2016/2017

BRICK

(name)

Housing Authority Budget

www.brickhousingauthority.org

(Authority Web Address)

Department Of





Division of Local Government Services

2016/2017 HOUSING AUTHORITY BUDGET

Certification Section

2016/2017

 BRICK	
(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: Conditional	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 Curent CPA RMA Date: July 1, 2016

STATE OF NEW JERSEY DEPARTMENT OF COMMUNITY AFFAIRS DIVISION OF LOCAL GOVERNMENT SERVICES BUREAU OF AUTHORITY REGULATION TRENTON, N.J.

CONDITIONAL CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved budget of the Housing Authority of the Township of Brick, County of Ocean for the fiscal year ending June 30, 2017 made a part hereof complies with the requirements of law and regulation except for the conditions noted below, and approval is given pursuant to N.J.S.A. 40A:5A-11 subject to the correction of such conditions.

June 20, 2016

Date

Paul D. Ewert, CPA, RMA

Supervising Municipal Finance Auditor Division of Local Government Services

CONDITIONS

Pursuant to N.J.S.A. 40A:5A-10 and 11 of the Local Authorities Fiscal Control Law and N.J.A.C. 5:31-2.1 et seq., each Authority in the State of New Jersey is required to submit a budget for each fiscal year to the Director of the Division of Local Government Services for review and approval. In accordance with these statutory and regulatory requirements, the Housing Authority of the Township of Brick, Ocean County submitted its introduced budget for the fiscal year ending June 30, 2017 to the Director for review and approval. During the review of the FY 2016 -2017 budget for the Authority, it was concluded that the resolution introducing the budget did not include the correct amounts for the Total Unrestricted Net Position Utilized.

The 2016 budget is approved pending the adoption of a resolution amending the operating budget to agree to the actual operating budget total amounts. When the 2016-2017 approved as amended budget is adopted, the Authority should proceed as follows:

Upon the adoption of the Operating Budget Amending Resolution for the, Housing Authority of the Township of Brick may adopt the 2016-2017 budget and submit two copies of the amending resolution and two copies 2016-2017 Adopted Budget, including pages C-6, and C-7 (which refer to the adoption), to the Division for the Director's approval with recorded votes and manual signatures.

2016/2017 PREPARER'S CERTIFICATION

BRICK (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:	Tu tue				
Name:	THOMAS FURLONG,	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	mrhyal406@aol.com				

2016/2017 APPROVAL CERTIFICATION

ini.	BRICK	
7	(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 BRICK Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31
2.3, on the18thday ofApril,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:	allegen !	Dats-			
Name:	ALESIA WATSON	ALESIA WATSON			
Title:	EXECUTIVE DIRECTOR				
Address:	165 CHAMBERS BRIDGE ROAD				
	BRICK, NJ 08723		7.11.		
Phone Number:	732-920-9400	Fax Number:	732-920-7604		
E-mail address	awatson@brickha.org				

INTERNET WEBSITE CERTIFICATION

Authority's \	Web Address:	www.brickhousingauthority.org			
All authorities	s shall maintain eith	er an Internet website or a webpa	ge 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					
	•	disclosure. Check the boxes below	w to certify the Authority's compliance with		
N.J.S.A. 40A:	<u>:5A-17.1</u> .				
X	A description of the	Authority's mission and responsib	pilities		
X	Commencing with 2 prior years	2013, the budgets for the current fis	scal year and immediately preceding two		
x	The most recent Coninformation	mprehensive Annual Financial Rep	port (Unaudited) or similar financial		
X	Commencing with 2 two prior years	2012, the complete annual audits o	f the most recent fiscal year and immediately		
X	•		statements deemed relevant by the governing vithin the authority's service area or		
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		, 2013, the approved minutes of e	each meeting of the Authority including all east three consecutive fiscal years		
X		•	nd phone number of every person who some or all of the operations of the		
X	corporation or other		remuneration of \$17,500 or more during the ered to the Authority.		
webpage as ic	dentified above com		ne Authority that the Authority's website or ry requirements of N.J.S.A. 40A:5A-17.1 as ce.		
Name of Offic	er Certifying compli	ance	Alesia Watson		
Title of Office	er Certifying complia	nce	Executive Director Aligna Wats		
Signature			alleden Water		

RESULUTION NO: 2016-13

AMENDED

2016/2017 HOUSING AUTHORITY BUDGET RESOLUTION BRICK

(Name)

F	ISCAL YEAR:	FROM:	7/1/2016	TO:	6/30/2017	
WHEREAS, the Annual 7/1/2016 and ending, at its open public meeting	6/30/2017 has be	en presented bet	<u>BRICK</u> If fore the govern	Housing Authority ing body of the	for the fiscal year to BRICK Housing	eginning, Authority
WHEREAS, the Annual any Accumulated Deficit	Budget as introduced if any, of \$ _3,347,7	reflects Total R	evenues of \$ _ Il Unrestricted	3,359,660 , Net Position utiliz	Total Appropriations, ed of 34,080	including ; and
WHEREAS, the Capital Net Position planned to b					085 and Total Ur	restricted
WHEREAS, the schedul anticipated revenues to soutlays, debt service requestracts and agreements	satisfy all obligations uirements, and to pro	to the holders of	of bonds of th	e Authority, to m	eet operating expense	es, capital
WHEREAS, the Capital funds; rather it is a doc authorization to expend resolution, by a project for other means provided	ument to be used as funds for the purpose inancing agreement, l	part of the saids described in the	d Authority's his section of	planning and man the budget, must	nagement objectives. be granted elsewhere	Specific ; by bond
NOW, THEREFORE BE meeting held on <u>4/18</u> the <u>BRICK</u> Housing 6/30/2017 is hereby a	2016 that the Ann Authority for the fisc	ual Budget, incl	luding all relat	ed schedules, and	ng Authority, at an op the Capital Budget/P	en public rogram of
BE IT FURTHER RESC meet all proposed expend outstanding debt obligation	litures/expenses and a	ill covenants, ter	rms and provis	ions as stipulated	in the said Housing A	amount to authority's
BE IT FURTHER RESC Budget and Capital Budg Alloca R (Secretary's Signature)	et/Program for adopti	on on <u>6/27/20</u>		Housing Aut		ie Annual
Governing Body Member:	Recorded V	ote Nay	Abstain	Absent		
Stanley Schick Stephen Scaturro Kathy Russell Peter Dunne ohn Catalano Kim Terebush Richard Dyer	X X X X X X		v			

2016/2017 HOUSING AUTHORITY BUDGET RESOLUTION ___BRICK___

(Name)

FISO	CAL YEAR:	FROM:	7/1/2016	TO:	6/30/2017	
WHEREAS, the Annual Bu 7/1/2016 and ending, 6, 6, at its open public meeting of	30/2017 has be	en presented b	ne <u>BRICK</u> Interpretation of the government	Housing Authorining body of the	ty for the fiscal year BRICK Housi	ar beginning, ing Authority
WHEREAS, the Annual Buany Accumulated Deficit if a	dget as introduced any, of \$ _3,347,7	reflects Total	Revenues of \$_otal Unrestricted	3,359,660 Net Position util	Total Appropriation ized of0	ons, including ; and
WHEREAS, the Capital Bud Net Position planned to be u					5,085 and Total	Unrestricted
WHEREAS, the schedule o anticipated revenues to satis outlays, debt service require contracts and agreements; ar	sfy all obligations ements, and to pro	to the holder	s of bonds of th	e Authority, to	neet operating exp	enses, capital
WHEREAS, the Capital Bu funds; rather it is a docum authorization to expend fun resolution, by a project fina or other means provided by	ent to be used as ds for the purpose ncing agreement,	part of the ses described in	said Authority's n this section of	planning and m the budget, mus	anagement objectiv t be granted elsewh	es. Specific nere; by bond
NOW, THEREFORE BE IT meeting held on4/18/20 theBRICK Housing At6/30/2017 is hereby approximately approximate	that the Anruthority for the fisc	nual Budget, i	ncluding all rela	ted schedules, an	sing Authority, at and the Capital Budge	n open public et/Program of
BE IT FURTHER RESOLV meet all proposed expenditu outstanding debt obligations	res/expenses and a	all covenants,	terms and provi	sions as stipulate	d in the said Housir	ent amount to ng Authority's
BE IT FURTHER RESOLV Budget and Capital Budget/	Program for adopt	ion on <u>6/27</u>		Housing Au	thority will conside	er the Annual
(Secretary's Signature)	Wats	in_		(Date)	0/102	
Governing Body Member:	Recorded V	Vote Nay	Abstain	Absent		
Stanley Schick	X					
Stephen Scaturro	X :					
Kathy Russell	X					
Peter Dunne	X					
John Catalano	X.					
Kim Terebush				X		
Richard Dyer	X					

2016/2017 ADOPTION CERTIFICATION

	BRICK	
-	(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 \underline{BRICK} Housing Authority, pursuant to $\underline{N.J.A.C.}$ 5:31-2.3, on the $\underline{27th}$ day of, \underline{June} , $\underline{2016}$.

Officer's Signature:	alexia R. V	Vaton				
Name:	ALESIA WATSON					
Title:	EXECUTIVE DIRECT	EXECUTIVE DIRECTOR				
Address:	165 CHAMBERS BRIDGE ROAD					
	BRICK, NJ 08723					
Phone Number:	732-920-9400	Fax Number:	732-920-7604			
E-mail address	awatson@brickha.org					

RESOLUTION NO: 2016-24

2016/2017 ADOPTED BUDGET RESOLUTION

BRICK (Name) HOUSING AUTHORITY

]	FISCAL YEAR:	FROM:	7/1/201	6 TO :	6/30/2017
WHEREAS, the Annua beginning 7/1/2016 Housing Authority at its	ending, <u>6/30/2017</u>	has been pre	sented for adop	RICK Housing H	ng Authority for the fiscal year overning body of the <u>BRICK</u>
WHEREAS, the Annuappropriation in the sau thereto, if any, which has	me amount and title as	set forth in	the introduced	and approved bud	ts each item of revenue and dget, including all amendments nt Services; and
WHEREAS, the Annu Appropriations, includi utilized of \$34,08	ng any Accumulated D	ed for adopti Deficit, if any,	ion reflects To of \$3,347.	tal Revenues of 700 and	\$ 3,359,660 , Total Total Unrestricted Net Position
WHEREAS, the Capita Total Unrestricted Net 1					ns of \$225,085 and
meeting held on	6/27/2016 that the year beginning, 7/1	Annual Bud	get and Capital	Budget/Program	ng Authority, at an open public of the <u>BRICK</u> Housing eby adopted and shall constitute
item of revenue and ap	propriation in the same	amount and	title as set forth	in the introduced	esented for adoption reflects each and approved budget, including Local Government Services.
Allen A. (Secretary's Signature)	Watson			(Date)	lile
Governing Body Member:	Recorded V Aye	ote Nay	Abstain	Absent	
Stanley Schick Stephen Scaturro Kathy Russell Peter Dunne John Catalano Kim Terebush	x x x x x				
Richard Dyer	x				

2016/2017 HOUSING AUTHORITY BUDGET

Narrative and Information Section

2016/2017 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

BRICK

(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. 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% from the current year adopted budget.

Rents are fixed by law so this budget will have no impact on charges to residents.

- 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. Due to reductions in HUD Section 8 Subsidy
- 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. N/A
- 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.

 Tenants pay 30% of their income toward rent.
- 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

BRICK HOUSING AUTHORITY VARIANCES IN EXCESS OF 10% JUNE 30TH, 2017

Revenue:

Portable Fees-(+25%) Due to increase in HUD published admin fees

Ocean City Contract-(+100%) Includes new contract for executive director services provided to Ocean City Housing Authority

Capital Fund Operations-(-38.8%) Reduced due to decrease in capital funding

Interest-(+14.2%) Due to slight increase in cash available for investment

Appropriations:

Admin Salary & Wages-(+70.6%) Due to hiring of an executive director and an increase in hours for a part- timer.

Fringe Benefits Admin-(+76.4%) Due to hiring of an executive director and providing benefits to a part-timer

Miscellaneous Administration (-34.2%) Reduction due to hiring of executive director instead of contracting with another authority

Protective service (-100%) Cost removed from budget

Insurance-(+17.6%) Increase premiums due to excess claims

Other General Expense- (+350%) Due to an increase in outgoing portable vouchers

Equipment- (-50%) Reduction in cost due to charges to Capital fund

HOUSING AUTHORITY CONTACT INFORMATION 2016/2017

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

Name of Authority: Federal ID Number:	BRICK HOUSING AUTH	HORITY				
Address:	165 CHAMBERS BRIDG	E ROAD				
City, State, Zip:	BRICK		NJ	08723		
Phone: (ext.)	732-920-9400	Fax:	732-92	0-7604		
Preparer's Name:	THOMAS FURLONG					
Preparer's Address:	470 HIGHWAY 79, SUIT	Έ 2				
City, State, Zip:	MORGANVILLE		NJ	07751		
Phone: (ext.)	732-591-2300	Fax:	732-59	1-2525		
E-mail:	mrhyal406@aol.com					
Chief Executive Officer:	ALESIA WATSON					
Phone: (ext.)	732-920-9400 Fax: 732-920-7604					
E-mail:	awatson@brickha.org					
Chief Financial Officer:	NONE					
Phone: (ext.)	Fax:					
E-mail:		•				
Name of Auditor:						
Name of Firm:	FALLON & LARSEN, LI	_P				
Address:	252 WASHINGTON STR		ΈB			
City, State, Zip:	TOMS RIVER		NJ	08753		
Phone: (ext.)	732-503-4257	Fax:	732-34	1-1424		
E-mail:	rlarsen@falloncpa.com					

HOUSING AUTHORITY INFORMATIONAL **QUESTIONNAIRE**

BRICK (Name)

FROM:

FISCAL YEAR:

7/1/2016

TO: 6/30/2017

1) Provide the number of individuals employed in calendar year 2015 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 11 2) Provide the amount of total salaries and wages for calendar year 2015 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 440,193 3) Provide the number of regular voting members of the governing body: 7 4) Provide the number of alternate voting members of the governing body: 0 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? 10 6) 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? 16 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? 16 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? 16 7) Does the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee? 16 and a family member of a current or former commissioner, officer, key employee, or highest compensated employee? 16 6. A family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer of direct or indirect owner? 16 6. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer of direct or indirect owner? 10 6. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer of direct or indirect owner? 10 6. An entity of which a current or former commissioner, officer, key emp	Ar	nswer all questions below completely and attach additional information as required.
Transmittal of Wage and Tax Statements: 11 2) Provide the annount of total salaries and wages for calendar year 2015 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 440_193 3) Provide the number of regular voting members of the governing body: 7 4) Provide the number of alternate voting members of the governing body: 0 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? 10 If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority. 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year because of their relationship with the Authority file the form as required? 16 If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? 10 If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee? 100 e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? 100 f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay pr	1)	Provide the number of individuals employed in calendar year 2015 as reported on the Authority's Form W-3,
2) Provide the amount of total salaries and wages for calendar year 2015 as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 440,193 3 Provide the number of regular voting members of the governing body: 0 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority. 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year 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. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee? f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) and an advantance and an advantance and an advantance of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) and an advantance of the commissioner, officer, key employee, or highest compe	-/	
3) Provide the number of regular voting members of the governing body:	2)	Provide the amount of total salaries and wages for calendar year 2015 as reported on the Authority's Form W-3,
 4) Provide the number of alternate voting members of the governing body: 0 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? DO If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority. 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year 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. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? DO If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee? DO E. A family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority: the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits,		
 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year?		
N-4 during the current fiscal year?no f "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority. 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year because of their relationship with the Authority file the form as required?Yes f "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees?no f "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee?no e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee?no f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner?no ff the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority: the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that beneficiary of the contract. 10) Explain the Authority's process for determining compensation for		
 6) 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 ff "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? no fighest compensated employees? no fighest compensated employees? no fighest compensated employees? no fighest compensated employees or highest compensated employee? no e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? no e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? no fit the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract 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 ff "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract. 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the co		N-4 during the current fiscal year? If "yes," attach a description of the relationship including the
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. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees?		
individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file. 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees?no	0)	of their relationship with the Authority file the form as required? VCS If "no" provide a list of those
7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees?no		individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their
or highest compensated employees?no If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority. 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee?no e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner?no f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner?no If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferorno If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract. 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process for determining 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. See Attached 11) Did the Authority pay	7\	
 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee?no e. A family member of a current or former commissioner, officer, key employee, or highest compensated employee?no f. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner?no If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process. 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferorno If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract. 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. Attach narrativeSee Attached 11) Did the Authority pay for meals or catering during the current fiscal year?no If "yes," at	1)	Does the Authority have any amounts receivable from current of former commissioners, officers, key comproyees
 8) Was the Authority a party to a business transaction with one of the following parties: d. A current or former commissioner, officer, key employee, or highest compensated employee?no		or nignest compensated employees? no if yes, allach a list of those maintaids, their position, the
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list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.	11	
expenditure listed.	11,	
12) Did the Authority pay for traver expenses for any employee or murvidual fished on 1 age 11-4: yes 17	12	
"yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for	14,	

each expenditure listed.

NAME	TITLE	PURPOSE	DATE A	AMOUNT	CHECK#
Dyer, Richard Dyer, Richard	Commissioner Commissioner	Rutgers Training OCHA Training	7/24/2015 \$ 12/17/2015 \$	49.56 79.92	25205 25421
TEREBUSH, KIM	Commissioner	NJAHRA Conference	10/23/2015 \$	88.69	25329
Dunne, Peter	Commissioner	OCHA Training	3/18/2016 \$	166.02	25538
Li, Yixin	Bookeeper	NJAHRA Conference	10/23/2015 \$	115.49	25348
Li, Yixin	Bookeeper	Training Advance accounting	11/19/2015 \$	792.59	25395
Li, Yixin	Bookeeper	Meals & auto expenses at FL	12/17/2015 \$	314.31	25431
Nicholson, Nancy	Service Coordinator	NJAHRA Training	10/23/2015 \$	78.40	25333
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	7/23/2015 \$	95.45	27901
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	8/26/2015 \$	107.52	27973
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	9/16/2015 \$	45.43	28046
Rosenthal, Michelle	Section 8 Corodinator	S8 inspection/NJAHRA Conference	10/22/2015 \$	187.01	28113
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	11/23/2015 \$	83.38	28181
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	12/17/2015 \$	62.68	28252
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	1/25/2016 \$	88.02	28324
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	2/29/2016 \$	40.50	28401
Rosenthal, Michelle	Section 8 Corodinator	Section 8 inspection	3/18/2016 \$	30.24	28476
Resort Casino Atlantic City Resort Casino Atlantic City	PHA S8	2 nights 2 nights	8/26/2015 \$ 8/26/2015 \$	510.00	25260 27975

Page N-3 (1 of 2)

PHA employees are all unionized so salaries are determined based on the negotiations between the PHA and the Union.

HOUSING AUTHORITY INFORMATIONAL **QUESTIONNAIRE (CONTINUED)** BRICK (Name)

		FISCAL YEAR:	FROM:	//1/2016	10:	0/30/2017	
13)		ority provide any of the follo	owing to or for a p	erson listed on Pa	ge N-4 or an	y other employee o	of
	the Authority:						
		ss or charter travelno					
		or companions no					
		mnification and gross-up pa					
		onary spending account					
	e. Housing	allowance or residence for p	personal use <u>no</u>				
		s for business use of persona		-			
	g. Vehicle/a	auto allowance or vehicle fo	r personal use <u>no</u>				
		r social club dues or initiatio					
	i. Personal	services (i.e.: maid, chauffe	eur, chef)no				
	If the answer	r to any of the above is "y	ves," attach a des	cription of the tr	ansaction in	cluding the name	and
		e individual and the amount					
14)		ority follow a written policy					
		nd/or commissioners during t					
		of expenses through receip					ı
		of the Authority's process for					
		ority make any payments to				or severance or	
		no If "yes," attac					
16)	Did the Autho	ority make any payments to	current or former of	commissioners or	employees the	nat were contingen	t
	upon the perfo	ormance of the Authority or	that were consider	ed discretionary b	onuses?n	If "yes, "	
		ation including amount paid					
		ority comply with its Continu					
		audited annual financial stat					
		curities Rulemaking Board's					
	N/A If	"no," attach a description o	of the Authority's p	lan to ensure con	npliance with	its Continuing	
		reements in the future.					
		ority receive any notices fror					
	entity regardin	ng maintenance or repairs re	quired to the Auth	ority's facilities to	o bring them	into compliance w	ith
		tions and standards that it ha					
		s to why the Authority has n		he required main	tenance or re	epairs and describe	?
		s plan to address the conditi					
19)	Did the Autho	ority receive any notices of f	ines or assessment	s from the Depar	tment of Hou	sing and Urban	
	Development of	or any other entity due to no	oncompliance with	current regulatio	ns? <u>no</u>	If "yes," attacl	ı a
(description of t	the event or condition that r	esulted in the fine	or assessment an	d indicate the	e amount of the fine	г
	or assessment.						
		ority been deemed "troubled					
		ch an explanation of the reas	son the Authority v	vas deemed "trou	bled" and de	escribe the Authori	ty's
	plan to addres	ss the conditions identified.					

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

BRICK

(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 <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, 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.

Reportable Compensation from

June 30, 2017

8

July 1, 2016

For the Period

Particular Par															
Average Hours Comparison					l·lighe		Other (auto allowance,	Estimated amount of other				Average Hours per Week		Estimated amount of other compensation	
Per Week 2	Avera				st Cor		expense account.	compensation from the		Names of Other Public Entities where Individual		Dedicated to	Reportable	from Other Public	į
Position	Per 1		C	Emp	nper	Base	payment in	Authority				Other Public	from Other	benefits, pension,	Compensation
5 x X None \$ None \$ 5 x X None None 35,835 5,000 60,000 5 x None None Pirkt Planning Board Member 2 783 * 5 x None None None None * 130,000 33,000 135,000 40 55,087 31,532 90 cbr 55 X X X X 130,000 33,000 135,000 130,000 135,000 130,000 130,000 130,000 135,000 130,000 135,000			fficer	loyee	ormei	Salary/ Stipend	lieu of health benefits, etc.)	(httelfth benefits pension, etc.)			Other Public Entities Ested in Column O	Entities Listed in Column 0	Public Entities (W-2/1099)	payment in lieu of	All Public Entities
5 x X None Board of Ed. Office 3.5 pas 5,000 60,000 5 x None None Britz Pfanning Board Board Member 2 783 * 5 x None None None NiMFA Contract Coord 40 55,007 31,532 90 cbr 5 x X X X X X 33,000 135,000 33,000 135,000 33,000 135,000 33,000 135,000 33,000 33,000 135,000 135,000 33,000 135,000 1	irson	45			-	Vone			s	None					1
5 X None Pink Planning Board Board Mamber 2 75,835 5,000 50 5 X None None NiMfA Contract Coord. 40 59,087 31,532 90 cbr X	na)r.	in			<	Vone				None					
S X None Brick Planning Board Member 2 783	Sloner	ın			_	Vorte					Office	23	55,835	5,000	50,835
None	=														
5 X None Brick Planning Board Board Member 2 783 5 X None None NIMFA Contract Coord. 40 59,087 31,532 90 35 X X X X X 30,000 139,000 139,000 139,000 130	sioner	173	200		_	Vone				None					1
5 X None None None None 135,000 135,00	sioner	55			_	Yone				Brick Planning Board	Board Member	74	783		783
55 X X 100,060 30,000 133,000	sioner	9			_	Yone				- None		!			19
30,000 132,000 30,000 132,000 133,000	Ssioner	in			_	Vone					Contract Coord.	40	59,087	31,532	90,619
	A Diractor	55		<u>~</u>		100,000		30,000		0					130,000
										54					
										104					2 6
										77.6					
7															
										7					-

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:

Schedule of Health Benefits - Detailed Cost Analysis

June 30, 2017

\$

Bricktown Housing Authority
For the Period July 1, 2016

		Annual Cost						
	# of Covered	Estimate per	Total Cost	# of Covered				
	Members (Medical	Employee	Estimate	Members	Annual Cost			
	& Rx) Proposed	Proposed	Proposed	(Medical & Rx)	per Employee	Total Current	\$ Increase	% Increase
	Budget	Budget	Budget	Current Year	Current Year	Year Cost	(Decrease)	(Decrease)
Active Employees - Health Benefits - Annual Cost								
Single Coverage	1	\$ 9,510	\$ 9,510	1	\$ 9,060	\$ 9.060	\$ 450	2.0%
Parent & Child	2	17,028	***	2		(11)	+	5.0%
Employee & Spouse (or Partner)	2	19,025	38,050	2	18,119	36,238	1,812	5.0%
Family	3	26,540	79,620	9	25,277	75,831	3,789	5.0%
Employee Cost Sharing Contribution (enter as negative -)			(42,971)		A SASTANINE	(40,925)	(2,046)	2.0%
Subtotal	80	ALSKIT ALSKIE	118,265	8		112,638	5,627	2.0%
Commissioners - Health Benefits - Annual Cost								
Single Coverage			Ť			4	100	#DIV/0!
Parent & Child			Ē				/#	#DIV/0!
Employee & Spouse (or Partner)			•			*	90	#DIV/0!
Family			ř.			*5	965	#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)		TOTAL STREET					t	#DIV/0i
Subtotal	0	Control of the Control	307	0		i.	•	#DIV/0i
Retirees - Health Benefits - Annual Cost								
Single Coverage	3	8,404	25,212	8	8,004	24,012	1,200	2.0%
Parent & Child			0			(A)	(101)	#DIV/0i
Employee & Spouse (or Partner)	2	22,560	45,120	2	21,486	42,972	2,148	2.0%
Family			386			(8)	1062	#DIV/0i
Employee Cost Sharing Contribution (enter as negative -)							165	#DIV/0!
Subtotal	5		70,332	5		66,984	3,348	2.0%
GRAND TOTAL	13		\$ 188,597	13		\$ 179,622	\$ 8,975	2.0%
Is medical coverage provided by the SHBP (Yes or No)? Is prescription drug coverage provided by the SHBP (Yes or No)?))غ		Yes					

Schedule of Accumulated Liability for Compensated Absences

Bricktown Housing Authority

For the Period

July 1, 2016

t 2

June 30, 2017

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 rapor Approved Dollar Value of Compensated Absence Accrued Liability **Gross Days of Accumulated Compensated Absences at** beginning of Current Year Individuals Eligible for Benefit See Attached

Total liability for accumulated compensated absences at beginning of current year \$

BRICKTOWN HOUSING AUTHORITY ACCRUED COMP. ABSENCES JUNE 30,2015

TOTAL	
VACATION	
SICK	
EMPLOYEE	

Asch	15,514.00	4,540.00	20,054
Rosenthal	200.00	299.00	799
ij	4,458.00	3,632.00	8,090
Esposito	00.00	2,764.00	2,764
Hart	304.00	543.00	847
Nilan	3,294.00	4,927.00	8,221
Meagher	972.00	1,843.00	2,815
Nicholson	3,987.00	2,563.00	6,550
	29,029.00	21,111.00	50,140

Schedule of Shared Service Agreements

Bricktown Housing Authority to

July 1, 2016

For the Period

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

June 30, 2017

						Amount to be
			Comments (Enter more specifics if	Agreement Effective	Agreement	Received by/
Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	needed)	Date	End Date	Authority
Brick Housing Authority	Ocean City Housing Authority	Executive Director		3/1/2016	3/1/2016 2/29/2018	61,600

2016/2017 HOUSING AUTHORITY BUDGET

Financial Schedules Section

2016 Budget Summary

June 30, 2017

Bricktown Housing Authority July 1, 2016 to

For the Period

		Propo	Proposed Budget			Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing Management	Ho Section 8 Vo	Housing Voucher Oth	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations All Operations
REVENUES								
Total Operating Revenues	\$ 1,837,380 \$	¥	\$ 1,502,550 \$	9	\$ 3,339,930	\$ 3,266,200	\$ 73,730	2.3%
Total Non-Operating Revenues	19,560	¥2	170	×	19,730	31,200	(11,470)	-36.8%
Total Anticipated Revenues	1,856,940	1,	1,502,720	*	3,359,660	3,297,400	62,260	1.9%
APPROPRIATIONS								
Total Administration	502,430	1909	196,750	Ê	699,180	527,520	171,660	32.5%
Total Cost of Providing Services	1,308,470	1,	1,340,050	9	2,648,520	2,696,740	(48,220)	-1.8%
Net Principal Payments on Debt Service in Lieu of Depreciation					2	,	3	#DIV/0!
Total Operating Appropriations	1,810,900	1,	1,536,800	(6)	3,347,700	3,224,260	123,440	3.8%
Net Interest Payments on Debt Total Other Non-Operating Appropriations Total Non-Operating Appropriations					E 9 8	4); (4), A	XX - XX	10/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Accumulated Deficit	Ř	*		*			ez .	#DIV/0i
Total Appropriations and Accumulated Deficit	1,810,900	τÎ	1,536,800	8	3,347,700	3,224,260	123,440	3.8%
Less: Total Unrestricted Net Position Utilized	,	*	34,080	*	34,080	15,050	19,030	126.4%
Net Total Appropriations	1,810,900	1,	1,502,720	10	3,313,620	3,209,210	104,410	3.3%
ANTICIPATED SURPLUS (DEFICIT)	\$ 46,040 \$	₹ \$	₹ \$	8	\$ 46,040	\$ 88,190	\$ (42,150)	-47.8%

2016 Revenue Schedule

Bricktown Housing Authority

For the Period

July 1, 2016 to

June 30, 2017

	Public Housing		Proposed Bud	'get	Total All	Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Management	Section 8	Voucher	Other Programs	Operations	Operations	All Operations	All Operations
OPERATING REVENUES	- Warrage Men	3000000	TOGGICI	Other Frograms	Орегилона	- Орегинона	Air Operations	All Operations
Rental Fees								
Homebuyers' Monthly Payments					\$ 126	\$ 197	\$	#DIV/0!
Dwelling Rental	960,980	-			960,980	970,500	(9,520)	-1.0%
Excess Utilities	2,000	425			2,000	2,000		0.0%
Non-Dwelling Rental						(+0)	56	#DIV/0!
HUD Operating Subsidy	760,000				760,000	776,500	(16,500)	-2.1%
New Construction - Acc Section 8		7.0				(4.5	=	#DIV/0!
Voucher - Acc Housing Voucher			1,462,550		1,462,550	1,433,000	29,550	2.1%
Total Rental Fees	1,722,980	(4)	1,462,550	*	3,185,530	3,182,000	3,530	0.1%
Other Operating Revenues (List)								
Laundry Commissions	10,800	14:			10,800	10,200	600	5.9%
Section 8 Fees	42,000	(1 <u>11</u>)			42,000	42,000	9	0.0%
Portable Fees/Fraud	3		40,000		40,000	32,000	8,000	25.0%
Ocean City Contract	61,600		8		61,600		61,600	#DIV/0!
Total Other Revenue	114,400		40,000	-	154,400	84,200	70,200	83.4%
Total Operating Revenues	1,837,380		1,502,550		3,339,930	3,266,200	73,730	2.3%
NON-OPERATING REVENUES								
Grants & Entitlements (List)								
Capital Fund Operations	18,360				18,360	30,000	(11,640)	-38.8%
Grant #2					263	4	22	#DIV/01
Grant #3					2.5		*	#DIV/0!
Grant #4							2	#DIV/0!
Total Grants & Entitlements	18,360	277	=	76	18,360	30,000	(11,640)	-38.8%
Local Subsidies & Donations (List)								
Local Subsidy #1					(●)	=	*	#DIV/0!
Local Subsidy #2						3	5	#DIV/0!
Local Subsidy #3					(€)	3	¥	#DIV/0!
Local Subsidy #4								#DIV/0!
Total Local Subsidies & Donations	76		8	26			€.	#DIV/0!
Interest on Investments & Deposits								
Investments	1,200	(4)	170		1,370	1,200	170	14.2%
Security Deposits					2*3	57		#DIV/0!
Penalties					83		-	#DIV/0!
Other Investments					:5)			#DIV/0!
Total Interest	1,200	12/	170	(2	1,370	1,200	170	14.2%
Other Non-Operating Revenues (List)								
Other Non-Operating #1					-	3		#DIV/0!
Other Non-Operating #2						· ·	*	#DIV/0!
Other Non-Operating #3						3		#DIV/0!
Other Non-Operating #4	2				-			#DIV/0!
Other Non-Operating Revenues			- 5	(7)	(7)			#DIV/0!
Total Non-Operating Revenues	19,560	ė.	170	(2) AC	19,730	31,200	(11,470)	-36.8%
TOTAL ANTICIPATED REVENUES	\$ 1,856,940	\$ -	\$ 1,502,720		\$ 3,359,660	\$ 3,297,400	\$ 62,260	1.9%

2015 Adopted Revenue Schedule

Bricktown Housing Authority

			Adopted Budg	get	
	Public Housing		Housing		Total All
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES	***				
Rental Fees					
Homebuyers' Monthly Payments					\$:=:
Dwelling Rental	970,500				970,500
Excess Utilities	2,000				2,000
Non-Dwelling Rental					-
HUD Operating Subsidy	776,500				776,500
New Construction - Acc Section 8					
Voucher - Acc Housing Voucher	-		1,433,000		1,433,000
Total Rental Fees	1,749,000		1,433,000		3,182,000
Other Operating Revenues (List)					
Laundry Commissions	10,200				10,200
Section 8 Fees	42,000				42,000
Portable Fees			32,000		32,000
Other Revenue 4	S====			÷	-
Total Other Revenue	52,200		32,000		84,200
Total Operating Revenues	1,801,200		1,465,000		3,266,200
NON-OPERATING REVENUES					
Grants & Entitlements (List)					
Capital Fund Operations	30,000				30,000
Grant #2	-				(-
Grant #3				: E	1120
Grant #4					
Total Grants & Entitlements	30,000	=	=	024	30,000
Local Subsidies & Donations (List)					
Local Subsidy #1					*
Local Subsidy #2					360
Local Subsidy #3					(表)
Local Subsidy #4	·				***
Total Local Subsidies & Donations			•	U.S.	語の
Interest on Investments & Deposits					
Investments	1,000		200		1,200
Security Deposits					Ψ.
Penalties					90
Other Investments	9				
Total Interest	1,000	×	200	(#)	1,200
Other Non-Operating Revenues (List)					
Other Non- Operating #1					9
Other Non-Operating #2					31
Other Non-Operating #3					¥
Other Non-Operating #4					
Other Non-Operating Revenues	<u>=</u>	<u> </u>	i e	(高)	=======================================
Total Non-Operating Revenues	31,000		200		31,200
TOTAL ANTICIPATED REVENUES	\$ 1,832,200	\$ - \$	1,465,200	\$::=	\$ 3,297,400

2016 Appropriations Schedule

Bricktown Housing Authority

For the Period

July 1, 2016

to.

June 30, 2017

\$ Increase

% Increase

										(Decrease)	(Decrease)
										Proposed vs.	Proposed vs
			Pri	oposed Budge	+			Ac	dopted Budget	Adopted	Adopted
	Public Housing			Housing			Total All	-	Total All		ricopico
	Management	Section 8		Voucher	Other Programs	(Operations		Operations	All Operations	All Operation
OPERATING APPROPRIATIONS								_			
Administration											
Salary & Wages	\$ 235,930 \$		\$	76,840	\$	\$	312,770	\$	183,320	\$ 129,450	70.6
Fringe Benefits	159,400		-	61,510			220,910		125,200	95,710	76.4
Legal	15,000			848	9		15,000		16,000	(1,000)	-6.3
Staff Training	5,000		-	1,000			6,000		6,000		0.0
Travel	8,100			1,900			10,000		10,000	-	0.0
Accounting Fees	20,500			_,000			20,500		20,500	2	0.0
Auditing Fees	8,500			2,500			11,000		10,000	1,000	0.0
Miscellaneous Administration*	50,000		-	53,000			103,000		156,500	(53,500)	-34.2
Total Administration	502,430		_	196,750		_	699,180	_	527,520	171,660	32.
ost of Providing Services	302,430		_	150,730		_	033,180	_	321,320	171,000	32.:
Salary & Wages - Tenant Services	59,520						59,520		58,350	1,170	2.0
Salary & Wages - Maintenance & Operation									185,130		2.0
	234,610		-	35			234,610		105,150	49,480	26.3
Salary & Wages - Protective Services	7. 8 2 542								2	-	#DIV/01
Salary & Wages - Utility Labor	100 200						400 000		240.000	400 5001	#DIV/01
Fringe Benefits	190,280			30	8	•	190,280		210,800	(20,520)	-9.
Tenant Services	9,150		2				9,150		9,150		0.0
Utilities	445,010						445,010		493,400	(48,390)	-9.8
Maintenance & Operation	255,000		+				255,000		280,000	(25,000)	-8.
Protective Services							2		30,000	(30,000)	-100.
Insurance	92,000		-	8,000			100,000		85,000	15,000	17.
Payment in Lieu of Taxes (PILOT)	16,800		*				16,800		17,910	(1,110)	-6.7
Terminal Leave Payments									90	2	#DIV/01
Collection Losses	1,100			-			1,100		1,000	100	10.0
Other General Expense				4,500	7	5	4,500		1,000	3,500	350.
Rents				1,327,550			1,327,550		1,315,000	12,550	1.6
Extraordinary Maintenance			-				2		*	-	#DIV/01
Replacement of Non-Expendible Equipment	5,000		2	-20			5,000		10,000	(5,000)	-50.0
Property Betterment/Additions							96			-	#DtV/01
Miscellaneous COPS*										2	#DIV/01
Total Cost of Providing Services	1,308,470			1,340,050			2,648,520	_	2,696,740	(48,220)	-1.8
et Principal Payments on Debt Service in Lieu of	PERMIT					ı					
epreciation	1.55, 7115			والأوادة		4				£,	#DIV/01
Total Operating Appropriations	1,810,900		2	1,536,800			3,347,700	_	3,224,260	123,440	3.8
ON-OPERATING APPROPRIATIONS											
et Interest Payments on Debt	1.25 11 150		Ų III		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ij.	=		*		#DIV/01
perations & Maintenance Reserve							\$			-	#DIV/01
newal & Replacement Reserve							5		51		#DIV/01
unicipality/County Appropriation							×		*		#DIV/01
her Reserves								_			#DIV/01
Total Non-Operating Appropriations			ŝ	-			3		29		#DIV/01
TAL APPROPRIATIONS	1,810,900		•	1,536,800	*		3,347,700		3,224,260	123,440	3.8
CUMULATED DEFICIT								2	*.		#DIV/01
TAL APPROPRIATIONS & ACCUMULATED											
FICIT	1,810,900		-	1,536,800			3,347,700		3,224,260	123,440	3.8
IRESTRICTED NET POSITION UTILIZED											
unicipality/County Appropriation	:00	3	8		*				*	DE.	#DIV/0I
her				34,080			34,080		15,050	19,030	126.4
Total Unrestricted Net Position Utilized	:•:		-	34,080		_	34,080	_	15,050	19,030	126.4
OTAL NET APPROPRIATIONS	\$ 1,810,900 \$		- \$	1,502,720	ċ	\$		\$	3,209,210	\$ 104,410	3.3

^{*} 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

\$ 90,545.00 \$

- \$ 76,840.00 \$

- \$ 167,385.00

2015 Adopted Appropriations Schedule

Bricktown Housing Authority

				,	Adopted Bud <u>o</u>	get		
		c Housing			Housing			Total All
	Man	agement	Section 8		Voucher	Other Programs	0	perations
OPERATING APPROPRIATIONS								
Administration								
Salary & Wages	\$	107,870		\$	75,450		\$	183,320
Fringe Benefits		96,800			28,400			125,200
Legal		16,000						16,000
Staff Training		5,000			1,000	14		6,000
Travel		8,100			1,900			10,000
Accounting Fees		20,500			((4)			20,500
Auditing Fees		8,000			2,000			10,000
Miscellaneous Administration*		109,000			47,500			156,500
Total Administration		371,270	-		156,250			527,520
Cost of Providing Services								
Salary & Wages - Tenant Services		58,350						58,350
Salary & Wages - Maintenance & Operation		185,130			10 8 1			185,130
Salary & Wages - Protective Services		000						*
Salary & Wages - Utility Labor								-
Fringe Benefits		210,800				-		210,800
Tenant Services		9,150						9,150
Utilities		493,400						493,400
Maintenance & Operation		280,000						280,000
Protective Services		30,000						30,000
Insurance		77,000			8,000			85,000
Payment in Lieu of Taxes (PILOT)		17,910			-,			17,910
Terminal Leave Payments		,						2
Collection Losses		1,000						1,000
Other General Expense					1,000			1,000
Rents					1,315,000			1,315,000
Extraordinary Maintenance		120			, ,			
Replacement of Non-Expendible Equipment		10,000						10,000
Property Betterment/Additions								
Miscellaneous COPS*								8
Total Cost of Providing Services		L,372,740			1,324,000	+		2,696,740
Net Principal Payments on Debt Service in Lieu		* F. (* F. 2	S. / - 06 -U	100	1 S	W-1-4-65		
of Depreciation								-
Total Operating Appropriations	1	,744,010			1,480,250	-		3,224,260
NON-OPERATING APPROPRIATIONS		TALESTOCK STREET			100 \$ 0 1 00 10 M			33.31.07
Net Interest Payments on Debt	1	A HILL IVEY	1. 1000000000	dell.			1	
Operations & Maintenance Reserve								*
Renewal & Replacement Reserve								-
Municipality/County Appropriation								
Other Reserves								-
Total Non-Operating Appropriations		51	71.5			4		7.5
TOTAL APPROPRIATIONS		,744,010	- 2		1,480,250	9		3,224,260
ACCUMULATED DEFICIT								(#)
TOTAL APPROPRIATIONS & ACCUMULATED								
DEFICIT	1	,744,010			1,480,250	-		3,224,260
UNRESTRICTED NET POSITION UTILIZED		.,,010			_, .00,200			
Municipality/County Appropriation		-						181
Other					15,050			15,050
Total Unrestricted Net Position Utilized		4			15,050	4	-	15,050
TOTAL NET APPROPRIATIONS	\$ 1	,744,010	\$ -	\$	1,465,200	\$ -	\$	3,209,210
		,		-	,,	<u> </u>	_	

^{*} 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 \$ 87,200.50 \$ - \$ 74,012.50 \$ - \$ 161,213.00

5 Year Debt Service Schedule - Principal

Bricktown Housing Authority

				Fiscal Year Beginning in	ni ng in				
	Current Year							1	Total Principal
	(2015)	2016	2017	2018	2019	2020	2021	Thereafter	Outstanding
None	\$	\$	\$	\$	\$	\$	\$	\$	\$
Debt Issuance #2									(0)
Debt Issuance #3									<u>)</u>
Debt Issuance #4									٠
TOTAL PRINCIPAL	100			ă.		(8)		3	
LESS: HUD SUBSIDY	*6	¥		*	,			*	*
NET PRINCIPAL	\$	\$	\$	\$ -	\$ -	\$ -	\$.	- \$ -	\$

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

Standard & Poors	r: 11	
Fitch	er 10	
Moody's		
	Bond Rating	Year of Last Rating

5 Year Debt Service Schedule - Interest

Bricktown Housing Authority

	Total Interest Payments Outstanding	l lor	(0.5	I.	£	œ	201	30
		٠, ج				ar.	76	·
	– Thereafter	\$						V
	2021						3.	
		\$				ĵ.	ž	V
	2020	15.						4/
	2019	v.				£	i	
ginning in	20	φ.				¥ï	·	v
Fiscal Year Beginning in	2018							
Fisc		\$				Ē,	ř	4
	2017							
		\$						v
	2016	34					*/	
	"	\$						\sigma
	Current Year (2015)	i			•	1	2	ī
	Curre (2	ş						Ś

Debt Issuance #2
Debt Issuance #3
Debt Issuance #4
TOTAL INTEREST
LESS: HUD SUBSIDY
NET INTEREST

None

2016 Net Position Reconciliation

Bricktown Housing Authority

For the Period July 1, 2016

Proposed Budget

June 30, 2017

ç

	Total All Operations	perations	
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)	\$	5,308,311	
Less: Invested in Capital Assets, Net of Related Debt (1)	r.	5,033,675	
Less: Restricted for Debt Service Reserve (1)		7(*)	
Less: Other Restricted Net Position (1)		7,294	
Total Unrestricted Net Position (1)		267,342	
Less: Designated for Non-Operating Improvements & Repairs		0	
Less: Designated for Rate Stabilization		§•0	
Less: Other Designated by Resolution		9	
Plus: Accrued Unfunded Pension Liability (1)	1	1,326,399	
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)		i)	
Plus: Estimated Income (Loss) on Current Year Operations (2)		88,190	
Plus: Other Adjustments (attach schedule)		(i	
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	1	1,681,931	
Unrestricted Net Position Utilized to Balance Proposed Budget		34,080	
Unrestricted Net Position Utilized in Proposed Capital Budget		196	
Appropriation to Municipality/County (3)		3	
Total Unrestricted Net Position Utilized in Proposed Budget		34,080	
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR (4)	\$ 1	1,647,851	

(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

\$ 90,545

(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.

$\frac{2016/2017}{\text{BRICK}}$ $\frac{\text{(Name)}}{\text{(Name)}}$

HOUSING AUTHORITY CAPITAL BUDGET/ PROGRAM

2016/2017 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

BRICK (Name)

FISCAL Y	EAR:	FROM:	7/1/2016	TO:	6/30/2017
[×] It is hereby cents a true copy of the Capital Annual Budget, by the govern 18th day of Apri	Budget/Pr	ogram approvo	ved, pursuant to <u>N</u> Ck Ho	I.J.A.C	C. 5:31-2.2, along with the
			OR		
I It is hereby cernave elected NOT to adopt N.J.A.C. 5:31-2.2 for the f	a Capita	l Budget /Pre	ogram for the af	oresaid	d fiscal year, pursuant to
Officer's Signature:	ale	duy Vi	latsan		
Name:		A WATSON			
Title:	EXECU	TIVE DIREC	CTOR		
Address:		AMBERS BF , NJ 08723	RIDGE ROAD		
Phone Number:	732-920)-9400	Fax Number:	73	2-920-7604
E-mail address	awatson	@brickha.org			

2016/2017 CAPITAL BUDGET/PROGRAM MESSAGE

BRICK 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?

The Authority's Annual and Five Year Plan is prepared in consultation with the 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? 20 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.

2016 Proposed Capital Budget

Bricktown Housing Authority

For the Period July 1, 2016 to

June 30, 2017

Sources Other Authorization Capital Grants 44,053 20,000 151,032 10,000 225,085 **Funding Sources** Debt Replacement Renewal & Reserve **Unrestricted Net Position Utilized** 20,000 10,000 **Estimated Total** 44,053 151,032 225,085 Cost TOTAL PROPOSED CAPITAL BUDGET Project G Description Project E Description Project F Description Site Improvements **Dwelling Structures** Equipment A/E Fees

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

			20	Bricktown Housing Authority	ng Authority				
	ш	For the Period	July 1	July 1, 2016	to	June 30, 2017	17		
					Fis	Fiscal Year Beginning in	ng in		
		# T	(
	EST	estimated lotal	כתיי	Current Year					
		Cost	Propos	roposed Budget	2017	2018	2019	2020	2021
A/E Fees	₩	120,000	↔	\$ 000'02	\$ 000'02	20,000 \$	\$ 0000	20,000 \$	20,000
Site Improvements		234,318		44,053	38,053	38,053	38,053	38,053	38,053
Dwelling Structures		936,192		151,032	157,032	157,032	157,032	157,032	157,032
Equipment		60,000		10,000	10,000	10,000	10,000	10,000	10.000
Project E Description		*		ij					
Project F Description		•		ī					
Project G Description		ŧ		ĸ		ž			
TOTAL	φ.	\$ 1,350,510	\$	\$ 225,085 \$	\$ 225,085 \$		225,085 \$ 225,085 \$	225,085 \$	225,085

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

	For the Period	Bricktown Housing Authority	uthority	7100 OS earl	7100	
)		, 201,	
			Fu	Funding Sources		
			Renewal &			
	Estimated Total	Unrestricted Net	Replacement	Debt		
	Cost	Position Utilized	Reserve	Authorization	Authorization Capital Grants Other Sources	er Sources
A/E Fees	\$ 120,000				\$ 120,000	
Site Improvements	234,318				234,318	
Dwelling Structures	936,192				936,192	
Equipment	000'09				60,000	
Project E Description	ä					
Project F Description	Ĭ					
Project G Description	T.					
TOTAL	\$ 1,350,510	٠ \$		\$	\$ 1,350,510 \$	ā
Total 5 Year Plan per CB-4	\$ 1,350,510					
Balance check	[i -	— If amount is other than zero, verify that projects listed above match projects listed on CB-4.	o, verify that proje	cts listed above mo	atch 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,