

2016

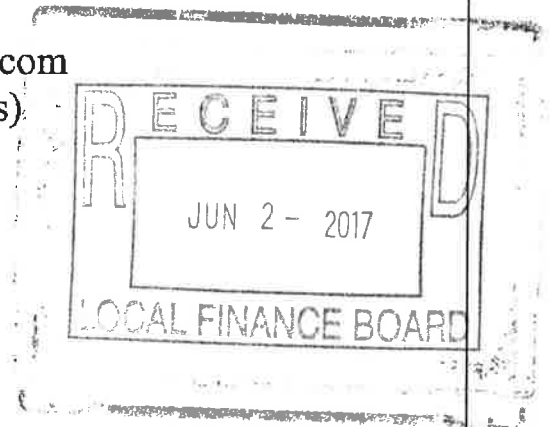
South Amboy Housing Authority
(name)
Housing Authority Budget

www.southamboyhousing.com
(Authority Web Address)

Department Of



**Community
Affairs**



Division of Local Government Services

2016 HOUSING AUTHORITY BUDGET

Certification Section



2016

South Amboy Housing Authority
(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM July 1, 2016 TO June 30, 2017

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: Paul D Cwert CPA, RMA Date: 7/28/2017

2016 PREPARER'S CERTIFICATION

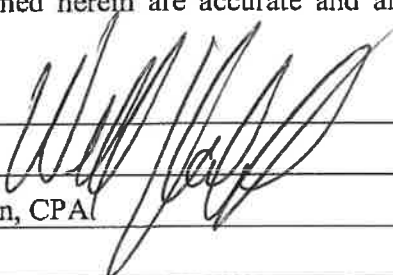
South Amboy Housing Authority (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM:7/1/2016 TO:6/30/2017

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: | William Katchen, CPA | | |
| Title: | Fee Accountant | | |
| Address: | Suite 303, 596 Anderson Avenue, Suite 303, Cliffside Park, NJ 07010 | | |
| Phone Number: | 201-943-4449 | Fax Number: | 201-943-5099 |
| E-mail address | bill@katchencpa.com | | |

2016 APPROVAL CERTIFICATION

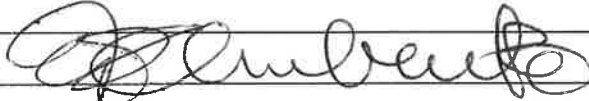
South Amboy Housing Authority
(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: **FROM:7/1/2016** **TO:6/30/2017**

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 South Amboy Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 13 day of June, 2016.

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: | Eric Chubenko | | |
| Title: | Interim Executive Director | | |
| Address: | 250 S. Broadway, South Amboy, NJ 08879 | | |
| Phone Number: | 732-721-1831 | Fax Number: | 732-721-0377 |
| E-mail address | chaeric@aol.com | | |

INTERNET WEBSITE CERTIFICATION

| | |
|---------------------------------|--|
| Authority's Web Address: | www.southamboyhousing.com |
|---------------------------------|--|

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
- Commencing with 2013, 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
- Commencing with 2012, the complete annual audits 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
- Beginning January 1, 2013, 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

ERIC CHUBENKO

Title of Officer Certifying compliance

Interim Executive Director

Signature



2016 HOUSING AUTHORITY BUDGET RESOLUTION

South Amboy Housing Authority

(Name)

FISCAL YEAR: FROM: 7/1/2016 TO: 6/30/2017

WHEREAS, the Annual Budget and Capital Budget for the South Amboy Housing Authority for the fiscal year beginning, July 1, 2016 and ending, June 30, 2017 has been presented before the governing body of the South Amboy Housing Authority at its open public meeting of June 13, 2016; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$ 2,660,400, Total Appropriations, including any Accumulated Deficit if any, of \$ 2,691,890 and Total Unrestricted Net Position utilized of 31,490; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$125,000 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 South Amboy Housing Authority, at an open public meeting held on June 13, 2016 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the South Amboy Housing Authority for the fiscal year beginning, 7/1/2016 and ending, 6/30/2017 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 South Amboy Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on September 12, 2016.

[Signature] (Secretary's Signature) 6/13/2016 (Date)

| Governing Body Member: | Recorded Vote | | Abstain | Absent | Handwritten Notes |
|------------------------|---------------|-----|---------|--------|----------------------------|
| | Aye | Nay | | | |
| Attardi | ✓ | | | | 1 of Gofich and Connors |
| Spencer | ✓ | | | | |
| O'Connor | ✓ | | OK | ✓ | |
| Gofich | ✓ | | | | |
| Sapienza | ✓ | | | | |
| Connors | ✓ | | | | |
| Usj | ✓ | | | | |


2016 ADOPTION CERTIFICATION

South Amboy Housing Authority (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: **FROM:7/1/2016** **TO:6/30/2017**

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 South Amboy Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 8 day of, May, 2017.

| | | | |
|----------------------|--|-------------|--------------|
| Officer's Signature: |  | | |
| Name: | Eric Chubenko | | |
| Title: | Interim Executive Director | | |
| Address: | 250 S. Broadway, South Amboy, NJ 08879 | | |
| Phone Number: | 732-721-1831 | Fax Number: | 732-721-0377 |
| E-mail address | chaeric@aol.com | | |

Resolution No. 1159
2016 ADOPTED BUDGET RESOLUTION

South Amboy Housing Authority
 (Name)
HOUSING AUTHORITY

FISCAL YEAR: FROM: 7/1/2016 TO: 6/30/2017

WHEREAS, the Annual Budget and Capital Budget/Program for the South Amboy Housing Authority for the fiscal year beginning July 1, 2016 and ending, June 30, 2017 has been presented for adoption before the governing body of the South Amboy Housing Authority at its open public meeting of May 8, 2017; and

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

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$2,660,400, Total Appropriations, including any Accumulated Deficit, if any, of \$2,691,890 and Total Unrestricted Net Position utilized of \$31,490 and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$125,000 and Total Unrestricted Net Position planned to be utilized of \$_____0_____; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of South Amboy Housing Authority, at an open public meeting held on May 8, 2017 that the Annual Budget and Capital Budget/Program of the South Amboy Housing Authority for the fiscal year beginning, 7/1/2016 and, ending, 6/30/2017 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)

5-8-17
 (Date)

| Governing Body Member: | Recorded Vote | | | |
|------------------------|---------------|-----|---------|--------|
| | Aye | Nay | Abstain | Absent |
| Sylvester Attardi | x | | | |
| Grace Spencer | x | | | |
| Edward O'Connor | x | | | |
| Paul Gulick | x | | | |
| Saverio Sagliocco | | | | x |
| Joseph Connors | x | | | |
| Lynn Ust | | | | x |

RESOLUTION NO: 1159
SOUTH AMBOY HOUSING AUTHORITY
2016 ADOPT BUDGET FOR
FISCAL YEAR: FROM: JULY 1, 2016 to JUNE 30, 2017

WHEREAS, the Annual Budget and Capital Budget/Program for the South Amboy Housing Authority for the fiscal year beginning July 1, 2016 and ending June 30, 2017 has been presented for adoption before the Members of the South Amboy Housing Authority at its open public meeting of May 8, 2017; and

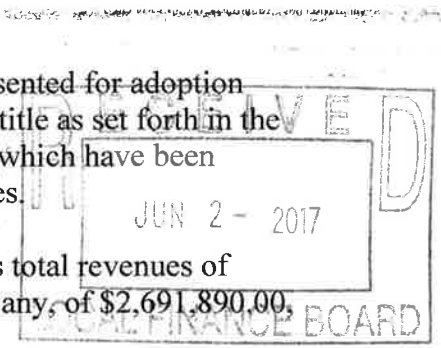
WHEREAS, the Annual Budget and the Capital Budget as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including amendments thereto, if any, which have been approved by the Director of the Division of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

WHEREAS, the Annual Budget as presented introduced reflects total revenues of \$2,660,400.00 total appropriations, including any accumulated deficit if any, of \$2,691,890.00, and Total Unrestricted Net Position utilized of \$31,490.00; and

WHEREAS, the Capital Budget as introduced reflects total capital appropriations of \$ 125,000.00 and total fund balance planned to be utilized as funding thereof, of \$ 0.00; and

NOW, THEREFORE BE IT RESOLVED, by the Members of the South Amboy Housing Authority, at an open meeting held on May 8, 2017 that the Annual Budget, including appended Supplemental Schedules, and the Capital Budget/Program of the South Amboy Housing Authority for the fiscal year period beginning July 1, 2016 and ending June 30, 2017 is hereby adopted; and

BE IT FURTHER RESOLVED, that the Annual Budget and the 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 amendments thereto, if any, which have been approved by the Director of the Division of Local Governmental Services.





SYLVESTER ATTARDI, Chairman

I hereby certify that there is appropriate funding in the budget for said expenditures.



WILLIAM KATCHEN, CPA.

Attested to:



LAWRENCE STRATTON
Acting Secretary
Dated: May 8, 2017

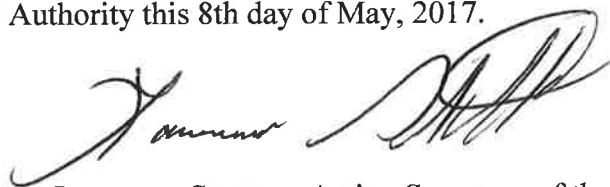
Resolution was introduced by Sylvester Attardi, moved by Joseph Connors and seconded Paul Gulick. Vote 5-0.

| | <u>YES</u> | <u>NO</u> | <u>ABSTAIN</u> | <u>ABSENT</u> |
|-----------------------|------------|-----------|----------------|---------------|
| Sylvester Attardi | X | | | |
| Joseph Connors | X | | | |
| Paul Gulick | X | | | |
| Grace Hoffman-Spencer | X | | | |
| Edward O'Connor | X | | | |
| Saverio Sagliocco | | | | X |
| Lynn Ust | | | | X |

CERTIFICATION

I, Lawrence Stratton, Acting Secretary of the Housing Authority of the City of South Amboy, in the County of Middlesex, State of New Jersey (the "Authority"), DO HEREBY CERTIFY that the foregoing annexed extract from the Minutes of a Regular Meeting of the Board of Commissioners of the Authority duly called and held on May 8, 2017, has been compared by me with the original minutes as officially recorded in my office in the Minute Book of such governing body and is a true, complete and correct copy thereof and of the whole of the original minutes so far as they relate to the subject matter referred to in the extract.

IN WITNESS WHEREOF, I have hereunto set my hand on behalf of the Authority and affixed the corporate seal of said Authority this 8th day of May, 2017.



Lawrence Stratton, Acting Secretary of the Housing Authority of the City of South Amboy

2016 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2016 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

South Amboy Housing Authority (Name)

AUTHORITY BUDGET

FISCAL
YEAR:

FROM:7/1/2016

TO:6/30/2017

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

1. Complete a brief statement on the 2016 proposed Annual Budget and make comparison to the 2015 adopted budget. Explain any variances over +/-10% for each line item. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if the anticipated HUD Operating Subsidy has increased 15%, provide documentation that supports the increased HUD Operating Subsidy to the Housing Authority. **Budgeted revenues are expected to remain stable with small reductions in HUD funding due to lower utility costs. Expenditures will remain stable with lower estimates in fringe benefits due to reduction in staffing and utility costs based on lower rates. Maintenance salaries are expected to be higher with added part time staffing and administrative fringe benefit expense is expected to be lower due to reduced staffing and the use of more part time staffing. PILOT is projected to be higher based on lower utility expense calculated per HUD formula.**

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% from the current year adopted budget.

The budget is not expected to have an impact on revenue as the majority of revenue sources are based on formula established by HUD.

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 economy is stable and not expected to impact the proposed budget.

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.

Lower HUD funding has resulted in the use of unrestricted net assets to balance the budget.

5. Is the Authority required to implement project-based budgeting and asset management under HUD rules and regulations? If yes, has the Authority's governing body adopted a project-based budget?

No.

6. The proposed budget must not reflect an anticipated deficit from 2016 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.

None.

7. Attach a schedule of the Authority's existing rate structure (rent, maintenance/utilities, etc.) and a schedule of the proposed rate structure for the upcoming fiscal year. Explain any proposed changes in the rate structure and attach the resolution approving the change in the rate structure, if applicable.

Rents are based on HUD formula and vary based on tenant income.

8. Attach a copy of the Authority's most recent Annual Operating Data submission to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) under the Authority's Continuing Disclosure Agreements for any debt issuances outstanding. Examples of Annual Operating Data may include rents and collections; number of tenants; number of available housing units; etc. See Local Finance Notice 2014-9 for more information. N/A.

HOUSING AUTHORITY CONTACT INFORMATION 2016

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

| | | | |
|---------------------------|--------------------------------|-------------|--------------|
| Name of Authority: | South Amboy Housing Authority- | | |
| Federal ID Number: | 22-6002641 | | |
| Address: | 250 S. Broadway | | |
| City, State, Zip: | South Amboy | NJ | 08879 |
| Phone: (ext.) | 732-721-1831 | Fax: | 732-721-0377 |

| | | | |
|----------------------------|--|-------------|--------------|
| Preparer's Name: | William Katchen, CPA | | |
| Preparer's Address: | Suite 303, 596 Anderson Avenue | | |
| City, State, Zip: | Cliffside Park | NJ | 07010 |
| Phone: (ext.) | 201-943-4449 | Fax: | 201-943-5099 |
| E-mail: | bill@katchencpa.com | | |

| | | | |
|---------------------------------|--|-------------|--------------|
| Chief Executive Officer: | Eric Chubenko | | |
| Phone: (ext.) | 732-721-1831 | Fax: | 732-721-0377 |
| E-mail: | chaerico@aol.com | | |

| | | | |
|---------------------------------|--|-------------|--------------|
| Chief Financial Officer: | William Katchen, CPA | | |
| Phone: (ext.) | 201-943-4449 | Fax: | 201-943-5099 |
| E-mail: | bill@katchencpa.com | | |

| | | | |
|--------------------------|--|-------------|--------------|
| Name of Auditor: | Anthony Giampaolo | | |
| Name of Firm: | Hymanson, Parnes and Giampaolo | | |
| Address: | 467 Middletown-Lincroft Road | | |
| City, State, Zip: | Lincroft | NJ | 07738 |
| Phone: (ext.) | 732-842-4550 | Fax: | 732-842-4551 |
| E-mail: | tony@hpgnj.com | | |

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

South Amboy Housing Authority (Name)

FISCAL
YEAR:

FROM:7/1/2016

TO:6/30/2017

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

- 1) Provide the number of individuals
- 2) employed in calendar year 2014 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 18
- 3) Provide the amount of total salaries and wages for calendar year 2014 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 528,675
- 4) Provide the number of regular voting members of the governing body: 7
- 5) Provide the number of alternate voting members of the governing body: 0
- 6) 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.
- 7) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year because of their relationship with the Authority file the form as required? 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.
- 8) 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.
- 9) 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? NoIf 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.
- 10) 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.
- 11) 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 narrative. Review by Commissioners and HUD required comparability study.
- 12) 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.

13) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? Yes _____ *If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed.*

**HOUSING AUTHORITY INFORMATIONAL
QUESTIONNAIRE (CONTINUED)**
South Amboy Housing Authority
(Name)

**FISCAL
YEAR:**

FROM:7/1/2016

TO:6/30/2017

- 14) 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.*
- 15) 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.*
- 16) 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.*
- 17) 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.*
- 18) 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.*
- 19) 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.*
- 20) Did the Authority receive any notices of fines or assessments from the Department of Housing and Urban Development or any other entity due to noncompliance with current regulations ? No _____ *If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.*
- 21) Has the Authority been deemed "troubled" by the Department of Housing and Urban Development? No _____ *If "yes," attach an explanation of the reason the Authority was deemed "troubled" and describe the Authority's plan to address the conditions identified.*

**AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES,
HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS**
South Amboy Housing Authority
(Name)

**FISCAL
YEAR:**

FROM:7/1/2016

TO:6/30/2017

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, 2016, the calendar year 2014 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2015, with 2014 being the most recent calendar year ended), and for fiscal years ending June 30, 2017, the calendar year 2015 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2016, with 2015 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.

Schedule of Health Benefits - Detailed Cost Analysis

South Amboy Housing Authority

For the Period July 1, 2016 to June 30, 2017

| | Annual Cost | | # of Covered Members | Annual Cost per Employee | Total Cost Estimate | # of Covered Members (Medical & Rx) | Annual Cost per Employee | Total Current Year Cost | \$ Increase (Decrease) | % Increase (Decrease) |
|---|---|---------------------------------------|----------------------|--------------------------|---------------------|-------------------------------------|--------------------------|-------------------------|------------------------|-----------------------|
| | # of Covered Members (Medical & Rx) Proposed Budget | Estimate per Employee Proposed Budget | | | | | | | | |
| Active Employees - Health Benefits - Annual Cost | | | | | | | | | | |
| Single Coverage | 5 | \$ 11,600 | 5 | \$ 2,320 | \$ 58,000 | 5 | \$ 11,244 | \$ 56,220 | \$ 1,780 | 3.2% |
| Parent & Child | 1 | 20,750 | 1 | 20,750 | 20,750 | 1 | 20,124 | 20,124 | 626 | 3.1% |
| Employee & Spouse (or Partner) | 1 | 23,250 | 1 | 23,250 | 23,250 | 1 | 22,488 | 22,488 | 762 | 3.4% |
| Family | 1 | 32,300 | 1 | 32,300 | 32,300 | 1 | 31,368 | 31,368 | 932 | 3.0% |
| Employee Cost Sharing Contribution (enter as negative -) | | | | (5,250) | | | | (5,100) | (150) | 2.9% |
| Subtotal | 8 | 129,050 | 8 | 129,050 | 129,050 | 8 | 125,100 | 125,100 | 3,950 | 3.2% |
| Commissioners - Health Benefits - Annual Cost | | | | | | | | | | |
| 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 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | #DIV/0! |
| Retirees - Health Benefits - Annual Cost | | | | | | | | | | |
| Single Coverage | 1 | 6,700 | 1 | 6,700 | 6,700 | 1 | 6,485 | 6,485 | 215 | 3.3% |
| Parent & Child | | | | | | | | | | #DIV/0! |
| Employee & Spouse (or Partner) | | | | | | | | | | #DIV/0! |
| Family | | | | | | | | | | #DIV/0! |
| Employee Cost Sharing Contribution (enter as negative -) | | | | | | | | | | #DIV/0! |
| Subtotal | 1 | 6,700 | 1 | 6,700 | 6,700 | 1 | 6,485 | 6,485 | 215 | 3.3% |
| GRAND TOTAL | 9 | \$ 135,750 | 9 | \$ 135,750 | \$ 135,750 | 9 | \$ 131,585 | \$ 131,585 | \$ 4,165 | 3.2% |

Is medical coverage provided by the SHBP (Yes or No)? Yes

Is prescription drug coverage provided by the SHBP (Yes or No)? Yes

2016 HOUSING AUTHORITY BUDGET

Financial Schedules Section

2016 Budget Summary

For the Period South Amboy Housing Authority to June 30, 2017
 July 1, 2016

| | Proposed Budget | | | Adopted Budget | \$ Increase (Decrease) Proposed vs. Adopted | % Increase (Decrease) Proposed vs. Adopted |
|--|------------------------------|-----------|--------------------|----------------|--|---|
| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | | |
| REVENUES | | | | | | |
| Total Operating Revenues | \$ 1,296,110 | \$ - | \$ 1,245,000 | \$ 114,550 | \$ 2,601,867 | 2.1% |
| Total Non-Operating Revenues | 4,740 | - | 4,740 | - | 4,740 | 0.0% |
| Total Anticipated Revenues | 1,300,850 | - | 1,245,000 | 114,550 | 2,606,607 | 2.1% |
| APPROPRIATIONS | | | | | | |
| Total Administration | 256,000 | - | 148,820 | 68,920 | 499,670 | -5.2% |
| Total Cost of Providing Services | 1,050,820 | - | 1,121,700 | 45,630 | 2,126,590 | 4.3% |
| Net Principal Payments on Debt Service in Lieu of Depreciation | - | - | - | - | - | #DIV/0! |
| Total Operating Appropriations | 1,306,820 | - | 1,270,520 | 114,550 | 2,626,260 | 2.5% |
| Net Interest Payments on Debt | - | - | - | - | - | #DIV/0! |
| Total Other Non-Operating Appropriations | - | - | - | - | - | #DIV/0! |
| Total Non-Operating Appropriations | - | - | - | - | - | #DIV/0! |
| Accumulated Deficit | - | - | - | - | - | #DIV/0! |
| Total Appropriations and Accumulated Deficit | 1,306,820 | - | 1,270,520 | 114,550 | 2,626,260 | 2.5% |
| Less: Total Unrestricted Net Position Utilized | 5,970 | - | 25,520 | - | 19,653 | 60.2% |
| Net Total Appropriations | 1,300,850 | - | 1,245,000 | 114,550 | 2,606,607 | 2.1% |
| ANTICIPATED SURPLUS (DEFICIT) | \$ - | \$ - | \$ - | \$ - | \$ - | #DIV/0! |

2016 Revenue Schedule

South Amboy Housing Authority

For the Period July 1, 2016 to June 30, 2017

| | <i>Proposed Budget</i> | | | | <i>Adopted Budget</i> | | <i>\$ Increase (Decrease)</i> | <i>% Increase (Decrease)</i> |
|---|------------------------------|-------------|---------------------|-------------------|-------------------------|-------------------------|-----------------------------------|----------------------------------|
| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | Total All Operations | Total All Operations | <i>Proposed vs. Adopted</i> | <i>Proposed vs. Adopted</i> |
| | | | | | | All Operations | All Operations | All Operations |
| OPERATING REVENUES | | | | | | | | |
| <i>Rental Fees</i> | | | | | | | | |
| Homebuyers' Monthly Payments | | | | | \$ - | \$ - | \$ - | #DIV/0! |
| Dwelling Rental | 726,150 | | | | 726,150 | 702,710 | 23,440 | 3.3% |
| Excess Utilities | 36,450 | | | | 36,450 | 36,450 | - | 0.0% |
| Non-Dwelling Rental | | | | | - | - | - | #DIV/0! |
| HUD Operating Subsidy | 411,510 | | | | 411,510 | 441,327 | (29,817) | -6.8% |
| New Construction - Acc Section 8 | | | | | - | - | - | #DIV/0! |
| Voucher - Acc Housing Voucher | | | 1,230,000 | | 1,230,000 | 1,180,280 | 49,720 | 4.2% |
| Total Rental Fees | 1,174,110 | - | 1,230,000 | - | 2,404,110 | 2,360,767 | 43,343 | 1.8% |
| <i>Other Operating Revenues (List)</i> | | | | | | | | |
| Late Charges\Prorations | 122,000 | | 15,000 | 114,550 | 251,550 | 241,100 | 10,450 | 4.3% |
| Other Revenue 2 | | | | | - | - | - | #DIV/0! |
| Other Revenue 3 | | | | | - | - | - | #DIV/0! |
| Other Revenue 4 | | | | | - | - | - | #DIV/0! |
| Total Other Revenue | 122,000 | - | 15,000 | 114,550 | 251,550 | 241,100 | 10,450 | 4.3% |
| Total Operating Revenues | 1,296,110 | - | 1,245,000 | 114,550 | 2,655,660 | 2,601,867 | 53,793 | 2.1% |
| NON-OPERATING REVENUES | | | | | | | | |
| <i>Grants & Entitlements (List)</i> | | | | | | | | |
| Grant #1 | | | | | - | - | - | #DIV/0! |
| Grant #2 | | | | | - | - | - | #DIV/0! |
| Grant #3 | | | | | - | - | - | #DIV/0! |
| Grant #4 | | | | | - | - | - | #DIV/0! |
| Total Grants & Entitlements | | | | | - | - | - | #DIV/0! |
| <i>Local Subsidies & Donations (List)</i> | | | | | | | | |
| Local Subsidy #1 | | | | | - | - | - | #DIV/0! |
| Local Subsidy #2 | | | | | - | - | - | #DIV/0! |
| Local Subsidy #3 | | | | | - | - | - | #DIV/0! |
| Local Subsidy #4 | | | | | - | - | - | #DIV/0! |
| Total Local Subsidies & Donations | | | | | - | - | - | #DIV/0! |
| <i>Interest on Investments & Deposits</i> | | | | | | | | |
| Investments | 4,740 | | | | 4,740 | 4,740 | - | 0.0% |
| Security Deposits | | | | | - | - | - | #DIV/0! |
| Penalties | | | | | - | - | - | #DIV/0! |
| Other Investments | | | | | - | - | - | #DIV/0! |
| Total Interest | 4,740 | - | - | - | 4,740 | 4,740 | - | 0.0% |
| <i>Other Non-Operating Revenues (List)</i> | | | | | | | | |
| Other Non-Operating #1 | | | | | - | - | - | #DIV/0! |
| Other Non-Operating #2 | | | | | - | - | - | #DIV/0! |
| Other Non-Operating #3 | | | | | - | - | - | #DIV/0! |
| Other Non-Operating #4 | | | | | - | - | - | #DIV/0! |
| Other Non-Operating Revenues | | | | | - | - | - | #DIV/0! |
| Total Non-Operating Revenues | 4,740 | - | - | - | 4,740 | 4,740 | - | 0.0% |
| TOTAL ANTICIPATED REVENUES | \$ 1,300,850 | \$ - | \$ 1,245,000 | \$ 114,550 | \$ 2,660,400 | \$ 2,606,607 | \$ 53,793 | 2.1% |

2015 Adopted Revenue Schedule

South Amboy Housing Authority

| | <i>Adopted Budget</i> | | | | Total All Operations |
|---|------------------------------|-------------|---------------------|-------------------|-------------------------|
| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | |
| OPERATING REVENUES | | | | | |
| <i>Rental Fees</i> | | | | | |
| Homebuyers' Monthly Payments | | | | | \$ - |
| Dwelling Rental | 702,710 | | | | 702,710 |
| Excess Utilities | 36,450 | | | | 36,450 |
| Non-Dwelling Rental | | | | | - |
| HUD Operating Subsidy | 441,327 | | | | 441,327 |
| New Construction - Acc Section 8 Voucher - Acc Housing Voucher | | | 1,180,280 | | 1,180,280 |
| Total Rental Fees | 1,180,487 | - | 1,180,280 | - | 2,360,767 |
| <i>Other Operating Revenues (List)</i> | | | | | |
| Late charges\prorations | 122,000 | | 15,000 | 104,100 | 241,100 |
| Other Revenue 2 | | | | | - |
| Other Revenue 3 | | | | | - |
| Other Revenue 4 | | | | | - |
| Total Other Revenue | 122,000 | - | 15,000 | 104,100 | 241,100 |
| Total Operating Revenues | 1,302,487 | - | 1,195,280 | 104,100 | 2,601,867 |
| NON-OPERATING REVENUES | | | | | |
| <i>Grants & Entitlements (List)</i> | | | | | |
| Grant #1 | | | | | - |
| Grant #2 | | | | | - |
| Grant #3 | | | | | - |
| Grant #4 | | | | | - |
| Total Grants & Entitlements | - | - | - | - | - |
| <i>Local Subsidies & Donations (List)</i> | | | | | |
| Local Subsidy #1 | | | | | - |
| Local Subsidy #2 | | | | | - |
| Local Subsidy #3 | | | | | - |
| Local Subsidy #4 | | | | | - |
| Total Local Subsidies & Donations | - | - | - | - | - |
| <i>Interest on Investments & Deposits</i> | | | | | |
| Investments | 4,740 | | | | 4,740 |
| Security Deposits | | | | | - |
| Penalties | | | | | - |
| Other Investments | | | | | - |
| Total Interest | 4,740 | - | - | - | 4,740 |
| <i>Other Non-Operating Revenues (List)</i> | | | | | |
| a | | | | | - |
| Other Non-Operating #2 | | | | | - |
| Other Non-Operating #3 | | | | | - |
| Other Non-Operating #4 | | | | | - |
| Other Non-Operating Revenues | - | - | - | - | - |
| Total Non-Operating Revenues | 4,740 | - | - | - | 4,740 |
| TOTAL ANTICIPATED REVENUES | \$ 1,307,227 | \$ - | \$ 1,195,280 | \$ 104,100 | \$ 2,606,607 |

2016 Appropriations Schedule

South Amboy Housing Authority
For the Period July 1, 2016 to June 30, 2017

| | Proposed Budget | | | | 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 | | | | | | | | |
| <i>Administration</i> | | | | | | | | |
| Salary & Wages | \$ 87,680 | | \$ 46,840 | \$ 62,650 | \$ 197,170 | \$ 211,260 | \$ (14,090) | -6.7% |
| Fringe Benefits | 61,100 | | 30,000 | 6,270 | 97,370 | 109,210 | (11,840) | -10.8% |
| Legal | 10,500 | | 7,000 | | 17,500 | 17,500 | - | 0.0% |
| Staff Training | 1,320 | | 880 | | 2,200 | 2,200 | - | 0.0% |
| Travel | 9,000 | | 6,000 | | 15,000 | 15,000 | - | 0.0% |
| Accounting Fees | 16,500 | | 11,000 | | 27,500 | 27,500 | - | 0.0% |
| Auditing Fees | 5,500 | | 5,500 | | 11,000 | 11,000 | - | 0.0% |
| Miscellaneous Administration* | 64,400 | | 41,600 | | 106,000 | 106,000 | - | 0.0% |
| Total Administration | 256,000 | - | 148,820 | 68,920 | 473,740 | 499,670 | (25,930) | -5.2% |
| <i>Cost of Providing Services</i> | | | | | | | | |
| Salary & Wages - Tenant Services | | | | | - | - | - | #DIV/0! |
| Salary & Wages - Maintenance & Operation | 213,700 | | | 39,490 | 253,130 | 184,260 | 68,870 | 37.4% |
| Salary & Wages - Protective Services | | | | | - | - | - | #DIV/0! |
| Salary & Wages - Utility Labor | 77,590 | | | | 77,590 | 74,640 | 2,950 | 4.0% |
| Fringe Benefits | 157,100 | | | 3,950 | 161,050 | 162,120 | (1,070) | -0.7% |
| Tenant Services | 3,800 | | | | 3,800 | 3,800 | - | 0.0% |
| Utilities | 309,870 | | | | 309,870 | 340,600 | (30,730) | -9.0% |
| Maintenance & Operation | 175,000 | | | | 175,000 | 170,000 | 5,000 | 2.9% |
| Protective Services | | | | | - | - | - | #DIV/0! |
| Insurance | 56,250 | | 1,500 | 2,250 | 60,000 | 60,000 | - | 0.0% |
| Payment in Lieu of Taxes (PILOT) | 37,510 | | | | 37,510 | 32,390 | 5,120 | 15.8% |
| Terminal Leave Payments | | | | | - | - | - | #DIV/0! |
| Collection Losses | 5,000 | | | | 5,000 | 5,000 | - | 0.0% |
| Other General Expense | | | | | - | - | - | #DIV/0! |
| Rents | | | 1,120,200 | | 1,120,200 | 1,078,780 | 41,420 | 3.8% |
| Extraordinary Maintenance | 15,000 | | | | 15,000 | 15,000 | - | 0.0% |
| Replacement of Non-Expendible Equipment | | | | | - | - | - | #DIV/0! |
| Property Betterment/Additions | | | | | - | - | - | #DIV/0! |
| Miscellaneous COPS* | | | | | - | - | - | #DIV/0! |
| Total Cost of Providing Services | 1,050,820 | - | 1,121,700 | 45,630 | 2,218,150 | 2,126,590 | 91,560 | 4.3% |
| Net Principal Payments on Debt Service in Lieu of Depreciation | | | | | - | - | - | #DIV/0! |
| Total Operating Appropriations | 1,306,820 | - | 1,270,520 | 114,550 | 2,691,890 | 2,626,260 | 65,630 | 2.5% |
| NON-OPERATING APPROPRIATIONS | | | | | | | | |
| Net Interest Payments on Debt | | | | | - | - | - | #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! |
| TOTAL APPROPRIATIONS | 1,306,820 | - | 1,270,520 | 114,550 | 2,691,890 | 2,626,260 | 65,630 | 2.5% |
| ACCUMULATED DEFICIT | | | | | | | | |
| TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT | 1,306,820 | - | 1,270,520 | 114,550 | 2,691,890 | 2,626,260 | 65,630 | 2.5% |
| UNRESTRICTED NET POSITION UTILIZED | | | | | | | | |
| Municipality/County Appropriation | | | | | - | - | - | #DIV/0! |
| Other | 5,970 | | 25,520 | | 31,490 | 19,653 | 11,837 | 60.2% |
| Total Unrestricted Net Position Utilized | 5,970 | | 25,520 | | 31,490 | 19,653 | 11,837 | 60.2% |
| TOTAL NET APPROPRIATIONS | \$ 1,300,850 | \$ - | \$ 1,245,000 | \$ 114,550 | \$ 2,660,400 | \$ 2,606,607 | \$ 53,793 | 2.1% |

* 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 \$ 65,341.00 \$ - \$ 63,526.00 \$ 5,727.50 \$ 134,594.50

2015 Adopted Appropriations Schedule

South Amboy Housing Authority

| | <i>Adopted Budget</i> | | | | Total All Operations |
|--|------------------------------|-----------|--------------------|----------------|-------------------------|
| | Public Housing Management | Section 8 | Housing Voucher | Other Programs | |
| OPERATING APPROPRIATIONS | | | | | |
| <i>Administration</i> | | | | | |
| Salary & Wages | \$ 86,130 | | \$ 44,550 | \$ 80,580 | \$ 211,260 |
| Fringe Benefits | 64,940 | | 30,000 | 14,270 | 109,210 |
| Legal | 10,500 | | 7,000 | | 17,500 |
| Staff Training | 1,320 | | 880 | | 2,200 |
| Travel | 9,000 | | 6,000 | | 15,000 |
| Accounting Fees | 16,500 | | 11,000 | | 27,500 |
| Auditing Fees | 5,500 | | 5,500 | | 11,000 |
| Miscellaneous Administration* | 64,400 | | 41,600 | | 106,000 |
| Total Administration | 258,290 | - | 146,530 | 94,850 | 499,670 |
| <i>Cost of Providing Services</i> | | | | | |
| Salary & Wages - Tenant Services | | | | | - |
| Salary & Wages - Maintenance & Operation | 184,260 | | | | 184,260 |
| Salary & Wages - Protective Services | | | | | - |
| Salary & Wages - Utility Labor | 74,640 | | | | 74,640 |
| Fringe Benefits | 155,120 | | | 7,000 | 162,120 |
| Tenant Services | 3,800 | | | | 3,800 |
| Utilities | 340,600 | | | | 340,600 |
| Maintenance & Operation | 170,000 | | | | 170,000 |
| Protective Services | | | | | - |
| Insurance | 56,250 | | 1,500 | 2,250 | 60,000 |
| Payment in Lieu of Taxes (PILOT) | 32,390 | | | | 32,390 |
| Terminal Leave Payments | | | | | - |
| Collection Losses | 5,000 | | | | 5,000 |
| Other General Expense | | | | | - |
| Rents | | | 1,078,780 | | 1,078,780 |
| Extraordinary Maintenance | 15,000 | | | | 15,000 |
| Replacement of Non-Expendible Equipment | | | | | - |
| Property Betterment/Additions | | | | | - |
| Miscellaneous COPS* | | | | | - |
| Total Cost of Providing Services | 1,037,060 | - | 1,080,280 | 9,250 | 2,126,590 |
| Net Principal Payments on Debt Service in Lieu of Depreciation | | | | | - |
| Total Operating Appropriations | 1,295,350 | - | 1,226,810 | 104,100 | 2,626,260 |
| NON-OPERATING APPROPRIATIONS | | | | | |
| Net Interest Payments on Debt | | | | | - |
| Operations & Maintenance Reserve | | | | | - |
| Renewal & Replacement Reserve | | | | | - |
| Municipality/County Appropriation | | | | | - |
| Other Reserves | | | | | - |
| Total Non-Operating Appropriations | - | - | - | - | - |
| TOTAL APPROPRIATIONS | 1,295,350 | - | 1,226,810 | 104,100 | 2,626,260 |
| ACCUMULATED DEFICIT | | | | | |
| TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT | 1,295,350 | - | 1,226,810 | 104,100 | 2,626,260 |
| UNRESTRICTED NET POSITION UTILIZED | | | | | |
| Municipality/County Appropriation | - | - | - | - | - |
| Other | (11,877) | | 31,530 | | 19,653 |
| Total Unrestricted Net Position Utilized | (11,877) | - | 31,530 | - | 19,653 |
| TOTAL NET APPROPRIATIONS | \$ 1,307,227 | \$ - | \$ 1,195,280 | \$ 104,100 | \$ 2,606,607 |

* 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 \$ 64,767.50 \$ - \$ 61,340.50 \$ 5,205.00 \$ 131,313.00

5 Year Debt Service Schedule - Principal

South Amboy Housing Authority

| | Current Year (2015) | <i>Fiscal Year Beginning in</i> | | | | | Thereafter | Total Principal Outstanding #VALUE! |
|--------------------------|------------------------|---------------------------------|------|------|------|------|------------|---|
| | | 2016 | 2017 | 2018 | 2019 | 2020 | | |
| Debt Issuance #1 | | | | | | | | |
| Debt Issuance #2 | | | | | | | | |
| Debt Issuance #3 | | | | | | | | |
| Debt Issuance #4 | | | | | | | | |
| TOTAL PRINCIPAL | | | | | | | | |
| LESS: HUD SUBSIDY | | | | | | | | |
| NET PRINCIPAL | | | | | | | | |

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

| | |
|---------|------------------|
| Moody's | Standard & Poors |
| Fitch | |
| | |
| | |

Bond Rating
Year of Last Rating

5 Year Debt Service Schedule - Interest

South Amboy Housing Authority

| Current Year (2015) | <i>Fiscal Year Beginning in</i> | | | | | Total Interest Payments Outstanding #VALUE! | | |
|--------------------------|---------------------------------|------|------|------|------|--|------|------------|
| | 2016 | 2017 | 2018 | 2019 | 2020 | | 2021 | Thereafter |
| None | none | | | | | | | |
| - | - | - | - | - | - | - | - | - |
| \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| TOTAL INTEREST | | | | | | | | |
| LESS: HUD SUBSIDY | | | | | | | | |
| NET INTEREST | | | | | | | | |

Debt Issuance #1
Debt Issuance #2
Debt Issuance #3
Debt Issuance #4

2016 Net Position Reconciliation

South Amboy Housing Authority

For the Period July 1, 2016

to June 30, 2017

| | <u>Proposed Budget</u> |
|--|------------------------|
| TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1) | |
| Less: Invested in Capital Assets, Net of Related Debt (1) | 2,391,729 |
| Less: Restricted for Debt Service Reserve (1) | 2,159,168 |
| Less: Other Restricted Net Position (1) | - |
| Total Unrestricted Net Position (1) | 3,117 |
| Less: Designated for Non-Operating Improvements & Repairs | 229,444 |
| 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) | 265,552 |
| Plus: Estimated Income (Loss) on Current Year Operations (2) | 19,653 |
| Plus: Other Adjustments (attach schedule) | - |
| UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET | 514,649 |
| Unrestricted Net Position Utilized to Balance Proposed Budget | 31,490 |
| Unrestricted Net Position Utilized in Proposed Capital Budget | - |
| Appropriation to Municipality/County (3) | - |
| Total Unrestricted Net Position Utilized in Proposed Budget | 31,490 |
| PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR (4) | \$ 483,159 |

(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 \$ 65,341

(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.

2016
South Amboy
Housing Authority
(Name)

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2016 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM


South Amboy Housing Authority
(Name)

FISCAL YEAR: FROM:7/1/2016 TO:6/30/2017

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 South Amboy Housing Authority, on the 13 day of June, 2016.

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: | Eric Chubenko | | |
| Title: | Interim Executive Director | | |
| Address: | 250 South Broadway, South Amboy, NJ 08879 | | |
| Phone Number: | 732-721-1831 | Fax Number: | 732-721-0377 |
| E-mail address | chaeric@aol.com | | |

2016 CAPITAL BUDGET/PROGRAM MESSAGE

South Amboy Housing Authority

(Name)

FISCAL
YEAR:

FROM:7/1/2016

TO:6/30/2017

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.

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?

No.

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

No.

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.

No.

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.

No impact, charges are based on HUD formula.

6. Have the projects been reviewed and approved by HUD?

Yes.

Add additional sheets if necessary.

2016 Proposed Capital Budget

South Amboy Housing Authority
 For the Period July 1, 2016 to June 30, 2017

| | Estimated Total Cost | Funding Sources | | | | |
|--------------------------------------|----------------------|------------------------------------|-------------------------------|--------------------|-------------------|---------------|
| | | Unrestricted Net Position Utilized | Renewal & Replacement Reserve | Debt Authorization | Capital Grants | Other Sources |
| Operations | \$ 10,000 | | | | \$ 10,000 | |
| Management Improvements | 5,000 | | | | 5,000 | |
| A/E Fees | 10,000 | | | | 10,000 | |
| Site Improvements | 5,000 | | | | 5,000 | |
| Dwelling Structures | 60,000 | | | | 60,000 | |
| Nondwelling Structures | 10,000 | | | | 10,000 | |
| Nondwelling Equipment | 25,000 | | | | 25,000 | |
| TOTAL PROPOSED CAPITAL BUDGET | \$ 125,000 | \$ - | \$ - | \$ - | \$ 125,000 | \$ - |

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

5 Year Capital Improvement Plan

South Amboy Housing Authority

July 1, 2016

to June 30, 2017

For the Period

Fiscal Year Beginning in

| | Estimated Total Cost | Current Year Proposed Budget | 2017 | 2018 | 2019 | 2020 | 2021 |
|-------------------------|-------------------------|---------------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| Operations | \$ 60,000 | 10,000 | \$ 10,000 | \$ 10,000 | \$ 10,000 | \$ 10,000 | \$ 10,000 |
| Management Improvements | 30,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 |
| A/E Fees | 60,000 | 10,000 | 10,000 | 10,000 | 10,000 | 10,000 | 10,000 |
| Site Improvements | 30,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 | 5,000 |
| Dwelling Structures | 360,000 | 60,000 | 60,000 | 60,000 | 60,000 | 60,000 | 60,000 |
| Nondwelling Structures | 60,000 | 10,000 | 10,000 | 10,000 | 10,000 | 10,000 | 10,000 |
| Nondwelling Equipment | 150,000 | 25,000 | 25,000 | 25,000 | 25,000 | 25,000 | 25,000 |
| TOTAL | \$ 750,000 | 125,000 | \$ 125,000 | \$ 125,000 | \$ 125,000 | \$ 125,000 | \$ 125,000 |

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

South Amboy Housing Authority

For the Period July 1, 2016 to June 30, 2017

| | Estimated Total Cost | Funding Sources | | | | |
|----------------------------|----------------------|------------------------------------|-------------------------------|--------------------|-------------------|---------------|
| | | Unrestricted Net Position Utilized | Renewal & Replacement Reserve | Debt Authorization | Capital Grants | Other Sources |
| Operations | \$ 60,000 | | | | \$ 60,000 | |
| Management Improvements | 30,000 | | | | 30,000 | |
| A\E Fees | 60,000 | | | | 60,000 | |
| Site Improvements | 30,000 | | | | 30,000 | |
| Dwelling Structures | 360,000 | | | | 360,000 | |
| Nondwelling Structures | 60,000 | | | | 60,000 | |
| Nondwelling Equipment | 150,000 | | | | 150,000 | |
| TOTAL | \$ 750,000 | \$ - | \$ - | \$ - | \$ 750,000 | \$ - |
| Total 5 Year Plan per CB-4 | \$ 750,000 | | | | | |
| 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.

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

For the Period July 1, 2016 to June 30, 2017 South Ambury Housing Authority

| Name | Title | Average Hours per Week Dedicated to Position | Position | | | Reportable Compensation from Authority (W-2/ 1099) | | | Estimated amount of other compensation from Authority (health benefits, pension, etc.) | Total Compensation from Authority | Names of Other Public Entities where Individual is an Employee or Member of the Governing Body | 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 |
|----------------|---------------------|--|--------------|---------|--------------|--|--------|----------------------|--|-----------------------------------|--|---|--|--|--|
| | | | Commissioner | Officer | Key Employee | Highest Compensated Employee | Former | Base Salary/ Stipend | | | | | | | |
| 1 S. Attardfi | Chairperson | | X | | | | | None | \$ - | None | | | | \$ - | |
| 2 P. Gullick | Commissioner | | X | | | | | None | | None | | | | | |
| 3 E. O'Connor | Commissioner | | X | | | | | None | | None | | | | | |
| 4 S. Sagliocco | Commissioner | | X | | | | | None | | None | | | | | |
| G. Hoffmann | Commissioner | | X | | | | | None | | None | | | | | |
| 5 Spencer | Commissioner | | X | | | | | None | | None | | | | | |
| 6 L. Ust | Commissioner | | X | | | | | None | | None | | | | | |
| 7 J. Connors | Commissioner | | X | | | | | None | | None | | | | | |
| 8 E. Chubenko | Interim, Exec. Dir. | | | X | | | | | | None | | | | | |
| 9 L. Stratton | Dir. Of Operations | | | X | | | | 36,191 | 145,861 | None | | | | 145,861 | |
| 10 | | | | | | | | | | | | | | | |
| 11 | | | | | | | | | | | | | | | |
| 12 | | | | | | | | | | | | | | | |
| 13 | | | | | | | | | | | | | | | |
| 14 | | | | | | | | | | | | | | | |
| 15 | | | | | | | | | | | | | | | |
| Total: | | | | | | | | \$ 109,670 | \$ - | \$ - | \$ 36,191 | \$ 145,861 | \$ - | \$ 145,861 | |

Enter the total number of employees/ independent contractors who received more than \$100,000 in total reportable compensation for the most recent fiscal year completed:

1