Authority Budget of:

Englewood Housing Authority

State Filing Year

2019

NOV 1 6 2018

For the Period:

January 1, 2019

to

December 31, 2019

www.ehahousing.org

Authority Web Address

APPROVED COPY

Department



ADOPTED GOPY

Division of Local Government Services

2019 HOUSING AUTHORITY BUDGET

Certification Section

Englewood Housing Authority

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM January 1, 2019 TO December 31, 2019

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to <u>N.J.S.A.</u> 40A:5A-11.

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

By: Taul D. West CPA, RMA Date: 11/21/2018

CERTIFICATION OF ADOPTED BUDGET

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

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

By: Paul D. Cort CPA, RMA Date: 1/3/2019

2019 PREPARER'S CERTIFICATION

Englewood Housing Authority (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

It is hereby certified that the Housing Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Housing Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:		WI VALE	
Name:	William Katchen, CPA	W July)
Title:	Fee Accountant	V	
Address:	Ste. 303, 596 Anders 07010	on Avenue, Clif	fside Park, NJ
Phone Number:	201-943-4449	Fax Number:	201-943-5099
E-mail address	bill@katchencpa.com		

2019 APPROVAL CERTIFICATION

Englewood Housing Authority (Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

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 Englewood Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 29 day of October, 2018.

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

Officer's Signature:	minas Se	nande	
Name:	Domingo Senande		
Title:	Executive Director		
Address:	111 West Street, Englev	vood, NJ 07631	
Phone Number:	201-871-3451	Fax Number:	201-871-5908
E-mail address	dsenande@ehahousing.o	org	

INTERNET WEBSITE CERTIFICATION

Authority's	Web Address:	www.ehahousing.org	/
All authoritie	s shall maintain eith	er an Internet website or a webp	age on the municipality's or county's Internet
			ride increased public access to the authority's
= -			wing items to be included on the Authority's
	₹	disclosure. Check the boxes belo	ow to certify the Authority's compliance with
N.J.S.A. 40A	<u>:5A-17.1</u> .		
<u> </u>	A description of the	Authority's mission and responsi	bilities
J	The budgets for the	current fiscal year and immediate	ly preceding two prior years
	information (Simila	r information are items such as	port (Unaudited) or similar financial Revenue and Expenditures Pie Charts or n that would be useful to the public in
(finances/budget of the Authori	
	The complete (All Finmediately two pri		it Synopsis) of the most recent fiscal year and
4	-		statements deemed relevant by the governing within the authority's service area or
		ant to the "Open Public Meetings e, date, location and agenda of eac	Act" for each meeting of the Authority,
	2.0	ites of each meeting of the Author r at least three consecutive fiscal	ity including all resolutions of the board and years
7			nd phone number of every person who some or all of the operations of the
4	corporation or other		r person, firm, business, partnership, remuneration of \$17,500 or more during the ered to the Authority.
webpage as i	dentified above com	-	the Authority that the Authority's website or ry requirements of N.J.S.A. 40A:5A-17.1 as ce.
Name of Offi	cer Certifying compli	iance	Domingo Senande
Title of Office	er Certifying complia	nce	Executive Director

Page C-4

Signature

2019 HOUSING AUTHORITY BUDGET RESOLUTION

ENGLEWOOD HOUSING AUTHORITY

(Name)
PRESORUTION No. 10-29-18 (3)

14	ESONUTION N	10.10-2	1-18 (3)	
FISCAL YEAR: REDBY! Chairman Aspil	FROM:1/1/2019)	TO:12/31/2019	
WHEREAS, the Annual Budget and C January 1, 2019 and ending, December Authority at its open public meeting of C	apital Budget for the 31, 2019 has been pr	Englewood I	Housing Authority for the	fiscal year beginning,
WHEREAS, the Annual Budget as intro Accumulated Deficit if any, of \$ 9,063,0 and				
WHEREAS, the Capital Budget as intro Position planned to be utilized as funding				Total Unrestricted Net
WHEREAS, the schedule of rents, fees anticipated revenues to satisfy all obligoutlays, debt service requirements, and contracts and agreements; and	ations to the holders	of bonds of th	e Authority, to meet oper	rating expenses, capital
WHEREAS, the Capital Budget/Program funds; rather it is a document to be us authorization to expend funds for the puresolution, by a project financing agreer or other means provided by law.	sed as part of the sai urposes described in t	d Authority's his section of	planning and management the budget, must be grant	nt objectives. Specific ted elsewhere; by bond
NOW, THEREFORE BE IT RESOLVE meeting held on October 29, 2018 that the Englewood Housing Authority for the	ne Annual Budget, inc	luding all rela	ted schedules, and the Cap	ital Budget/Program of
BE IT FURTHER RESOLVED, that the meet all proposed expenditures/expenses outstanding debt obligations, capital least	and all covenants, te	rms and provis	sions as stipulated in the sa	aid Housing Authority's
BE IT FURTHER RESOLVED, that the Budget and Capital Budget/Program for			od Housing Authority wi	ll consider the Annual
Sepretary's Signature)) Governing Body Reco Member: Aye CHAIRMAN PRAYUEMS ASPI VICE CHAIRMAN CARA D. COMMESSIONER (ARAS)		Abstain Aye Aye Aye Aye Aye Aye	(Date) * Absent	

2019 ADOPTION CERTIFICATION

ENGLEWOOD

(Name)

HOUSING AUTHORITY BUDGET

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

hereby certified that the Housing Authority Budget and Capital Budget/Program annexed hereto is a copy of the Budget adopted by the governing body of the Englewood Housing Authority, pursuant <u>I.J.A.C. 5:31-2.3</u>, on the 17 day of, December, 2018.

	- A		
Officer's Signature:	Poningo Con	ande	
Name:	Domingo Senande		
Title:	Executive Director		
Address:	111 West Street, Englew		
Phone Number:	201-871-3451	Fax Number:	201-871-5908
E-mail address	dsenande@ehahousing.c	org .	

2019 HOUSING AUTHORITY BUDGET MESSAGE & ANALYSIS

Englewood Housing Authority (Name)

AUTHORITY BUDGET

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

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

- 1. Complete a brief statement on the 2019/2019-2020 proposed Annual Budget and make comparison to the 2018/2018-2019 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). See attached.
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. The proposed budget is not anticipated to impact revenues as the majority of rental sources are based on HUD mandated formulas.
- 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. None expected to be utilized.
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy of a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). None except for annual PILOT.
- 6. The proposed budget must not reflect an anticipated deficit from 2019/2019-2020 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68, 45) The proposed budget anticipates a surplus in operations that will result in reducing the accumulated deficit.

Englewood Housing Authority

Page N-1, Question 1

Revenue:

- 1. Dwelling rental income- The dwelling rental income reflects anticipated tenant payments. The amounts expected to be received as housing assistance payments have been moved to the line item of revenue titled HUD operating subsidy.
- 2. HUD operating subsidy- This amount represents expected HAP payments for the 152 units.
- 3. Interest income- It is expected that with the increase in interest rates that this source of income will be higher.

Appropriations:

- 1. Utility labor- Based on changes in maintenance staff this category of expense is expected to be shifted more towards ordinary maintenance as compared to utility efforts.
- 2. Debt service -Expected to be lower based on the retirement during the year of the Foti mortgage.

HOUSING AUTHORITY CONTACT INFORMATION 2019

Please complete the following information regarding this Housing Authority. $\underline{\textbf{All}}$ information requested below must be completed.

Name of Authority:	Englewood Housing Auth	ority										
Federal ID Number:	22-6017828											
Address:	111 West Street											
City, State, Zip:	Englewood		NJ	07631								
Phone: (ext.)	201-871-3451	Fax:	201-8	71-5908								
Preparer's Name:	William Katchen, CPA											
Preparer's Address:	Ste. 303, 596 Anderson A	venue										
City, State, Zip:	Cliffside Park		NJ	07010								
Phone: (ext.)	201-943-4449	Fax:	201-9	43-5099								
E-mail:	bill@katchencpa.com		,									
Chief Executive Officer:	Domingo Senande											
Phone: (ext.)	201-871-3451	Fax:	201-871-5908									
E-mail:	dsenande@ehahousing.or	g	L									
Chief Financial Officer:	Rita Estella											
Phone: (ext.)	201-871-3451 F	ax: 20	201-871-5908									
E-mail:	restella@yahoo.com											
Name of Auditor:	Anthony Giampaolo, CPA											
Name of Firm:	Hymanson, Parnes and Giampaolo											
Address:	467 Middletown Lincroft											
City, State, Zip:	Lincroft		NJ	07738								
Phone: (ext.)	732-842-4550	732-84	732-842-4551									
E-mail:	tony@hpgnj.com											

HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

Englewood Housing Authority (Name)

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

An	swer all questions below completely and attach additional information as required.
1)	Provide the number of individuals employed in (Use Most Recent W-3 Available 2017 or 2018) as
	reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: _16
2)	Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most
	Recent W-3 Available 2017 or 2018)Transmittal of Wage and Tax Statements: _768,002
3)	Provide the number of regular voting members of the governing body:6
4)	Provide the number of alternate voting members of the governing body:0
5)	Did any person listed on Page N-4 have a family or business relationship with any other person listed
	on Page N-4 during the current fiscal year?No If "yes," attach a description of the
	relationship including the names of the individuals involved and their positions at the Authority.
6)	Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal
	year (Most Recent Filing that March 31. 2018 or 2019 deadline has passed 2018 or 2019) because
	of their relationship with the Authority file the form as required? (Checked to see if individuals
	actually filed at http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html before answering)
	Yes If "no," provide a list of those individuals who failed to file a Financial Disclosure
	Statement and an explanation as to the reason for their failure to file.
7)	Does the Authority have any amounts receivable from current or former commissioners, officers, key
	employees or highest compensated employees? No If "yes," attach a list of those
	individuals, their position, the amount receivable, and a description of the amount due to the
	Authority.
8)	Was the Authority a party to a business transaction with one of the following parties:
	a. A current or former commissioner, officer, key employee, or highest compensated employee?
	No
	b. A family member of a current or former commissioner, officer, key employee, or highest
	compensated employee?No
	c. An entity of which a current or former commissioner, officer, key employee, or highest
	compensated employee (or family member thereof) was an officer or direct or indirect owner?
	No
	If the answer to any of the above is "yes," attach a description of the transaction including the name
	of the commissioner, officer, key employee, or highest compensated employee (or family member
	thereof) of the Authority; the name of the entity and relationship to the individual or family member;
	the amount paid; and whether the transaction was subject to a competitive bid process.
9)	Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a
	personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or
	endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's
	family, or any other person designated by the transferor. No If "yes," attach a description
	of the arrangement, the premiums paid, and indicate the beneficiary of the contract.

10)	Explain the Authority's process for determining compensation for all persons listed on Page N-4.
	Include whether the Authority's process includes any of the following: 1) review and approval by the
	commissioners or a committee thereof; 2) study or survey of compensation data for comparable
	positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent
	compensation consultant; and/or 5) written employment contract. Attach a narrative of your
	Authorities procedures for all employees. Board review and action.
11)	Did the Authority pay for meals or catering during the current fiscal year?No If "yes,"
	attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an
	explanation for each expenditure listed.
12)	Did the Authority pay for travel expenses for any employee or individual listed on Page N-4?
	Yes If "yes," attach a detailed list of all travel expenses for the current fiscal year and
	provide an explanation for each expenditure listed.
13)	Did the Authority provide any of the following to or for a person listed on Page N-4 or any other
	employee of the Authority:
	a. First class or charter travelNo
	b. Travel for companions No
	c. Tax indemnification and gross-up paymentsNo
	d. Discretionary spending accountNo
	e. Housing allowance or residence for personal useNo
	f. Payments for business use of personal residenceNo
	g. Vehicle/auto allowance or vehicle for personal useNo
	h. Health or social club dues or initiation feesNo
	i. Personal services (i.e.: maid, chauffeur, chef)No
	If the answer to any of the above is "yes," attach a description of the transaction including the name
	and position of the individual and the amount expended.
14)	Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred
	by employees and/or commissioners during the course of Authority business and does that policy
	require substantiation of expenses through receipts or invoices prior to reimbursement?Yes
	If "no," attach an explanation of the Authority's process for reimbursing employees and
	commissioners for expenses. (If your authority does not allow for reimbursements indicate that in
	answer)
15)	
13)	Did the Authority make any payments to current or former commissioners or employees for
10	severance or termination?No If "yes," attach explanation including amount paid.
16)	Did the Authority make any payments to current or former commissioners or employees that were
	contingent upon the performance of the Authority or that were considered discretionary bonuses?
	NoIf "yes," attach explanation including amount paid.
17)	Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances
	outstanding by submitting its audited annual financial statements, annual operating data, and notice of
	material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace
	Access (EMMA) as required? N\A If "no," attach a description of the Authority's plan to
	ensure compliance with its Continuing Disclosure Agreements in the future.
18)	Did the Authority receive any notices from the Department of Housing and Urban Development or
10)	any other entity regarding maintenance or repairs required to the Authority's facilities to bring them
	into compliance with current regulations and standards that it has not yet taken action to remediate?
	·
	No If "yes," attach explanation as to why the Authority has not yet undertaken the
	required maintenance or repairs and describe the Authority's plan to address the conditions identified.
19)	Did the Authority receive any notices of fines or assessments from the Department of Housing and
	Urban Development or any other entity due to noncompliance with current regulations ?
	No If "yes," attach a description of the event or condition that resulted in the fine or
	assessment and indicate the amount of the fine or assessment.
20)	Has the Authority been deemed "troubled" by the Department of Housing and Urban Development?
	No If "yes," attach an explanation of the reason the Authority was deemed "troubled" and
	describe the Authority's plan to address the conditions identified.
	· ·

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

Englewood Housing Authority (Name)

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

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

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's <u>former</u> officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's <u>former</u> commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- **Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.
- Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.
- **Key employee:** An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:
 - a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
 - b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.
- **Highest compensated employee:** One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.
- Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.
- Reportable compensation: The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2019 Most recent available W-2 and 1099 should be used (2017 or 2018 Forms)(60 days prior to start of budget year is November 1, 2018, with 2017 being the most recent calendar year ended), and for fiscal years ending June 30, 2019, the calendar year 2018 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2019, with 2018 being the most recent calendar year ended).
- Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

H				Total Compensation	All Public Entities		0	0	0	0	0	151,711	70,261	0	0	0	0	0	0	0	\$ 221,972
s		Estimated amount of other compensation from	Other Public Entities (health benefits,	Ë.	benefits, etc.)																S
œ			Reportable Compensation	from Other Public Entities	(W-2/ 1099)																· ·
ø		Average Hours per Week	Dedicated to t Positions at	Other Public	in Column O																
۵			Positions held at	Other Public Entities Listed in	Column O																
0		Names of Other Public Entities where	Individual is an Employee or	Member of the Other Public Other Public Governing Body (1) Entities Listed in Entities Listed	See note below	None	Je	Je	je.	эг	ЭL	Je	Je								
z		_ <u>P</u>			from Authority	- No	0 None	0 None	0 None	0 None	0 None	151,711 None	70,261 None	0	0	0	0	0	0	0	221,972
Σ		Estimated amount of other	compensation from the	ss.	pension, etc.) fro	S						19,788	16,214								36,002 \$
1	ition from 1099)	0 .	expense co		benefits, etc.) p																· ·
using Authority December 31, 2019 J K	Reportable Compensation from Authority (W-2/ 1099)				Stipend Bonus							131,923	54,047								\$ 185,970 \$ -
Englewood Housing Authority to December 31, 2 G H I J	Position	Highes		Form pensate Employ	ed ee																
ш	8			Offic	er							×	×								
For the Period January 1, 2019 C D E	L		Average Hours	per Week Dedicated to	Position	×	×	×	×	×	×										
For the Period C				Î	Title	Chairperson	Commissioner	Commissioner	Commissioner	Commissioner	Commissioner	Executive Director	Finance								
8				ä	Name	1 Ray Aspinwall	2 Charles Moche	3 Raul Correa	4 Elisha Gurfein	5 Carla Jones	6 Carlos Aguila, Jr.	7 Domingo Senande	8 Rita Estella	6	10	11	12	13	14	15	Total:

(1) Insert "None" in this column for each Individual that does not hold a position with another Public Entity

Schedule of Health Benefits - Detailed Cost Analysis

December 31, 2019

to

Englewood Housing Authority January 1, 2019

For the Period

				?				
	# of Covered	Annual Cost Estimate per	Total Cost	# of Covered				
	(Medical & Rx) Proposed Budget	Employee Proposed Budget	Estimate Proposed Budget	Medical & Rx) Current Year	Annual Cost per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
Active Employees - Health Benefits - Annual Cost						the office of the second second second		
Single Coverage	7	_	\$ 80,500	7	\$ 11,161	\$ 78,127	\$ 2,373	3.0%
Parent & Child	2	20,192	40,384	2	19,604	39,208	1,176	3.0%
Employee & Spouse (or Partner)	Н	22,503	22,503	1	21,848	21,848	655	3.0%
Family	3	32,740	98,220	3	31,786	95,358	2,862	3.0%
Employee Cost Sharing Contribution (enter as negative -)			(26,289)			(28,007)	1,718	-6.1%
Subtotal	13		215,318	13		206,534	8,784	4.3%
					が大きな			
Commissioners - Health Benefits - Annual Cost								
Single Coverage			,			1	ī	#DIV/0!
Parent & Child						ĭ	•	#DIV/0!
Employee & Spouse (or Partner)			1			•	ı	#DIV/0i
Family			•				•	#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							ī	#DIV/0!
Subtotal	0			0		,	ı	#DIV/0!
		を という となる	· · · · · · · · · · · · · · · · · · ·				意味を受け	
Retirees - Health Benefits - Annual Cost							の方面に	
Single Coverage			1			1	١	#DIV/0!
Parent & Child			1			i	ī	#DIV/0!
Employee & Spouse (or Partner)	H	12,986	12,986	1	12,608	12,608	378	3.0%
Family						/	1	#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							,	#DIV/0!
Subtotal	Н		12,986			12,608	378	3.0%
			がは、世にはなる				を経過して	
GRAND TOTAL	14	1 11	\$ 228,304	14		\$ 219,142	\$ 9,162	4.2%
		ı						
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	Answer in Box)	•		Yes or No				
is prescription und coverage provided by the short (res of No)? (Place Answer in box)	נ (צומרב אוואמבו ווו מחי	_	res	res or No				

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

Schedule of Accumulated Liability for Compensated Absences

Englewood Housing Authority

For the Period

January 1, 2019

t

December 31, 2019

Legal Basis for Benefit

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

Agreement (check applicable items) Employment leubivibn Resolution Agreement Approved Labor 49,402 49,402 Absence Liability Dollar Value of Compensated Accrued Total liability for accumulated compensated absences at beginning of current year $\, \S \,$ **Gross Days of Accumulated** Compensated Absences at beginning of Current Year Individuals Eligible for Benefit See attached list

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

PHA MOD HeV WESTMOOR FOTT 100% E,585.78 - 1,272.79 1,00% E,585.78 - 1,285.29 1,00% E,585.78 - 1,277.84 1,00% E,585.78 1,00% E,5	Compensated Alax Compensated	10 10 10 10 10 10 10 10	10 10 10 10 10 10 10 10	10 10 10 10 10 10 10 10	S 1,1,2,3,2,3 S S S S S S S S S			J. FOTI WEST	70.54 1;		0.10	47.01		33.51	2.	137.13 2,1	-			: 7;	_	'AL 67'997					12/31/2016 ADJ	26,692.86	21,243.96	18,712.69	66,649,51 2,				
PHA MOD HCV WESTMOOR FOTT 100% 6,363.78	Componentation Allocation	S Total Compensated Abs PHA MOD HCV WESTMOOR FOTT 100W 6,563.78	S Total Compensated Abs PHA MOD HCV WESTMOOR FOTT 100W 6,563.78	S Total Compensated Abs PHA MOD HCV WESTMOOR FOTT 100W 6,563.78	S Total Compensated Abs PHA MOD HCV WESTMOOR FOTT 100W 6,563.78		Allocation 55	1	4,514.79	•	+	Н	\perp	4	2,715,14	1		1 577 84	L			77,77	1		大の大								1		
Allocation PHA MOD MCV WESTMOOR FOTT 195% 0% 64% 16% 1% 100% 195% 0% 64% 16% 1% 100% 195% 0% 64% 16% 1% 100% 27% 0% 0% 68% 100% 100% 41% 1,00% 0% 68% 100% 100% 65% 0% 0% 0% 100% 100% 41% 1% 100% 100% 100% 100% 41% 0% 59% 19% 1% 100% 41% 0% 59% 10% 100% 100% 21% 0% 59% 40% 100% 100% 21% 23% 0% 69% 100% 100% 21% 23% 0% 49% 100% 100% 28% 20% 49% 100% 1	Compensated Abs	Total Companisated Abs	Total Companisated Abs	Total Companisated Abs	Total Companisated Abs			TH-BUS ACTI	1,33										L					>	10	/ /		JTI.		JOR		+			
### MOD HCV WESTMOOR FOTT 19% MOD HCV WESTMOOR FOTT 19% 0% 64% 16% 1% 100% 0% 64% 16% 1% 21% 0% 0% 68% 19% 2% 21% 0% 0% 0% 19% 1% 21% 0% 58% 19% 1% 21% 0% 58% 19% 1% 21% 0% 58% 19% 1% 21% 0% 58% 19% 1% 21% 0% 58% 19% 1% 21% 21% 0% 68% 58% 21% 21% 0% 68% 28% 21% 21% 0% 68% 58% 21% 21% 0% 68% 58% 21% 21% 0% 68% 58% 21% 21% 0% 68% 58% 21% 21% 0% 68% 58% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 68% 21% 21% 0% 21% 21%	Componented Abs	Name	Name	Name	Name		+		+	+	+		-	1	+	+	+	+	-	Н	-	23,003						JOHN FO	HCV	WESTMO				-	
Allocation PHA MOD HCV 19% 0% 20% 19% 0% 20% 1100% 0% 58% 21% 0% 58% 21% 0% 58% 21% 0% 58% 21% 20% 0% 30% 21% 20% 0% 30% 21% 20% 0% 30% 21% 20% 0% 30% 21% 20% 0% 30% 21% 20% 0% 30% 30% 20% 0% 30% 30% 20% 0% 30% 30% 20% 0% 30% 41% 21% 0% 30% 30% 20% 0% 30% 41% 21% 0% 0% 30% 41% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 30% 41% 0% 0% 0% 30% 41% 0% 0% 0% 30% 41% 0% 0% 0% 30% 41% 0% 0% 0% 0% 30% 41% 0% 0% 0% 0% 0% 41% 0% 0% 0% 0% 41% 0% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 0% 0% 41% 0% 41% 0%	Allocation Allocation Allocation I Compunsated Abs PHA MOD HCV I 1,363.89 15% 0% 20% 1,563.89 15% 0% 0% 0% 1,503.97 1,503.94 1,5030.00	S	S	S	S																	1													
Allocation Alloca		S	S	S	S			VESTMOOR	16%	2000	22%	19%	35%	18%	26%	7803	3078	21%	58%	49%															
19% MOI 19% MO	1,030,37	7.00	7.00	7.00	7.00			HCV	64%																										
PHA	11,383,89 7,054,35 7,054,35 7,054,35 1,030,97 2,350,40 3,350,84 8,227,69 1,1712,89 2,028,80 4,152,22 1,000,00 4,152,22 1,000,00 1	7 10 10 10 10 10 10 10 10 10 10 10 10 10	7 10 10 10 10 10 10 10 10 10 10 10 10 10	7 10 10 10 10 10 10 10 10 10 10 10 10 10	7 10 10 10 10 10 10 10 10 10 10 10 10 10		Alloc	MOD																											_
		70 Days Total C	70 Days Total C	70 Days Total C	7.201.62			PHA																	CR			dr		ar					
CR Hours Sick Days \$15,000 MAX Sick Days Vacation Days 710.00 \$ 10,555.34 \$. \$ 11,305.85 \$. 70.00 \$ 10,555.34 \$. \$ 7,643.55 \$. 70.00 \$ 10,505.34 \$. \$ 7,643.55 \$. 70.00 \$ 77.17 \$. \$ 7,643.55 \$. 70.00 \$ 2,183.37 \$. \$ 7,643.60 \$. 70.00 \$ 21,83.37 \$. \$ 7,643.60 \$. 70.00 \$ 1,84.63 \$. \$ 1,500.40 \$. 70.00 \$ 1,84.63 \$. \$ 13,712.89 \$. 70.00 \$ 1,84.63 \$. \$ 15,000.00 \$. 70.00 \$ 1,225.40 \$. \$ 4,152.22 \$. 70.00 \$ 17,295.44 \$ 15,000.00 \$ 15,000.00 \$. \$. 8.00 \$ 1,2725.30 \$. \$. \$. \$. \$. 9.00 \$ 1,2725.34 \$. \$. \$. \$.	CR Hours Sick Days 155,000 MAX Sick Days 710,001 \$ 10,556,33 \$ - \$ 7,054,3 70,001 \$ 10,556,33 \$ - \$ 7,054,3 70,501 \$ 10,556,30 \$ - \$ 7,054,3 70,501 \$ 71,778 \$ - \$ 7,050,3 70,501 \$ 71,778 \$ - \$ 7,050,3 166,201 \$ 2,183,37 \$ - \$ 2,350,4 166,201 \$ 2,183,37 \$ - \$ 2,350,4 166,201 \$ 2,183,37 \$ - \$ 2,350,4 166,201 \$ 3,112,72 \$ - \$ 2,350,4 166,201 \$ 12,738,40 \$ - \$ 2,350,4 195,00 \$ 12,738,40 \$ - \$ 1,722,72,4 196,00 \$ 17,295,34 \$ 15,000,00 \$ 15,000,00 196,00 \$ 17,295,34 \$ 15,000,00 \$ 15,000,00 196,00 \$ 17,295,34 \$ 15,000,00 \$ 15,000,00 196,00 \$ 17,295,34 \$ 15,000,00 \$ 15,000,00 196,00 \$ 17,295,34 \$ 1	Rate of Pay Stek Hours Stek Days \$15,000 MAX Rate of Pay Stek Hours Stek Days \$15,000 MAX 29,74 710.00 5 10,559.33 \$5 34,35 375,00 \$ 6,553.04 \$5 34,35 375,00 \$ 6,553.04 \$5 20,19 70,50 \$ 717,71 \$5 20,19 70,50 \$ 717,71 \$5 20,19 70,50 \$ 717,71 \$5 25,96 188,20 \$ 7,643.00 \$5 26,56 188,20 \$ 7,643.00 \$5 26,56 186,20 \$ 7,643.00 \$5 26,56 186,20 \$ 7,643.00 \$5 26,56 186,20 \$ 7,643.00 \$5 21,46 712,25 \$ 7,643.00 \$5 24,40 712,25 \$ 7,643.00 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,894,63 \$5 14,40 0.00 \$5 1,7295,34 \$5 15,000,0 0.00 \$5 1,894,63 \$5 16,00,0 0.00 \$5 1,894,63 \$5 17,295,34 \$5 15,000,63 18,40 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5 1,894,63 \$5 19,20 0.00 \$5	## ACCRUED VACATION & SICK TIME AS OF DECEMBER 31, 2017 ## AS OF DECEMBER 31, 2017 ## ACCRUED VACATION & SICK TIME AS OF DECEMBER 31, 2017 ## ACCRUED VACATION & SICK TIME ## ACCRUED VACATION &	Rate of Pay Sich		ENGLEWOOD HOU	AS OF DECE	2000		ES		RRIEE		URA		ATONIA				RVAL															

Schedule of Shared Service Agreements

Englewood Housing Authority

January 1, 2019

For the Period

December 31, 2019

Amount to be

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

Received by/ Paid from Authority							
Agreement End Date							
Agreement Effective Date							
Comments (Enter more specifics if needed)							
Type of Shared Service Provided							κ
Name of Entity Receiving Service Type of Shared Service Provided							
Name of Entity Providing Service							

If No Shared Services X this Box

2019 HOUSING AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Englewood Housing Authority January 1, 2019 to

For the Period

December 31, 2019

		FY 2	FY 2019 Proposed Budget	Budget		FY 2018 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
	Public Housing	Section 8	Housing	Other Programs	Total All	Total All	All Operations	All Onerations All Operations
REVENUES	Management							operations
Total Operating Revenues	\$ 1,230,730	•	\$ 7,330,000	\$ 574,230	\$ 9,134,960	\$ 8,796,626	5 \$ 338,334	3.8%
Total Non-Operating Revenues	1,440	1	3,000	1,000	5,440	4,940	200 200	10.1%
Total Anticipated Revenues	1,232,170		7,333,000	575,230	9,140,400	8,801,566	338,834	3.8%
APPROPRIATIONS								
Total Administration	340,800		479,760	231,210	1,051,770	1,031,490	20,280	2.0%
Total Cost of Providing Services	757,051	1	6,831,000	300,790	7,888,841	7,566,389	322,452	4.3%
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXX	43,853	58,112	(14,259)	-24.5%
Total Operating Appropriations	1,097,851	,	7,310,760	532,000	8,984,464	8,655,991	1 328,473	3.8%
Total Interest Payments on Debt Total Other Non-Operating Appropriations	XXXXXXXXXXXXXXXX36,000	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	42,629	43,650 35,000	(1,021)	
Total Non-Operating Appropriations	36,000	•	•	•	78,629	78,650	(21)	%0.0
Accumulated Deficit				1	,		1	#DIV/0i
Total Appropriations and Accumulated Deficit	1,133,851	ı	7,310,760	532,000	60'890'6	8,734,641	1 328,452	3.8%
Less: Total Unrestricted Net Position Utilized	1,	1		•	•			#DIV/0i
Net Total Appropriations	1,133,851		7,310,760	532,000	9,063,093	8,734,641	328,452	3.8%
ANTICIPATED SURPLUS (DEFICIT)	\$ 98,319	\$	\$ 22,240	\$ 43,230	\$ 77,307	\$ 66,925	5 \$ 10,382	15.5%

Revenue Schedule

Englewood Housing Authority

For the Period

January 1, 2019

December 31, 2019

% Increase

\$ Increase

		FV 2019	Proposed I	Rudaet		FY 2018 Adopted Budget	\$ Increase (Decrease) Proposed vs. Adopted	% Increase (Decrease) Proposed vs. Adopted
		112015	Тторозейт	buuget		Buuget	Adopted	Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operations
OPERATING REVENUES					100000000000000000000000000000000000000			
Rental Fees					_			
Homebuyers' Monthly Payments					\$ -	\$ -	\$ -	#DIV/0!
- Dwelling Rental	626490			113590	740,080	1,284,946	(544,866)	-42.4%
Excess Utilities					-	-		#DIV/0!
Non-Dwelling Rental					-	-	-	#DIV/0!
HUD Operating Subsidy	549240				549,240	120	549,240	#DIV/0!
New Construction - Acc Section 8					-	=	•	#DIV/0!
Voucher - Acc Housing Voucher			7330000		7,330,000	7,030,000	300,000	4.3%
Total Rental Fees	1,175,730		7,330,000	113,590	8,619,320	8,314,946	304,374	3.7%
Other Operating Revenues (List)					•			
Late charges, laundry and mgmt. fees	55000				55,000	55,000	# 1	0.0%
Prorations to other programs				460640	460,640	426,680	33,960	8.0%
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-		#DIV/0!
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)				-	-	-		#DIV/0!
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	7 <u>-</u>	#DIV/0!
Type in (Grant, Other Rev)					-	-		#DIV/0!
Type in (Grant, Other Rev)					_	-		#DIV/0!
Type in (Grant, Other Rev)	·				-			#DIV/0!
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Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Type in (Grant, Other Rev)					-		-	#DIV/0!
Type in (Grant, Other Rev)						-	_	#DIV/0!
Type in (Grant, Other Rev)					_		-	#DIV/0!
Type in (Grant, Other Rev)					_		-	#DIV/0!
Type in (Grant, Other Rev)					-	-	-	#DIV/0!
Total Other Revenue	55,000			460,640	515,640	481,680	33,960	7.1%
Total Operating Revenues	1,230,730	-	7,330,000	574,230	9,134,960	8,796,626	338,334	3.8%
NON-OPERATING REVENUES			.,,					3.070
Other Non-Operating Revenues (List)								
Type in	3.				_	-	_	#DIV/0!
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Type in				= 1	-		_	#DIV/0!
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Type in					_		-	#DIV/0!
Type in						: <u>-</u>	_	#DIV/0!
Total Other Non-Operating Revenue	-			-				#DIV/0!
Interest on Investments & Deposits (List)						•		#DIV/0:
Interest Earned	1,440		3,000	1,000	5,440	4,940	500	10.1%
Penalties	2,740		3,000	1,000	5,440	4,540	500	#DIV/0!
Other					200	· · · · · · · · · · · · · · · · · · ·	-	#DIV/0! #DIV/0!
Total Interest	1,440		3,000	1,000	5,440	4,940	500	2000 N 18 18 18 18 18 18 18 18 18 18 18 18 18
Total Non-Operating Revenues	1,440		3,000	1,000	5,440	4,940	500	10.1% 10.1%
TOTAL ANTICIPATED REVENUES	\$ 1,232,170		\$ 7,333,000		\$ 9,140,400	\$ 8,801,566	\$ 338,834	3.8%
	¥ 1,232,170	<u> </u>	÷ 1,555,000	7 373,230	7 7,140,400	٠ ٥,٥٥٠,٥٥٥	330,034	3.676
*								

Prior Year Adopted Revenue Schedule

FY 2018 Adopted Budget

Englewood Housing Authority

	Public Housing		Housing		Total All
	Management	Section 8	Voucher	Other Programs	Operations
OPERATING REVENUES					
Rental Fees			*		
Homebuyers' Monthly Payments					\$ -
Dwelling Rental	1,171,356			113,590	1,284,946
Excess Utilities					=
Non-Dwelling Rental	×				-
HUD Operating Subsidy					-
New Construction - Acc Section 8					-
Voucher - Acc Housing Voucher			7,030,000		7,030,000
Total Rental Fees	1,171,356	Ħ	7,030,000	113,590	8,314,946
Other Revenue (List)					
Late charges, laundry and mgmt. fees	55000				55,000
Prorations to other programs				426,680	426,680
Type in (Grant, Other Rev)					_
Type in (Grant, Other Rev)					
Type in (Grant, Other Rev)	*)				=
Type in (Grant, Other Rev)	j.				-
Type in (Grant, Other Rev)					-
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Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					Ħ
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					_
Total Other Revenue	55,000	=	-	426,680	481,680
Total Operating Revenues	1,226,356	-	7,030,000	540,270	8,796,626
NON-OPERATING REVENUES					
Other Non-Operating Revenues (List)					
Type in					-
Type in					
Type in					-
Type in					-
Type in					_
Type in					_
Other Non-Operating Revenues	-	-	-	-	
Interest on Investments & Deposits	-		a disaryamany		
Interest Earned	1,440		2,500	1,000	4,940
Penalties	,		•		
Other				_	
Total Interest	1,440	-	2,500	1,000	4,940
Total Non-Operating Revenues	1,440		2,500	1,000	4,940
TOTAL ANTICIPATED REVENUES		\$ -	\$ 7,032,500	\$ 541,270	\$ 8,801,566

Appropriations Schedule

Englewood Housing Authority

For the Period

the line item must be itemized above.

5% of Total Operating Appropriations

\$ 54,892.55 \$

January 1, 2019

to

December 31, 2019

\$ Increase

(Decrease)

% Increase

(Decrease)

		FY	2019 Propos	ed Budget		FY 2018 Adopted Budget	Proposed vs. Adopted	Proposed vs. Adopted
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations	All Operation
OPERATING APPROPRIATIONS								
Administration						and the second second	4	
Salary & Wages	187,250		237,370	119,310	\$ 543,930	\$ 547,930	\$ (4,000)	-0.79
Fringe Benefits	91,350		130,000	42,400	263,750	246,760	16,990	6.99
Legal	11,250		23,050	10,700	45,000	45,000	-	0.09
- Staff Training	2,500		6,500	1,000	10,000	10,000	-	0.09
Travel	5,000		10,200	4,800	20,000	20,000	- *	0.09
Accounting Fees	15,000		21,000	12,000	48,000	45,000	3,000	6.79
Auditing Fees	5,000		4,500	6,000	15,500	15,500	-	0.09
Miscellaneous Administration*	23,450		47,140	35,000	105,590	101,300	4,290	4.29
Total Administration	340,800	-8	479,760	231,210	1,051,770	1,031,490	20,280	2.09
Cost of Providing Services	0.0,000							
Salary & Wages - Tenant Services	30,000		12,500	14,790	57,290	55,620	1,670	3.09
Salary & Wages - Maintenance & Operation	90,530		12,300	139,540	230,070	224,460	5,610	2.59
Salary & Wages - Protective Services	30,330			133,340	230,070	224,400	5,010	#DIV/0!
	20,000				20.000	22 500	/r roo\	
Salary & Wages - Utility Labor	28,000			00.400	28,000	33,500	(5,500)	-16.49
Fringe Benefits	75,940			90,100	166,040	160,760	5,280	3.39
Tenant Services	25,000				25,000	25,000	este a desenver	0.09
Utilities	231,371			20,000	251,371	240,059	11,312	4.79
Maintenance & Operation	162,500			20,000	182,500	182,500	11 4	0.09
Protective Services					-	-	-	#DIV/0!
Insurance	62,000		18,500	7,000	87,500	85,000	2,500	2.99
Payment in Lieu of Taxes (PILOT)	36,710			9,360	46,070	44,490	1,580	3.69
Terminal Leave Payments								#DIV/0!
Collection Losses	5,000				5,000	5,000	-	0.09
Other General Expense	,,,,,,				-,	-,		#DIV/0!
Rents			6,800,000		6,800,000	6,500,000	300,000	4.69
Extraordinary Maintenance	10,000		0,000,000		10,000	10,000	500,000	0.09
Replacement of Non-Expendible Equipment	10,000				10,000	10,000		#DIV/0!
					-	-	-	. Z
Property Betterment/Additions					-	•		#DIV/0!
Miscellaneous COPS*								#DIV/0!
Total Cost of Providing Services	757,051	<u> </u>	6,831,000	300,790	7,888,841	7,566,389	322,452	4.39
Total Principal Payments on Debt Service in Lieu of								
Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXX	XXXXXXXXXX	43,853	58,112	(14,259)	-24.59
Total Operating Appropriations	1,097,851	-0	7,310,760	532,000	8,984,464	8,655,991	328,473	3.89
NON-OPERATING APPROPRIATIONS								
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	42,629	43,650	(1,021)	-2.39
Operations & Maintenance Reserve						1=	-	#DIV/0!
Renewal & Replacement Reserve	36,000				36,000	35,000	1,000	2.99
Municipality/County Appropriation						-	-	#DIV/0!
Other Reserves					-			#DIV/0!
	36,000				78,629	78,650	(21)	0.09
Total Non-Operating Appropriations					9,063,093			
TOTAL APPROPRIATIONS	1,133,851	-	7,310,760	532,000	9,063,093	8,734,641	328,452	3.89
ACCUMULATED DEFICIT							. 	#DIV/0!
TOTAL APPROPRIATIONS & ACCUMULATED								
DEFICIT	1,133,851	= 1	7,310,760	532,000	9,063,093	8,734,641	328,452	3.89
UNRESTRICTED NET POSITION UTILIZED								
Municipality/County Appropriation	-	=	<u>-</u>	· · · · · · · · · · · · · · · · · · ·	-	-		#DIV/0!
Other						72	-	#DIV/0!
Total Unrestricted Net Position Utilized					_	-		#DIV/0!
TOTAL NET APPROPRIATIONS	\$ 1,133,851	\$ -	\$ 7,310,760	\$ 532,000	\$ 9,063,093	\$ 8,734,641	\$ 328,452	3.89
I STUTE INTELLIGITATIONS	7 7722021	7 -	\$ 1,510,700	2 332,000	حوں,دناں,د دوں,دناں,د	7 0,734,041	7 320,432	5.07

26,600.00 \$

449,223.20

- \$ 365,538.00 \$

Prior Year Adopted Appropriations Schedule

Englewood Housing Authority

			FY 2018 Adopted Bu	dget	
	Public Housing				Total All
OPERATING APPROPRIATIONS	Management	Section 8	Housing Vouche	r Other Programs	Operations
Administration					
Salary & Wages	\$ 184.13	0			_
Fringe Benefits			\$ 249,27	10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	\$ 547,93
Legal	65,010		130,00	,	246,76
Staff Training	11,250		23,05	==/	45,000
Travel	2,500		6,50	1,000	10,00
Accounting Fees	5,000		10,200	4,800	20,000
Auditing Fees	14,250		20,050	/	45,000
Miscellaneous Administration*	5,000		4,500	6,000	15,500
Total Administration	23,450		47,140	30,710	101,300
Cost of Providing Services	310,590)	490,710	230,190	1,031,490
Salary & Wages - Tenant Services	-				
Salary & Wages - Maintenance & Operation	30,000		12,500	13,120	55,620
Salary & Wages - Protective Services	89,340).		135,120	224,460
Salary & Wages - Protective Services Salary & Wages - Utility Labor					,
Fringe Benefits	33,500				33,500
Tenant Services	97,510			63,250	160,760
Utilities	25,000				25,000
	220,059			20,000	240,059
Maintenance & Operation	162,500			20,000	182,500
Protective Services				20,000	102,500
Insurance	59,500		18,500	7,000	95 000
Payment in Lieu of Taxes (PILOT)	35,130		20,500	9,360	85,000
Terminal Leave Payments				3,300	44,490
Collection Losses	5,000			j	
Other General Expense					5,000
Rents			6,500,000		-
Extraordinary Maintenance	10,000		0,500,000		6,500,000
Replacement of Non-Expendible Equipment					10,000
Property Betterment/Additions	1				-
Miscellaneous COPS*					:=
Total Cost of Providing Services	767,539		C F24 000		-
Total Principal Payments on Debt Service in Lieu of		-	6,531,000	267,850	7,566,389
Depreciation	XXXXXXXXXXXXX	XXXXXXXXXXXXX	VVVVVVVVVVVVVVVVVV		
Total Operating Appropriations	1,078,129		XXXXXXXXXXXXXX	XXXXXXXXXXXXX	58,112
NON-OPERATING APPROPRIATIONS	1,078,123		7,021,710	498,040	8,655,991
Total Interest Payments on Debt	XXXXXXXXXXXX	VVVVVVVVV			
Operations & Maintenance Reserve	***************************************	XXXXXXXXXXXXXX	XXXXXXXXXXXXX	XXXXXXXXXXXXX	43,650
Renewal & Replacement Reserve	25.000				-
Municipality/County Appropriation	35,000				35,000
Other Reserves					-
Total Non-Operating Appropriations					-
TOTAL APPROPRIATIONS	35,000		-		78,650
ACCUMULATED DEFICIT	1,113,129	-	7,021,710	498,040	8,734,641
The state of the s					-,
TOTAL APPROPRIATIONS & ACCUMULATED					
DEFICIT	1,113,129	2=0	7,021,710	498,040	8,734,641
ÚNRESTRICTED NET POSITION UTILIZED				130,040	0,734,041
Municipality/County Appropriation	-	·	_		
Other					i -
Total Unrestricted Net Position Utilized	-	-			
FOTAL NET APPROPRIATIONS	\$ 1,113,129		\$ 7,021,710	\$ 498,040 \$	0.724.641
			+ 1,021,11U	\$ 498,040 \$	8,734,641

351,085.50 \$

24,902.00 \$

432,799.55

53,906.45 \$

5% of Total Operating Appropriations

Debt Service Schedule - Principal

*		Total Principal	Outstanding	25,789	-	1	992,025	992,025
				\$ c	2		Ω	\$ \$
			Thereafter	845 082	טייה מייה מייה		845,083	845,08
			2024 T	22 449	(1)		22,449	22,449 \$ 845,083 \$
			2023	21.495		Design of the second	21,495	21,495 \$
	,		7707	20.577			20,577	20,577 \$
hority	Fiscal Year Ending in		7707	19,703		0.00	19,703	19,703 \$
Englewood Housing Authority	Fisc		2020	18,865		100	18,865	18,865 \$
Englew			1					\$
		Proposed Budget Year	CTOT	25,789		270 070	43,833	43,853
		Adopted Budget	2000	40,816 17,296		1077	20,112	58,112
		Adop		ሉ				·
If Authority has no dobt X this hay	יו המנוסוונץ וומז ווס מכסר א נוווס מסאר			rifst Mortgage RAD Loan	Type in Issue Name Type in Issue Name	TOTAL BRINGINAL	LESS: HUD SUBSIDY	NET PRINCIPAL

Indicate the Authority's most	Indicate the Authority's most recent bond rating and the year of the rating by ratings service.	ar of the rating by ra	tings service.
	Moody's	Fitch	Standard & Poors
Bond Rating	N/A	N/A	N/A
Year of Last Rating			
	If no	If no Rating type in Not Applicable	Applicable

Debt Service Schedule - Interest

Englewood Housing Authority

		Total Interest	Payments Outstanding	Samuelle	956 705,331 -		706,287	706,287	
			Thereafter		468,060		468,060	468,060 \$	
			2024		37,289		37,289	37,289 \$	
			2023		38,243		38,243	38,243 \$	
			2022		39,160		39,160	39,160 \$	
ority	Fiscal Year Ending in		2021		40,034		40,034	40,034 \$	
Englewood Housing Authority	Fisc		2020		40,872		40,872	40,872 \$	
Englev								ş	
		Proposed Budget Year	2019	926	41,673		42,629	\$ 42,629	
		Adopted Budget	Year 2018	1,209	42,441		43,650	\$ 43,650	
If Authority has no debt X this box	1			First Mortgage	RAD Loan Type in Issue Name	TOTAL INTERPRET	LESS: HUD SUBSIDY	NET INTEREST	,

Net Position Reconciliation

Englewood Housing Authority For the Period

January 1, 2019

December 31, 2019 to

FY 2019 Proposed Budget

	Dublic Louising		110000		
	r upile nousing		Buisnou		Total All
	Management	Section 8	Voucher	Other Programs	Operations
TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)		÷	\$ 342,487	\$ 2,361,285	\$ 2,703,772
Less: Invested in Capital Assets, Net of Related Debt (1)				2,254,895	2,254,895
Less: Restricted for Debt Service Reserve (1)				1,209,756	1.209.756
Less: Other Restricted Net Position (1)					
Total Unrestricted Net Position (1)	1	1	342,487	(1.103.366)	(978 097)
Less: Designated for Non-Operating Improvements & Repairs				(application)	(0.0000)
Less: Designated for Rate Stabilization					
Less: Other Designated by Resolution					t
Plus: Accrued Unfunded Pension Liability (1)	=			2 092 260	ישר רטט ר
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)			611 084	2,002,200	2,032,200
Plus: Estimated Income (Loss) on Current Vear Operations (2)		(*)	40,404	/11,016	T07'676'T
Plus: Other Adjustments (attach schedule)			TO, / 30	56,135	66,925
					,
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	ť		964.361	1,963,146	2 927 507
Unrestricted Net Position Utilized to Balance Proposed Budget	1	ı	,	OL H (COO)	4,024,000
Unrestricted Net Position Utilized in Proposed Capital Budget		1	1	i	t
Appropriation to Municipality/County (2)				·	
					1
lotal Unrestricted Net Position Utilized in Proposed Budget	t	•		1	1
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR					
(4)	٠	÷	\$ 964,361 \$		1,963,146 \$ 2,927,507
	The state of the s				

26,600 \$ 449,223 (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 \$ 365,538 \$ deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section. 54,893 \$ Maximum Allowable Appropriation to Municipality/County

⁽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.

2019 ENGLEWOOD HOUSING AUTHORITY

(Name)

HOUSING
AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2019 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

ENGLEWOOD HOUSING AUTHORITY (Name)

TO:12/31/2019

FROM:1/1/2019

FISCAL

YEAR:

	Budget/Program approved	l, pursuant to N.J	udget/Program annexed hereto (A.C. 5:31-2.2, along with the thority, on the29
	O	R	
	tal Budget /Program for		Housing Authority have cal year, pursuant to N.J.A.C.
	0		
Officer's Signature:	aning de	nande	
Name:	Domingo Senande		
Title:	Executive Director		
Address:	111 West Street, Englev	vood, NJ 07631	
Phone Number:	201-871-3451	Fax Number:	201-871-5908
F-mail address	dsenande@ehahousing	ora	

2019 CAPITAL BUDGET/PROGRAM MESSAGE

Englewood Housing Authority

(Name)

FISCAL YEAR:

FROM:1/1/2019

TO:12/31/2019

This section is included in the Capital Budget pursuant to N.J.A.C. 5:31-2. It does not in itself confer any authorization to raise or expend funds. Rather, it is a document used as part of the Housing Authority's planning and management system. Specific authorization to spend funds for purposes described in this section must be granted elsewhere, by a separate financing agreement, security agreement, by resolution appropriating funds from the Renewal and Replacement Reserve, or other lawful means.

- 1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority?

 No
- 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? Yes
- 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 on tenant charges. They are primarily based on HUD formula.
- 6. Have the projects been reviewed and approved by HUD? Yes.

Add additional sheets if necessary.

5 Year Capital Improvement Plan

Englewood Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

Fiscal Year Beginning in

	Estin	nated Total Cost		t Budget 2019	2020	2021	2022	2023	2024
Public Housing Management									
Various	\$	117,065	\$	12,269	\$ 33,588	\$ 16,000	\$ 13,213	\$ 20,995	\$ 21,000
Type in Description		-		-					
 Type in Description 		-		-					
Type in Description				=					
Total		117,065		12,269	33,588	16,000	13,213	20,995	21,000
Section 8									
Type in Description		-		-					
Type in Description		-		-					
Type in Description				=					
Type in Description		_		-					
Total		-		-	~	-	-	-	-
Housing Voucher									
Type in Description		-		-					
Type in Description		-							
Type in Description		-		-					
Type in Description		_		-					
Total		-		=	=	=	=		-
Other Programs			1						
Type in Description		-		-					
Type in Description		-		-					
Type in Description		_		-					
Type in Description		49		-					
Total		_		-	-	-	-	-	_
TOTAL	\$	117,065	\$	12,269	\$ 33,588	\$ 16,000	\$ 13,213	\$ 20,995	\$ 21,000

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

Englewood Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

				Fu	nding Sources		
				Renewal &			
	Estir	nated Total	Unrestricted Net	Replacement	Debt		
		Cost	Position Utilized	Reserve	Authorization	Capital Grants	Other Sources
Public Housing Management							
Various	\$	117,065		\$ 117,065			
Type in Description		Ħ					
Type in Description		-					
Type in Description	_						
Total		117,065	_	117,065	-	-	-
Section 8						7 100	
Type in Description		-					
Type in Description		_					
Type in Description		-					
Type in Description		-					
Total		-		-	_	-	-
Housing Voucher							
Type in Description		1-1		-			
Type in Description		(-					
Type in Description		2.					
Type in Description		_					
Total		-		_	-	-	_
Other Programs							
Type in Description		-					
Type in Description		; -					
Type in Description		:-					
Type in Description							
Total		-	_	-	-		-
TOTAL	\$	117,065	\$ -	\$ 117,065	\$ -	\$ -	\$ -
Total 5 Year Plan per CB-4	\$	117,065					
Balance check		- If	amount is other than zer	ro, verify that proje	ects listed above n	natch projects listo	ed 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.

Proposed Capital Budget

Englewood Housing Authority

For the Period

January 1, 2019

to

December 31, 2019

			Funding Sources				
				&	· ·		
	Estimated Total Cost		Unrestricted Net	Replaceme	ent Debt	Capital Grants	Other Sources
			Position Utilized	Reserve	Authorization		
Public Housing Management	_			-			
Various	\$	12,269		\$ 12,	269		
Type in Description		-					
Type in Description		-	1				
Type in Description		-					
Total		12,269	-	12,	269 -	-	
Section 8		-					
Type in Description		-					
Type in Description		-					
Type in Description		-					
Type in Description		-					
Total		-	-			-	=
Housing Voucher							
Type in Description		-					
Type in Description		-					
Type in Description		=					I
Type in Description							
Total	T		_			-	_
Other Programs	_						
Type in Description		-					
Type in Description		-					
Type in Description		-					
Type in Description							
Total			-			-	-
TOTAL PROPOSED CAPITAL BUDGET	\$	12,269	\$ -	\$ 12,2	269 \$ -	\$ -	\$ -

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