_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 "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? If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.

### Lakewood Housing Authority Detailed Travel Expenses 1/1/2018-11/16/2018

Reason	Toll account replenish for inpections	Mileage reimbursement for hearings in Princeton	Milegae reimbursement for HUD conference	Mileage reimbursement for RAD conference	Mileage reimbursement for hearings in Princeton	Travel to attend NJ NAHRO conference in Atlantic City	Travel to attend NJ NAHRO conference in Atlantic City	Travel to attend NJ NAHRO conference in Atlantic City	Mileage reimbursement PHA RAD closing	Travel to attend NJAHRA conference in Atlantic City	Travel to attend NJAHRA conference in Atlantic City	Travel to attend NJAHRA conference in Atlantic City	Mileage reimbursement for Princeton Community Village recerts	Mileage reimbursement - Rutgers course for Denise Douglas	Milegae reimbursement for Holly House inspection - Princeton	Milegae reimbursement - Rutgers course for Denise Douglas
Туре	100.00 Tolls	Mileage	' Mileage	Mileage	Mileage	Mileage/per diem/hotel	. Mileage/per diem/hotel	Mileage	Mileage	Mileage/per diem/hotel	Mileage	114.53 Mileage	185.90 Mileage	96.47 Mileage	Milegae	155.88 Milegae
unt	100.00	155.96	106.57	103.82	116.73	457.22	439.01	99.95	86.40	170.11	58.59	114.53	185.90	96.47	61.04	155.88
Amount	↔	· \$	❖	\$	\$	<b>ب</b>	<b>ب</b>	❖	❖	❖	\$	❖	❖	❖	ᢌ	❖
Date Employee	1/11/2018 NJ EZ Pass	1/27/2018 Mary Jo Grauso	3/15/2018 Mary Jo Grauso	4/30/2018 Scott Parsons	5/7/2018 Mary Jo Grauso	5/24/2018 Mary Jo Grauso	5/24/2018 Scott Parsons	5/24/2018 Teresa Acosta	5/29/2018 Mary Jo Grauso	9/26/2018 Mary Jo Grauso	9/26/2018 Norma Berrios	9/26/2018 Teresa Acosta	10/17/2018 Mary Jo Grauso	10/19/2018 Teresa Acosta	10/25/2018 Martin Giacobbe	11/14/2018 Mary Jo Grauso

Total \$ 2,508.18

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

### **LAKEWOOD**

(Name)

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- **Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
  - c) 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
  - d) 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)

Position   Authority (PAZ)   Position	Position   Position   Average Hours   Position   Positi	. 8	For the Period January 1, 2019 to December 31, 20, B	For the Period January 1, 2019	E F G	to G H I	December 31, 2019	r 31, 2019 K	L	Μ	N	0	þ	ď	R	The state of the s	Ţ
Average Hours   Average Hour	Average Hours   Average Hour			L	Po	sition	Reporta	ble Compens: hority (W-2/	ation from 1099)								
Thick were backed bac	Average Hours   Average Hour					High			Other (auto allowance,	Estimated amount of other		Names of Other Public		Average Hours per Week		Estimated amount of other compensation from	
Per Neek   2	Title   Dedicated to   Dedicated t			Average Hours		. 1			expense account,	compensation from the	•	Entities where Individual is an		Dedicated to		Other Public Entities (health benefits,	
159,68   1	hair 2 X X None Soard of Edwood Board of Edwoo	Name	Title	per Week Dedicated to Position	Officer	ipensated Employee		Bonus	payment in lieu of health benefits, etc.)	Authority (health benefits, pension, etc.)	i i	Employee or Member of the Governing Body (1) See note below		Entities Listed in Column O	Public Entities (W-2/ 1099)	lieu of health benefits, etc.)	
Divide	hair         2 X X         None           nner         2 X         None           nner         2 X         None           nner         2 X         None           nner         2 X         None           Director         35 X X X         138,894         6,939         5,663         8,184           skecutive Director         35 X X X         11,741           commissioner         2 X         None           scommissioner         2 X         None           \$ 2 X X X X X X X X X X X X X X X X X X	1 Miriam Medina	Chairperson	2 )			None				· '	Lakewood Board of Ed					n
2 X X None  In Commissioner  2 X None  Executive Director  35 X X X 117,823 22,181 1,697 11,141 152,842 None  Resident Commissioner  2 X None  Resident Commissioner  3 X X X X X X X X X X X X X X X X X X	2nd Vice chair     2 X     None       nn Commissioner     2 X     None       Commissioner     2 X     None       Commissioner     2 X     None       Executive Director     35 X X X     117,823       Assistant Executive Director     35 X X None       Assistant Executive Director     35 X X None       Assistant Executive Director     35 X X X X None       Assistant Executive Director     35 X X X X X X X X X X X X X X X X X X X	egory Stafford Smith	Vice Chair	2 )			None				<b>5</b> (	None					
None	None   Commissioner   2	3 Shabsi Ganzweig	2nd Vice chair	2.3			None				<b>5</b> (	None					
2 X None 0 None 159,68 2 X X X 138,884 6,939 5,663 8,184 159,680 None 152,842 None	Commissioner 2 X None  Commissioner 2 X None  Commissioner 2 X None  Executive Director 35 X X 138,894 6,939 5,663 8,184  Assistant Executive Director 35 X 117,823 22,181 1,697 11,141  Resident Commissioner 2 X None  \$\frac{\xi_{\text{Sign}}}{2 \text{ None}}\$ \$\frac{\xi_{\text{Sign}	4 Nechama Heinemann	Commissioner	2 )	~		None				<b>)</b>	None					
ten Commissioner 2 X None  Executive Director 35 X X X 138,894 6,939 5,663 8,184 159,680 None  Executive Director 35 X X 117,823 22,181 1,141 152,842 None  Assistant Executive Director 35 X None  Assistant Executive Director 35 X None  Resident Commissioner 2 X None  Resident Commissioner 2 X None  Secretive Director 35 X X 11,141 152,842 None  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ten Commissioner 2 X None  Executive Director 35 X X 138,894 6,939 5,663 8,184  Assistant Executive Director 35 X 117,823 22,181 1,697 11,141  Resident Commissioner 2 X None  \$\frac{\xeta}{2.2.05}\$ \text{ None} \text{ None} \text{ \$\frac{\xeta}{2.2.05}\$ \$\frac{\xeta}{2.2.05}	ngela R. Caldwell	Commissioner	2	~		None				<b>.</b>	None					
Executive Director 35 X X X 138,894 6,339 5,663 8,184 139,800 None  Assistant Executive Director 35 X X X 111,823 22,181 1,697 11,141 152,842 None  Assistant Executive Director 35 X 111,823 22,181 1,697 11,141 152,842 None  Resident Commissioner 2 X None  Resident Commissioner 2 X None  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Executive Director 35 X X X 138,894 6,939 5,663 8,184 Assistant Executive Director 35 X 117,823 22,181 1,697 11,141 Resident Commissioner 2 X None \$\frac{5 \text{Sted}}{5 \text{Sted}} \frac{5 \text{Sted}}{5 \te	seph Weingarten	Commissioner	5	~		None				,	None					159.6
Assistant Executive Director 35 X 117,823 22,181 1,697 11,141 152,442 None  Resident Commissioner 2 X None  Resident Commissioner 2 X None  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Assistant Executive Director 35 X 117,823 22,181 1,697 11,141  Resident Commissioner 2 X None  \$\frac{5.256}{717} \frac{5.29}{5.256} \frac{7}{7,360} \frac{5}{7,360} \frac{5}{5.256} \frac{5}{	ary Jo Grauso	Executive Director	35	×	×	138,894	Φ	5,663			None					152.84
Resident Commissioner 2 X None 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Resident Commissioner     2 X     None       \$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,527	ott Parsons	Assistant Executive Director	35	×		117,823	72	1,697			None					102,0
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,52	enise Douglas	Resident Commissioner	2	×		None				υ O						
0 0 0 0 0 0 0 0 5.256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,522	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,52										0						
0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,522																
0 0 0 5 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,522 ^ \$ - \$ - \$ - \$ 312,522	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,52										, c						
\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,522 ^ \$ \$ . \$ . \$ . \$ 312,522	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,52																
\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$ 312,522	\$ 256,717 \$ 29,120 \$ 7,360 \$ 19,325 \$										, 0						
		tal:					\$ 256,717	\$ 29,120			₩	<b></b>		II	\$	\$	\$ 312,52

## Schedule of Health Benefits - Detailed Cost Analysis

	For the Period	Lakewood Housing Authority January 1, 2019	od Housing Authority January 1, 2019	to	Decembe	December 31, 2019		
	# of Covered Members (Medical	Annual Cost Estimate per Employee	Total Cost	# of Covered Members	Annual Cost			
	& Rx) Proposed Budget	Proposed Budget I	Estimate Proposed Budget	(Medical & Rx) Current Year	per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
Active Employees - Health Benefits - Annual Cost								
Single Coverage	7	\$ 12,086	\$ 84,602	7	\$ 11,861	\$ 83,027	\$ 1,575	1.9%
Parent & Child	2	21,201	42,402	2	20,826	41,652	750	1.8%
Employee & Spouse (or Partner)	2	24,172	48,344	2	23,722	47,444	006	1.9%
Family	2	29,424	58,848	2	28,988	57,976	_	1.5%
Employee Cost Sharing Contribution (enter as negative - )		1000 1000 1000 1000 1000 1000 1000 100	(54,156)			(51,956)		4.2%
Subtotal	13		180,040	13	13	178,143	1,897	1.1%
Commissioners - Health Renefits - Annual Cost								
								1077 11011
Single Coverage			•			•	•	#DIV/0!
Parent & Child			•			t	ľ	#DIV/0i
Employee & Spouse (or Partner)			•			•	1	#DIV/0i
Family			1			ı	1	#DIV/0i
Employee Cost Sharing Contribution (enter as negative - )	24	A CONTRACTOR OF THE CONTRACTOR		,			ı	#DIV/0i
Subtotal	0	0	-	0	0	1	1	#DIV/0i
Retirees - Health Benefits - Annual Cost			A	-				
Single Coverage	2	6,162	12,324	2	6,162	12,324	I	0.0%
Parent & Child			1			İ	1	#DIV/0!
Employee & Spouse (or Partner)			1			ı	1	#DIV/0!
Family			t			*	1	#DIV/0!
Employee Cost Sharing Contribution (enter as negative - )				101			ı	#DIV/0!
Subtotal			12,324	2		12,324	1	0.0%
GRAND TOTAL	15	II	\$ 192,364	15	u	\$ 190,467	\$ 1,897	1.0%
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	lace Answer in Box)			Yes or No				
Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	No)? (Place Answer in		Yes	Yes or No				

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

# Schedule of Accumulated Liability for Compensated Absences

**Lakewood Housing Authority** 

For the Period

January 1, 2019

ф

December 31, 2019

Legal Basis for Benefit

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

Agreement (check applicable items) Employment leubivibal Resolution Agreement Approved Labor **Absence Liability** Dollar Value of Compensated Accrued Total liability for accumulated compensated absences at beginning of current year  $| \dot{\$} |$ **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit See attached

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

### Lakewood Housing Authority Accrued Comp. Absences December 31, 2017

EMPLOYEE	SICK	VACATION	TOTAL
	LEAVE	ACCRUAL	
	ACCRUAL		
GRAUSO	8,534.43	12,336.50	20,870.93
PARSONS	0.00	2,131.21	2,131.21
CRUZ	6,543.27	5,194.06	11,737.33
N. BERRIOS	8,097.14	0.00	8,097.14
MANFREDI	181.13	110.69	291.82
T. BERRIOS	6,816.45	1,294.44	8,110.89
TARANTO	7,867.47	1,106.41	8,973.88
ALEXANDER	217.09	2,919.30	3,136.39
GARCIA	1,785.91	903.29	2,689.20
LEONARD	0.00	0.00	0.00
ACOSTA	3,291.62	0.00	3,291.62
HEILMAN	3,893.25	398.64	4,291.89
GIACOBBE	0.00	1,589.17	1,589.17
DODGE	1,730.46	821.23	2,551.69
HANNON	1,960.00	1,816.89	3,776.89
SALAS	114.83	0.00	114.83
	51,033.05	30,621.83	81,654.88

Taxes	6,246.60
Total	87,901.48

## **Schedule of Shared Service Agreements**

Lakewood Housing Authority

January 1, 2019

For the Period

December 31, 2019

Amount to be Received by/ Paid from Authority

Agreement **End Date** Agreement Effective Date Comments (Enter more specifics if Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services. needed) Name of Entity Receiving Service Type of Shared Service Provided Name of Entity Providing Service None

If No Shared Services X this Box

### 2019 HOUSING AUTHORITY BUDGET

### **Financial Schedules Section**

### SUMMARY

December 31, 2019

Lakewood Housing Authority January 1, 2019 to

For the Period

		FY 2	FY 2019 Proposed Budget	d Budget		FY 2018 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 All Operations	All Operations
REVENUES								
Total Operating Revenues	\$	· •\$-	\$ 13,853,000	\$ 1,909,090	\$ 15,762,090	\$ 15,830,655	\$ (68,565)	-0.4%
Total Non-Operating Revenues	1	1	79,350	78,000	157,350	149,250	8,100	5.4%
Total Anticipated Revenues		1	13,932,350	1,987,090	15,919,440	15,979,905	(60,465)	-0.4%
APPROPRIATIONS								
Total Administration	ı	ı	1,156,770	552,560	1,709,330	1,605,130	104,200	6.5%
Total Cost of Providing Services	•	ı	12,760,000	1,219,060	13,979,060	13,981,250	(2,190)	%0:0
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXXX	XXXXXXXXXXX	1	1	1	#DIV/0!
Total Operating Appropriations	ı		13,916,770	1,771,620	15,688,390	15,586,380	102,010	0.7%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX 212,750	212,750	207,560	5,190	#DIV/0! 2.5%
Total Non-Operating Appropriations Accumulated Deficit	1 1		1 1	212,750	212,750	207,560	5,190	2.5% #DIV/0!
Total Appropriations and Accumulated Deficit	,		13,916,77	1,984,370	15,901,140	15,793,940	107,200	0.7%
Less: Total Unrestricted Net Position Utilized	1	I			1	t	r	#DIV/0!
Net Total Appropriations	t	1	13,916,770	1,984,370	15,901,140	15,793,940	107,200	0.7%
ANTICIPATED SURPLUS (DEFICIT)	٠.	٠	\$ 15,580	\$ 2,720	\$ 18,300	\$ 185,965	\$ (167,665)	-90.2%

### **Revenue Schedule**

### Lakewood Housing Authority

For the Period

January 1, 2019

December 31, 2019

\$ Increase

% Increase

						EV 2010 Adopted	(Decrease)	(Decrease)
		EV 201	9 Proposed B	Rudaat		FY 2018 Adopted Budget	Proposed vs. Adopted	Proposed vs. Adopted
	Public Housing	F1 201.	Housing	ougei	Total All	Total All	Adopted	Adopted
	Management	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operations
OPERATING REVENUES						<u> </u>		
Rental Fees								
Homebuyers' Monthly Payments					\$ -	\$ -	\$ -	#DIV/0!
Dwelling Rental				771000	771,000	774,550	(3,550)	-0.5%
Excess Utilities					-	-	-	#DIV/0!
Non-Dwelling Rental					-	-	-	#DIV/0!
HUD Operating Subsidy				1106490	1,106,490	1,076,320	30,170	2.8%
New Construction - Acc Section 8					-	-	-	#DIV/0!
Voucher - Acc Housing Voucher			13827000		13,827,000	13,858,585	(31,585)	-0.2%
Total Rental Fees			13,827,000	1,877,490	15,704,490	15,709,455	(4,965)	0.0%
Other Operating Revenues (List)								
Cell Towers				22000	22,000	24,000	(2,000)	-8.3%
Mgmt. Services					-	65,000	(65,000)	-100.0%
Laundry Commissions				5000	5,000	3,200	1,800	56.3%
Tenant Sales/Services/CFP/Frauds			26000	4600	30,600	29,000	1,600	5.5%
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)					-	<u> </u>	_	#DIV/0!
Total Other Revenue	-	-	26,000	31,600	57,600	121,200	(63,600	- ) -52.5%
Total Operating Revenues	-	-	13,853,000	1,909,090	15,762,090	15,830,655	(68,565	-0.4%
NON-OPERATING REVENUES								-
Other Non-Operating Revenues (List)					_			
FSS Coordinator			68,350		68,350	68,850	(500	) -0.7%
Capital Fund					-	-	-	#DIV/0!
RAD Conversion Funding				72,000	72,000	72,000	-	0.0%
Type in					-	-	-	#DIV/0!
Type in					-	-	-	#DIV/0!
Type in					-	-	-	#DIV/0!
Total Other Non-Operating Revenue	-	-	68,350	72,000	140,350	140,850	(500	-0.4%
Interest on Investments & Deposits (List)								_
Interest Earned			11,000	6,000	17,000	8,400	8,600	102.4%
Penalties					-	-		#DIV/0!
Other					-	-		#DIV/0!
Total Interest	-	_	11,000	6,000	17,000	8,400	8,600	102.4%
Total Non-Operating Revenues	-	_	79,350	78,000	157,350	149,250	8,100	
TOTAL ANTICIPATED REVENUES	\$ -	\$ -	\$ 13,932,350	\$ 1,987,090	\$ 15,919,440	\$ 15,979,905	\$ (60,465	-0.4%
								=

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

**Lakewood Housing Authority** 

FY 2018 Adopted Budget

	Public Housing		Housing		Total All
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES					
Rental Fees					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental				774,550	774,550
Excess Utilities					· -
Non-Dwelling Rental					-
HUD Operating Subsidy				1,076,320	1,076,320
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			13,858,585		13,858,585
Total Rental Fees	_	-	13,858,585	1,850,870	15,709,455
Other Revenue (List)					
Cell Towers				24,000	24,000
Mgmt. Services				65,000	65,000
Laundry Commissions				3,200	3,200
Tenant Sales/Services/CFP/Frauds			24,000	5,000	29,000
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		-	24,000		121,200
Total Operating Revenues	-	-	13,882,585	1,948,070	15,830,655
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)			60.050		1
FSS Coordinator			68,850		68,850
Capital Fund				72,000	72,000
RAD Conversion Funding				72,000	72,000
Type in					_
Type in					_
Type in		· · · · · · · · · · · · · · · · · · ·	68,850	72,000	140,850
Other Non-Operating Revenues			00,630	72,000	140,630
Interest on Investments & Deposits Interest Earned			5,500	2,900	8,400
			3,300	2,500	8,400
Penalties Other					
Otner Total Interest			5,500	2,900	8,400
Total Mon-Operating Revenues			74,350		
TOTAL ANTICIPATED REVENUES	<u> </u>	\$ -	\$ 13,956,935		
TOTAL MINICIPATED REVENUES	· · · · · · · · · · · · · · · · · · ·	<u> </u>	ψ ±3,330,330		¥ 13,3,3,3,303

### **Appropriations Schedule**

Lakewood Housing Authority

For the Period

January 1, 2019

December 31, 2019

\$ Increase

% Increase

		FY	2019 Proposed	d Budget		FY 2018 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	All Operations
OPERATING APPROPRIATIONS								
Administration				205.070	4 4004 570	¢ 000,700	ć 25.000	2 70/
Salary & Wages			669,600	• 1	\$ 1,004,670	\$ 968,790	\$ 35,880	3.7%
Fringe Benefits			346,570	86,260	432,830	371,700	61,130	16.4%
Legal			17,000	14,000	31,000	31,930	(930)	-2.9%
Staff Training			3,600	3,600	7,200 5,000	7,200 10,300	(E 200\	0.0% -51.5%
Travel			4,000	1,000   8,630	21,630	21,630	(5,300)	0.0%
Accounting Fees			13,000 8,000	9,000	17,000	16,480	520	3.2%
Auditing Fees			95,000	95,000	190,000	177,100	12,900	7.3%
Miscellaneous Administration*  Total Administration	L		1,156,770	552,560	1,709,330	1,605,130	104,200	6.5%
			1,130,770	332,300	1,703,330		101,200	0.570
Cost of Providing Services Salary & Wages - Tenant Services					_		_	#DIV/01
Salary & Wages - Heliant Services Salary & Wages - Maintenance & Operation				173,620	173,620	130,070	43,550	33.5%
Salary & Wages - Protective Services				1.0,010		,	-	#DIV/0!
Salary & Wages - Utility Labor				74,410	74,410	55,750	18,660	33.5%
Fringe Benefits				114,930	114,930	127,600	(12,670)	-9.9%
Tenant Services				14,000	14,000	15,450	(1,450)	-9.4%
Utilities				380,000	380,000	440,060	(60,060)	-13.6%
Maintenance & Operation	}			295,000	295,000	285,000	10,000	3.5%
Protective Services				65,000	65,000	62,000	3,000	4.8%
Insurance			15,000	69,000	84,000	84,500	(500)	-0.6%
Payment in Lieu of Taxes (PILOT)	1		•	24,500	24,500	26,870	(2,370)	-8.8%
Terminal Leave Payments				·	-	-	-	#DIV/01
Collection Losses	1			6,000	6,000	6,000	-	0.0%
Other General Expense			8,000		8,000	12,350	(4,350)	-35.2%
Rents			12,737,000		12,737,000	12,733,000	4,000	0.0%
Extraordinary Maintenance					-	-	-	#DIV/0!
Replacement of Non-Expendible Equipment				2,600	2,600	2,600	-	0.0%
Property Betterment/Additions					-	-	-	#DIV/0!
Miscellaneous COPS*					-	_		#DIV/01
<b>Total Cost of Providing Services</b>	-	-	12,760,000	1,219,060	13,979,060	13,981,250	(2,190)	0.0%
Total Principal Payments on Debt Service in Lieu of								
Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX				#DIV/0!
Total Operating Appropriations		-	13,916,770	1,771,620	15,688,390	15,586,380	102,010	0.7%
NON-OPERATING APPROPRIATIONS								
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	- 1	-	-	#DIV/0!
Operations & Maintenance Reserve					-	-		#DIV/0!
Renewal & Replacement Reserve				212,750	212,750	207,560	5,190	2.5%
Municipality/County Appropriation					-	-	-	#DIV/01
Other Reserves				242.750	212.750	207,560	F 100	#DIV/0!
Total Non-Operating Appropriations	-		12.016.770	212,750	212,750		5,190	2.5%
TOTAL APPROPRIATIONS	<u>-</u>	-	13,916,770	1,984,370	15,901,140 1	15,793,940	107,200	0.7% #DIV/0!
ACCUMULATED DEFICIT					l		· <del></del>	- #DIV/01
TOTAL APPROPRIATIONS & ACCUMULATED			13,916,770	1,984,370	15,901,140	15,793,940	107,200	0.7%
DEFICIT			13,510,770	1,564,570	13,301,140	13,733,340	107,200	- 0.778
UNRESTRICTED NET POSITION UTILIZED				=	=	_	=	#DIV/0!
Municipality/County Appropriation					1 -	-		#DIV/01
Other Total Unrestricted Net Position Utilized								#DIV/01
TOTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 13,916,770	\$ 1,984,370	\$ 15,901,140	\$ 15,793,940	\$ 107,200	_ '
TOTAL NET APPROPRIATIONS	<del>-</del>		÷ 15,510,770	÷ 1,507,570	+ 25,502,240		<del>-</del>	= 5.776
* Miscellaneous line items may not exceed 5% of t	otal operating app	propriations sho	wn below. If amou	nt in miscellaneous is a	greater than the amo	ount shown below,		

5% of Total Operating Appropriations

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

**Lakewood Housing Authority** 

			2018 Adopted Budge		
	Public Housing				Total All
	Management	Section 8	Housing Voucher	Other Programs	Operations
OPERATING APPROPRIATIONS					
Administration					
Salary & Wages			\$ 711,660		968,790
Fringe Benefits			275,700	96,000	371,700
Legal			25,540	6,390	31,930
Staff Training			3,600	3,600	7,200
Travel			8,240	2,060	10,300
Accounting Fees			17,300	4,330	21,630
Auditing Fees			11,850	4,630	16,480
Miscellaneous Administration*			141,100	36,000	177,100
Total Administration	-	-	1,194,990	410,140	1,605,130
Cost of Providing Services					
Salary & Wages - Tenant Services					=
Salary & Wages - Maintenance & Operation				130,070	130,070
Salary & Wages - Protective Services					
Salary & Wages - Utility Labor				55,750	55,750
Fringe Benefits				127,600	127,600
Tenant Services				15,450	15,450
				440,060	440,060
Utilities				285,000	285,000
Maintenance & Operation				62,000	•
Protective Services			45 500		62,000
Insurance			15,500	69,000	84,500
Payment in Lieu of Taxes (PILOT)				26,870	26,870
Terminal Leave Payments					
Collection Losses				6,000	6,000
Other General Expense			12,350		12,350
Rents			12,733,000		12,733,000
Extraordinary Maintenance					-
Replacement of Non-Expendible Equipment				2,600	2,600
Property Betterment/Additions					•
Miscellaneous COPS*		·			
Total Cost of Providing Services	-	-	12,760,850	1,220,400	13,981,250
Total Principal Payments on Debt Service in Lieu of					
Depreciation	XXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXX	
Total Operating Appropriations	-	-	13,955,840	1,630,540	15,586,380
NON-OPERATING APPROPRIATIONS					
Total Interest Payments on Debt	XXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXXX	XXXXXXXXXXXXX	
Operations & Maintenance Reserve					
Renewal & Replacement Reserve				207,560	207,560
Municipality/County Appropriation					•
Other Reserves					
Total Non-Operating Appropriations	-	-	-	207,560	207,560
TOTAL APPROPRIATIONS			13,955,840	1,838,100	15,793,940
ACCUMULATED DEFICIT			10,550,010	2,000,200	20,750,5
	L				T
TOTAL APPROPRIATIONS & ACCUMULATED			12.055.040	1,838,100	15,793,940
DEFICIT			13,955,840	1,030,100	15,795,940
UNRESTRICTED NET POSITION UTILIZED					
Municipality/County Appropriation	-	-		-	
Other					
Total Unrestricted Net Position Utilized		<u>-</u>		_	
TOTAL NET APPROPRIATIONS	\$ -	\$ -	\$ 13,955,840	\$ 1,838,100	\$ 15,793,940

5% of Total Operating Appropriations

697,792.00 \$ 81,527.00 \$

779,319.00

## Debt Service Schedule - Principal

			Lakewood Hou	Lakewood Housing Authority					
If Authority has no debt X this box	×								
				Fiscal Year Ending in	ding in			ı	
	Adopted Budget Year 2018	Proposed Budget Year 2019	2020	2021	2022	2023	2024	Thereafter	Total Principal Thereafter Outstanding
Type in Issue Name									· \$
Type in Issue Name									
Type in Issue Name									1
Type in Issue Name									
TOTAL PRINCIPAL	4	ı		·		1			ı
LESS: HUD SUBSIDY									
NET PRINCIPAL	\$	- \$	\$	<b>\$</b> -	\$ -	- \$ -	\$	- \$ ·	· \$
		1 - 1 - 1 - 1 - 1							
Indicate the Authority's most recent hand rating and the year of the rating by ratings Service.	ond rating and the year	ot the ratina by rat.	ings service.						

Bond Rating Year of Last Rating If no Rating type in Not Applicable	indicate the Authority's most recent bond rating and the year of the rating by ratings service.	ecent bond rating and the year	r of the rating by rati	ings service.
		Moody's	Fitch	Standard & Poors
	3ond Rating			
If no Rating type in Not Applicable	rear of Last Rating			
		lf no l	Rating type in Not A	pplicable

### Debt Service Schedule - Interest

			Lakewood Housing Authority	ng Authority					
If Authority has no debt X this box	×								
				Fiscal Year Ending in	ng in			1	
	Adopted Budget	Proposed Budget Year						ı	Total Interest Payments
	Year 2018	2019	2020	2021	2022	2023	2024	Thereafter	Outstanding
Type in Issue Name									ſ
Type in Issue Name									ı
Type in Issue Name									•
Type in Issue Name									1
TOTAL INTEREST	1	1			1	ı	ι	f	ı
LESS: HUD SUBSIDY									ı
NET INTEREST	\$	\$	\$	- \$ -	- \$	- \$	\$	\$	٠ ٠

## **Net Position Reconciliation**

### Lakewood Housing Authority

January 1, 2019 For the Period

December 31, 2019 2

FY 2019 Proposed Budget

Housing Voucher

Section 8

Public Housing Management \$ 9,011,604 4,313,920

8,860,154 4,313,920

151,450

Operations

Other Programs

Total All

1,879,988 2,817,696

1,423,802

3,122,432

(304, 736)

456,186

3,244,426

1,831,775

1,412,651

185,965

184,870

1,095

## 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)

ess: Other Restricted Net Position (1) Total Unrestricted Net Position (1)

Less: Designated for Non-Operating Improvements & Repairs

Less: Designated for Rate Stabilization

Less: Other Designated by Resolution

Plus: Accrued Unfunded Pension Liability (1)

Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1) Plus: Estimated Income (Loss) on Current Year Operations (2)

Plus: Other Adjustments (attach schedule)

# UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET

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

## PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAI 4

	- 36	, 1,	1,109,010	5,139,077 6,248,087	6,248,
			***	**************************************	
	* *.		t	E	
		₹ <b>¥</b> î.		<b>%</b>	
		38	: :#	i i	
				***************************************	***************************************
Ś	\$	, L	\$ 1,109,010 \$	5,139,077 \$ 6,248,087	\$ 6.248.0

(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.

695,839 Maximum Allowable Appropriation to Municipality/County

784,420

88,581

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 LAKEWOOD

(Name)

# HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

### 2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

### **LAKEWOOD**

(Name)

1/1/2019

TO:

FROM:

FISCAL YEAR:

FISCAL Y	EAR: FROM:	1/1/2019 <b>T</b>	<b>CO:</b> 12/31/201	9
[ X ] It is hereby cert is a true copy of the Capital E Annual Budget, by the governing 27 <sup>TH</sup> day of	Budget/Program app	roved, pursuant to <u>N.</u> AKEWOOD	<u>J.A.C. 5:31-2.2</u> , a Housing Autho	long with the
		OR		
[ ] It is hereby cert elected NOT to adopt a Capi 5:31-2.2 for the follow	tal Budget /Progran	n for the aforesaid fi	Housing A scal year, pursuan	t to N.J.A.C.
Officer's Signature:	mare e-	n Sh new	7	
Name:	MARY JO GRAU			
Title:	EXECUTIVE DIR	RECTOR		
Address:	317 SAMPSON A LAKEWOOD, NJ	- · · <del>-</del>		
Phone Number:	732-364-1300	Fax Number:	732-367-3299	
E-mail address	mgrauso@lakewoo	1		

### 2019 CAPITAL BUDGET/PROGRAM MESSAGE

### **LAKEWOOD** Housing Authority

(Name)

FISCAL YEAR:

FROM:

1/1/2019

TO:

12/31/2019

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?

The Authority's Annual and 5 Year Plan is prepared in consultation with the Authority residents.

- 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? 5 Years
- 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.

None

- 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.

  None
- 6. Have the projects been reviewed and approved by HUD? Yes

Add additional sheets if necessary.

### **Proposed Capital Budget**

### **Lakewood Housing Authority**

For the Period

January 1, 2019

to

December 31, 2019

				nding Sources		
			Renewal &			
	<b>Estimated Total</b>	<b>Unrestricted Net</b>	Replacement	Debt		Other
	Cost	Position Utilized	Reserve	Authorization	Capital Grants	Sources
Public Housing Management						
Type in Description	\$ -					
Type in Description	-					
Type in Description	-					
Type in Description	_					
Total	_	<del>-</del>	_	-	-	_
Section 8	_	<b>,</b>				
Type in Description	-					ĺ
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	7					
RAD PHYSICAL IMPROVEMENTS	410,034		\$ 410,034			
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	410,034	-	410,034			-
TOTAL PROPOSED CAPITAL BUDGET	\$ 410,034	\$ -	\$ 410,034	\$ -	\$ -	\$ -

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**

**Lakewood Housing Authority** 

For the Period

January 1, 2019

to

December 31, 2019

Fiscal Year Beginning in

	Esti	mated Total Cost		rent Budget 'ear 2019	2020	2021	2022	2023	2024
Public Housing Management									
Type in Description	\$	-	\$	-					
Type in Description		-		-					
Type in Description		-		-					
Type in Description				-					
Total		-			-	 -	-	-	 -
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			-			 	 		
RAD PHYSICAL IMPROVEMENTS		1,953,414		410,034	\$510,688	\$ 440,617	\$ 334,736	\$ 118,056	\$ 139,283
Type in Description		-		-				,	·
Type in Description		-		-					
Type in Description		-		-					
Total		1,953,414		410,034	510,688	 440,617	334,736	 118,056	 139,283
TOTAL	\$	1,953,414	\$	410,034	\$ 510,688	\$ 440,617	\$ 334,736	\$ 118,056	\$ 139,283

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**

**Lakewood Housing Authority** 

For the Period

January 1, 2019

December 31, 2019

					Fun	ding Sources		
				Re	enewal &			
	Estin	nated Total	Unrestricted I	Net Rep	olacement	Debt		
		Cost	Position Utiliz	zed I	Reserve	Authorization	Capital Grants	Other Sources
Public Housing Management								
Type in Description	\$	-						
Type in Description		-						
Type in Description		-						
Type in Description		-						
Total				-	-	-	-	-
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								
RAD PHYSICAL IMPROVEMENTS		1,953,414		\$	1,953,414			
Type in Description		-						
Type in Description		-						
Type in Description								
Total		1,953,414		-	1,953,414			
TOTAL	\$	1,953,414	\$	- \$	1,953,414	\$ -	\$ -	\$ -
Total 5 Year Plan per CB-4	\$	1,953,414						
Balance check		 - If	f amount is other ti	han zero, ve	erify that proj	ects listed above	match projects li	sted 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.