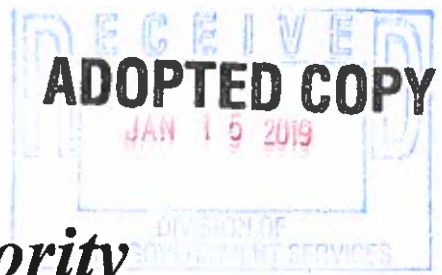


*Authority Budget of:*



*Franklin Housing Authority*

**State Filing Year**

**2018**

*For the Period:*

*October 1, 2018*

*to*

*September 30, 2019*



**RECEIVED**  
JAN 22 2019

BY .....

[www.hsauthority.com](http://www.hsauthority.com)

Authority Web Address

**Department Of**



**Community  
Affairs**

*Division of Local Government Services*

# **2018 HOUSING AUTHORITY BUDGET**

## **Certification Section**

2018

Franklin

**HOUSING AUTHORITY BUDGET**

FISCAL YEAR: FROM October 1, 2018 TO September 30, 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 N.J.S.A. 40A:5A-11.*

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

By: Paul D. Cwert CPA, RMA Date: 11/2/2018

**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. Cwert CPA, RMA Date: 11/16/2018

# 2018 PREPARER'S CERTIFICATION


Franklin

## HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/2018 TO: 9/30/19

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

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

Preparer's Signature:			
Name:	David W. Ciarrocca		
Title:	C.P.A.		
Address:	1930 Wood Road Scotch Plains, N.J. 07076		
Phone Number:	732-591-2300	Fax Number:	732-591-2525
E-mail address	davidciarroccacpa@gmail.com		

# 2018 APPROVAL CERTIFICATION


## Franklin

### HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19

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 Franklin Housing Authority, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 10th 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:			
Name:	John Clarke		
Title:	Acting Executive Director		
Address:	25 Parkside Street Somerset, N.J. 08873		
Phone Number:	732-545-9430	Fax Number:	732-545-3667
E-mail address	Ed@ftha.org		

# INTERNET WEBSITE CERTIFICATION

Authority's Web Address: ftha.org

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

- A description of the Authority's mission and responsibilities
- Commencing with 2017, the budgets for the current fiscal year and immediately preceding two prior years
- The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information
- Commencing with 2016, the complete annual audits of the most recent fiscal year and immediately two prior years
- The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- Beginning January 1, 2016, the approved minutes of each meeting of the Authority including all resolutions of the board and their committees, for at least three consecutive fiscal years
- The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

It is hereby certified by the below authorized representative of the Authority that the Authority's website or webpage as identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as listed above. A check in each of the above boxes signifies compliance.

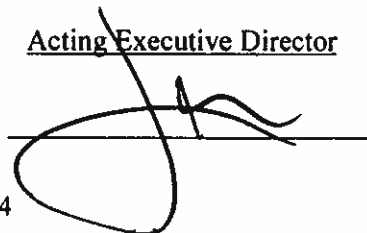
Name of Officer Certifying compliance

John Clarke

Title of Officer Certifying compliance

Acting Executive Director

Signature



# 2018 HOUSING AUTHORITY BUDGET RESOLUTION

## Franklin

**FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19**

WHEREAS, the Annual Budget and Capital Budget for the Franklin Housing Authority for the fiscal year beginning, 10/1/18 and ending, 9/30/19 has been presented before the governing body of the Franklin Housing Authority at its open public meeting of October 10, 2018; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$2,749,511, Total Appropriations, including any Accumulated Deficit if any, of \$2,582,912 and Total Unrestricted Net Position utilized of \$ 0; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$269,148 and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$ 0 and

WHEREAS, the schedule of rents, fees and other charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Franklin Housing Authority, at an open public meeting held on October 10, 2018 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Franklin Housing Authority for the fiscal year beginning, 10/1/18 and ending, 9/30/19 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Housing Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and

BE IT FURTHER RESOLVED, that the governing body of the Franklin Housing Authority will consider the Annual Budget and Capital Budget/Program for adoption on December 12, 2018.

\_\_\_\_\_  
(Secretary's Signature) 10/10/18  
\_\_\_\_\_  
(Date)

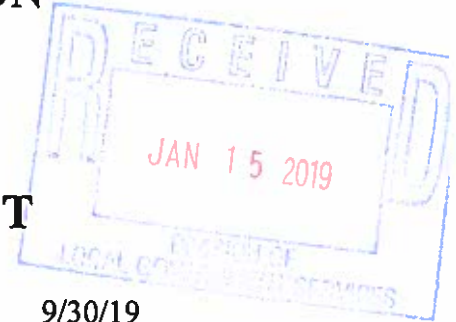
Governing Body Member:	Recorded Vote			
	<u>Aye</u>	<u>Nay</u>	<u>Abstain</u>	<u>Absent</u>
Ike Agudosi	✓			
Michael F. Gianotto	✓			
Shanel Robinson	✓			
Anthony Minick				✓
Agnes Kulu-Banya	✓			
Dennis Sander				✓
Russell Demkovitz	✓			

# 2018 ADOPTION CERTIFICATION

## FRANKLIN

### HOUSING AUTHORITY BUDGET

FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19



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 Franklin Housing Authority, pursuant to N.J.A.C. 5:31-2.3, on the 9<sup>th</sup> day of, *January, 2019*

Officer's Signature:			
Name:	John Clarke		
Title:	Acting Executive Director		
Address:	25 Parkside Street Somerset, N.J. 08873		
Phone Number:	732-545-9430	Fax Number:	732-545-3667
E-mail address	Ed@tnha.org		



# 2018 ADOPTED BUDGET RESOLUTION

## FRANKLIN HOUSING AUTHORITY

**FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19**

WHEREAS, the Annual Budget and Capital Budget/Program for the Franklin Housing Authority for the fiscal year beginning October 1, 2018 and ending, September 30, 2019 has been presented for adoption before the governing body of the Franklin Housing Authority at its open public meeting of January 9, 2019 and

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

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$2,749,511, Total Appropriations, including any Accumulated Deficit, if any, of \$2,582,912 and Total Unrestricted Net Position utilized of \$0; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$269,148 and Total Unrestricted Net Position planned to be utilized of \$0; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Franklin Housing Authority, at an open public meeting held on January 9, 2019 that the Annual Budget and Capital Budget/Program of the Franklin Housing Authority for the fiscal year beginning, October 1, 2018 and, ending, September 30, 2019 is hereby adopted and shall constitute appropriations for the purposes stated; and

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

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

1/9/19  
\_\_\_\_\_  
(Date)

Governing Body Member:	Recorded Vote			
	Aye	Nay	Abstain	Absent
Ike Agudosi	✓			✓
Michael F. Gianotto	✓			
Shanel Robinson	✓			
Anthony Minick	✓			
Agnes Kulu-Banya	✓			✓
Dennis Sanders				
Russell Demkovitz	✓			

# **2018 HOUSING AUTHORITY BUDGET**

## **Narrative and Information Section**

**2018 HOUSING AUTHORITY BUDGET MESSAGE &  
ANALYSIS  
Franklin Housing Authority**

**AUTHORITY BUDGET**

**FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19**

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

- 1. Complete a brief statement on the 2018/2018-2019 proposed Annual Budget and make comparison to the 2017/2017-2018 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide documentation of how the increase occurred (Example Rate Increase authorized by resolution or by HUD). See attached.**
- 2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. See attached.**
- 3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. N/A**
- 4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. N/A**
- 5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). N/A**
- 6. The proposed budget must not reflect an anticipated deficit from 2018/2018-2019 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) The Authority will plan on funding yearly pension bills annually and by doing so the deficit over time will be eliminated.**

## HOUSING AUTHORITY CONTACT INFORMATION 2018

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

<b>Name of Authority:</b>	Franklin Housing Authority		
<b>Federal ID Number:</b>	22-6015315		
<b>Address:</b>	25 Parkside Street		
<b>City, State, Zip:</b>	Somerset	N.J.	08873
<b>Phone: (ext.)</b>	(732)545-9430	<b>Fax:</b>	(732)545-3667

<b>Preparer's Name:</b>	David W. Ciarrocca, C.P.A., LLC		
<b>Preparer's Address:</b>	1930 Wood Road		
<b>City, State, Zip:</b>	Scotch Plains	N.J.	07076
<b>Phone: (ext.)</b>	(732)591-2300	<b>Fax:</b>	(732)591-2525
<b>E-mail:</b>	davidciarroccacpa@gmail.com		

<b>Chief Executive Officer:</b>	John Clarke		
<b>Phone: (ext.)</b>	(732)545-9430	<b>Fax:</b>	(732)545-3667
<b>E-mail:</b>	Ed@tnha.org		

<b>Chief Financial Officer:</b>	N/A		
<b>Phone: (ext.)</b>		<b>Fax:</b>	
<b>E-mail:</b>			

<b>Name of Auditor:</b>	Richard M. Larsen		
<b>Name of Firm:</b>	Novogradac & Company		
<b>Address:</b>	14330 Hooper Road Suite 329		
<b>City, State, Zip:</b>	Toms River	N.J.	08753
<b>Phone: (ext.)</b>	(732)503-4257	<b>Fax:</b>	(732)341-1424
<b>E-mail:</b>	r.larsen@novoco.com		

# HOUSING AUTHORITY INFORMATIONAL QUESTIONNAIRE

## Franklin Housing Authority

**FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19**

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

- 1) Provide the number of individuals employed in (Use Most Recent W-3 Available 2016 or 2017) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 2
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2016 or 2017) Transmittal of Wage and Tax Statements: \$105,712
- 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? 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, 2017 or 2018 deadline has passed 2017 or 2018) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at <http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html> before answering) Yes *If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.*
- 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No *If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority.*
- 8) Was the Authority a party to a business transaction with one of the following parties:
  - a. A current or former commissioner, officer, key employee, or highest compensated employee? No
  - b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No
  - c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? No

*If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.*

- 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. No *If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.*

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

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

**FRANKLIN HOUSING AUTHORITY**

**FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19**

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

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's former officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's former commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.

**Commissioner:** A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.

**Officer:** A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.

**Key employee:** An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:

- a) The individual received reportable compensation from the authority and all other public entities in excess of \$150,000 for the most recent fiscal year completed; and
- b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.

**Highest compensated employee:** One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.

**Compensation:** All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.

**Reportable compensation:** The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2018, the calendar year 2016 W-2 and 1099 should be used (60 days prior to start of budget year is November 1, 2017, with 2016 being the most recent calendar year ended), and for fiscal years ending June 30, 2018, the calendar year 2017 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2018, with 2017 being the most recent calendar year ended).

**Other Public Entity:** Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

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

For the Period October 1, 2018 to October 30, 2019  
 Franklin Housing Authority  
 September 30, 2019

Name	Title	Average Hours per Week Dedicated to Position	Position	Reportable Compensation from Authority (W-2/ 1099)		Estimated amount of other compensation from Authority (health benefits, pension, etc.)	Total Compensation from Authority	Names of Other Public Entities where Individual is an Employee or Member of the Governing Body (2) See note below	Positions held at Other Public Entities Listed in Column O	Average Hours per Week Dedicated to Positions at Other Public Entities Listed in Column O	Reportable Compensation from Other Public Entities (W-2/ 1099)	Estimated amount of other compensation from Other Public Entities (health benefits, pension, payment in lieu of health benefits, etc.)	Total Compensation All Public Entities
				Base Salary/ Stipend	Other (auto allowance, expense account, payment in lieu of health benefits, etc.)								
1 Tina Adams	Asst. Director		Commissioner	\$77,922			\$77,922						97,922
2 Ike Agudosi	Chairman		X				0 None						0
3 Michael Gianotto	Commissioner		X				0 None						0
4 Shanel Robinson	Commissioner		X				0 Franklin Twp.	Couchwoman	6	9,360	0		9,360
5 Anthony Minick	Commissioner		X				0 State of N.J.	Travel Director	40	130,977	42,000		152,977
6 Agnes Kallu-Banya	Commissioner		X				0 N.J. Retired	Retired					0
7 Dennis Sanders	Commissioner		X				0 None						0
8 Russell Demkovitz	Commissioner		X				0 None						0
9													0
10													0
11													0
12													0
13													0
14													0
15													0
<b>Total:</b>					\$77,922	\$ -	\$77,922			\$120,337	\$42,000	\$260,259	

(2) 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

Franklin Housing Authority  
 For the Period October 1, 2018 to September 30, 2019

	# of Covered Members (Medical & Rx)		Annual Cost Estimate per Employee Proposed Budget		Total Cost Estimate Proposed Budget		# of Covered Members (Medical & Rx) Current Year		Annual Cost per Employee Current Year		Total Prior Year Cost	\$ Increase (Decrease)	% Increase (Decrease)
	Proposed Budget	Current Year	Proposed Budget	Current Year	Proposed Budget	Current Year	Current Year	Current Year					
<b>Active Employees - Health Benefits - Annual Cost</b>													
Single Coverage	2		\$ 13,727		\$ 27,454		2		\$ 13,073		\$ 26,146	\$ 1,308	5.0%
Parent & Child													#DIV/0!
Employee & Spouse (or Partner)													#DIV/0!
Family													#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)					2,976						2,835	141	5.0%
<b>Subtotal</b>	<b>2</b>				<b>30,430</b>		<b>2</b>				<b>28,981</b>	<b>1,449</b>	<b>5.0%</b>
<b>Commissioners - Health Benefits - Annual Cost</b>													
Single Coverage													#DIV/0!
Parent & Child													#DIV/0!
Employee & Spouse (or Partner)													#DIV/0!
Family													#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)													#DIV/0!
<b>Subtotal</b>	<b>0</b>						<b>0</b>						<b>#DIV/0!</b>
<b>Retirees - Health Benefits - Annual Cost</b>													
Single Coverage													#DIV/0!
Parent & Child													#DIV/0!
Employee & Spouse (or Partner)													#DIV/0!
Family													#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)													#DIV/0!
<b>Subtotal</b>	<b>0</b>						<b>0</b>						<b>#DIV/0!</b>
<b>GRAND TOTAL</b>	<b>2</b>				<b>\$ 30,430</b>		<b>2</b>				<b>\$ 28,981</b>	<b>\$ 1,449</b>	<b>5.0%</b>

Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	Yes	Yes or No
Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)	Yes	Yes or No

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

# Schedule of Accumulated Liability for Compensated Absences

Franklin Housing Authority  
 For the Period October 1, 2018 to September 30, 2019

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

Individuals Eligible for Benefit	Gross Days of Accumulated Compensated Absences at beginning of Current Year	Dollar Value of Accrued Compensated Absence Liability	Approved Labor Agreement	Resolution	Individual Employment Agreement
<i>Legal Basis for Benefit (check applicable items)</i>					
See Attached					
<b>Total liability for accumulated compensated absences at beginning of current year \$</b>		<b>-</b>			

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

**FRANKLIN HOUSING AUTHORITY**  
**CALCULATION OF COMPENSATED ABSENCES**  
**F.Y.E. 9/30/17**

**G/L ACCT# 2135**

ANNUAL SALARY	EMPLOYEE	*DAILY RATE	**VACATION DAYS	TOTAL VACATION ACCRUAL	***SICK DAYS	TOTAL SICK ACCRUAL	TOTAL ACCRUED LEAVE
\$ 71,000	T.ADAMS	\$ 273.08	50.00	\$ 13,654.00	175.00	\$ 15,000.00	28,654.00
\$ 32,960	T. WILLIAMS	\$ 126.77	3.50	\$ 444.00	0.00	\$ -	444.00
N/A	H. DAVIS	\$ 452.96	3.00	1,359.00	129.75	15,000.00	16,359.00

TOTAL	\$ 15,457.00	\$ 30,000.00	\$ 45,457.00
TIMES FICA RATE	1.0765	1.0765	1.0765
TOTAL ACCRUED LEAVE	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	<u>\$ 48,934.00</u>
CURRENT	\$ 16,639.00	\$ 3,230.00	
NON-CURRENT	-	29,065.00	
TOTAL	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	
PHA	\$ 4,160.00	\$ 8,074.00	\$ 12,234.00
SECTION 8	12,479.00	24,221.00	36,700.00
TOTAL	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	<u>\$ 48,934.00</u>

\* BASED ON 260 WORK DAYS

\*\* VACATION DAYS ARE CAPPED AT 50 AS PER THE PERSONEL POLICY.

\*\*\*SICK DAYS CAPPED AT 250 AS PER POLICY OR \$15,000 WHICHEVER IS LOWER.

# Schedule of Shared Service Agreements

For the Period Franklin Housing Authority September 30, 2019  
 October 1, 2018 to

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

Name of Entity Providing Service	Name of Entity Receiving Service	Type of Shared Service Provided	Comments (Enter more specifics if needed)	Agreement Effective Date	Agreement End Date	Amount to be Received by/ Paid from Authority
New Brunswick Housing Authority	Franklin Housing Authority	Management Services		10/1/2016	Perpetual	\$ 85,000

If No Shared Services X this Box

**2018 HOUSING AUTHORITY BUDGET**

**Financial Schedules Section**

# SUMMARY

For the Period **Franklin Housing Authority** to **September 30, 2019**  
**October 1, 2018**

	<b>FY 2018 Proposed Budget</b>					<b>FY 2017 Adopted Budget</b>		<b>\$ Increase (Decrease) Proposed vs. Adopted</b>	<b>% Increase (Decrease) Proposed vs. Adopted</b>
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations		
	285,711	-	2,430,000	25,000	2,740,711	2,574,840	165,871		
<b>REVENUES</b>									
Total Operating Revenues	\$ 285,711	\$ -	\$ 2,430,000	\$ 25,000	\$ 2,740,711	\$ 2,574,840	\$ 165,871	6.4%	
Total Non-Operating Revenues	4,800	-	4,000	-	8,800	2,700	6,100	225.9%	
Total Anticipated Revenues	290,511	-	2,434,000	25,000	2,749,511	2,577,540	171,971	6.7%	
<b>APPROPRIATIONS</b>									
Total Administration	116,428	-	267,984	25,000	409,412	385,848	23,564	6.1%	
Total Cost of Providing Services	8,100	-	2,165,400	-	2,173,500	2,172,900	600	0.0%	
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-	-	-	#DIV/0!	
Total Operating Appropriations	124,528	-	2,433,384	25,000	2,582,912	2,558,748	24,164	0.9%	
Total Interest Payments on Debt	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	-	-	-	#DIV/0!	
Total Other Non-Operating Appropriations	-	-	-	-	-	-	-	#DIV/0!	
Total Non-Operating Appropriations	-	-	-	-	-	-	-	#DIV/0!	
Accumulated Deficit	-	-	-	-	-	-	-	#DIV/0!	
Total Appropriations and Accumulated Deficit	124,528	-	2,433,384	25,000	2,582,912	2,558,748	24,164	0.9%	
Less: Total Unrestricted Net Position Utilized	-	-	-	-	-	(18,792)	18,792	-100.0%	
Net Total Appropriations	124,528	-	2,433,384	25,000	2,582,912	2,577,540	5,372	0.2%	
<b>ANTICIPATED SURPLUS (DEFICIT)</b>	\$ 165,983	\$ -	\$ 616	\$ -	\$ 166,599	\$ -	\$ 166,599	#DIV/0!	

## Revenue Schedule

### Franklin Housing Authority

For the Period      October 1, 2018      to      September 30, 2019

	<b>FY 2018 Proposed Budget</b>				<b>FY 2017 Adopted Budget</b>	<b>Proposed vs. Adopted</b>	<b>Proposed vs. Adopted</b>	
	<b>Public Housing Management</b>	<b>Section 8</b>	<b>Housing Voucher</b>	<b>Other Programs</b>	<b>Total All Operations</b>	<b>Total All Operations</b>	<b>All Operations</b>	
					<b>Total All Operations</b>	<b>All Operations</b>	<b>All Operations</b>	
<b>OPERATING REVENUES</b>								
<i>Rental Fees</i>								
Homebuyers' Monthly Payments					\$ -	\$ -	\$ -	#DIV/0!
Dwelling Rental					-	-	-	#DIV/0!
Excess Utilities					-	-	-	#DIV/0!
Non-Dwelling Rental					-	-	-	#DIV/0!
HUD Operating Subsidy	16363				16,363	15,840	523	3.3%
New Construction - Acc Section 8					-	-	-	#DIV/0!
Voucher - Acc Housing Voucher					2,360,000	2,375,000	(15,000)	-0.6%
<b>Total Rental Fees</b>	<b>16,363</b>	<b>-</b>	<b>2,360,000</b>	<b>-</b>	<b>2,376,363</b>	<b>2,390,840</b>	<b>(14,477)</b>	<b>-0.6%</b>
<i>Other Operating Revenues (List)</i>								
C.F.P. Operations	269348				269,348	85,000	184,348	216.9%
Port-In Fees/Fraud Recovery			70000		70,000	74,000	(4,000)	-5.4%
Business Activities				25000	25,000	25,000	-	0.0%
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
Type In (Grant, Other Rev)					-	-	-	#DIV/0!
<b>Total Other Revenue</b>	<b>269,348</b>	<b>-</b>	<b>70,000</b>	<b>25,000</b>	<b>364,348</b>	<b>184,000</b>	<b>180,348</b>	<b>98.0%</b>
<b>Total Operating Revenues</b>	<b>285,711</b>	<b>-</b>	<b>2,430,000</b>	<b>25,000</b>	<b>2,740,711</b>	<b>2,574,840</b>	<b>165,871</b>	<b>6.4%</b>
<b>NON-OPERATING REVENUES</b>								
<i>Other Non-Operating Revenues (List)</i>								
Type In					-	-	-	#DIV/0!
Type In					-	-	-	#DIV/0!
Type In					-	-	-	#DIV/0!
Type In					-	-	-	#DIV/0!
Type In					-	-	-	#DIV/0!
<b>Total Other Non-Operating Revenue</b>					<b>-</b>	<b>-</b>	<b>-</b>	<b>#DIV/0!</b>
<i>Interest on Investments &amp; Deposits (List)</i>								
Interest Earned	4,800			4,000	8,800	2,700	6,100	225.9%
Penalties					-	-	-	#DIV/0!
Other					-	-	-	#DIV/0!
<b>Total Interest</b>	<b>4,800</b>	<b>-</b>	<b>4,000</b>	<b>-</b>	<b>8,800</b>	<b>2,700</b>	<b>6,100</b>	<b>225.9%</b>
<b>Total Non-Operating Revenues</b>	<b>4,800</b>	<b>-</b>	<b>4,000</b>	<b>-</b>	<b>8,800</b>	<b>2,700</b>	<b>6,100</b>	<b>225.9%</b>
<b>TOTAL ANTICIPATED REVENUES</b>	<b>\$ 290,511</b>	<b>\$ -</b>	<b>\$ 2,434,000</b>	<b>\$ 25,000</b>	<b>\$ 2,749,511</b>	<b>\$ 2,577,540</b>	<b>\$ 171,971</b>	<b>6.7%</b>

# Prior Year Adopted Revenue Schedule

## Franklin Housing Authority

### FY 2017 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>OPERATING REVENUES</b>					
<i>Rental Fees</i>					
Homebuyers' Monthly Payments					\$ -
Dwelling Rental					-
Excess Utilities					-
Non-Dwelling Rental					-
HUD Operating Subsidy	15,840				15,840
New Construction - Acc Section 8 Voucher - Acc Housing Voucher					-
			2,375,000		2,375,000
<b>Total Rental Fees</b>	<b>15,840</b>	-	<b>2,375,000</b>	-	<b>2,390,840</b>
<i>Other Revenue (List)</i>					
C.F.P. Operations	85,000				85,000
Port-In Fees/Fraud Recovery			74,000		74,000
Business Activities				25,000	25,000
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
Type in (Grant, Other Rev)					-
<b>Total Other Revenue</b>	<b>85,000</b>	-	<b>74,000</b>	<b>25,000</b>	<b>184,000</b>
<b>Total Operating Revenues</b>	<b>100,840</b>	-	<b>2,449,000</b>	<b>25,000</b>	<b>2,574,840</b>
<b>NON-OPERATING REVENUES</b>					
<i>Other Non-Operating Revenues (List)</i>					
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
Type in					-
<b>Other Non-Operating Revenues</b>	-	-	-	-	-
<i>Interest on Investments &amp; Deposits</i>					
Interest Earned	1,200		1,500		2,700
Penalties					-
Other					-
<b>Total Interest</b>	<b>1,200</b>	-	<b>1,500</b>	-	<b>2,700</b>
<b>Total Non-Operating Revenues</b>	<b>1,200</b>	-	<b>1,500</b>	-	<b>2,700</b>
<b>TOTAL ANTICIPATED REVENUES</b>	<b>\$ 102,040</b>	<b>\$ -</b>	<b>\$ 2,450,500</b>	<b>\$ 25,000</b>	<b>\$ 2,577,540</b>



# Appropriations Schedule

Franklin Housing Authority  
For the Period October 1, 2018 to September 30, 2019

	<b>FY 2018 Proposed Budget</b>				<b>FY 2017 Adopted Budget</b>	<b>\$ Increase (Decrease) Proposed vs. Adopted</b>	<b>% Increase (Decrease) Proposed vs. Adopted</b>
	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations	Total All Operations	All Operations All Operations
<b>OPERATING APPROPRIATIONS</b>							
<i>Administration</i>							
Salary & Wages	29,678		89,034		\$ 118,712	\$ 109,048	\$ 9,664 8.9%
Fringe Benefits	30,200		45,300		75,500	69,300	6,200 8.9%
Legal	11,000		11,000		22,000	20,000	2,000 10.0%
Staff Training	1,250		3,750		5,000	5,000	- 0.0%
Travel	1,250		3,750		5,000	5,000	- 0.0%
Accounting Fees	5,250		15,750		21,000	20,000	1,000 5.0%
Auditing Fees	5,000		5,000		10,000	9,400	600 6.4%
Miscellaneous Administration*	32,800		94,400	25,000	152,200	148,100	4,100 2.8%
<b>Total Administration</b>	<b>116,428</b>	<b>-</b>	<b>267,984</b>	<b>25,000</b>	<b>409,412</b>	<b>385,848</b>	<b>23,564 6.1%</b>
<i>Cost of Providing Services</i>							
Salary & Wages - Tenant Services					-	-	#DIV/0!
Salary & Wages - Maintenance & Operation					-	-	#DIV/0!
Salary & Wages - Protective Services					-	-	#DIV/0!
Salary & Wages - Utility Labor					-	-	#DIV/0!
Fringe Benefits					-	-	#DIV/0!
Tenant Services					-	-	#DIV/0!
Utilities	4,000				4,000	4,000	0.0%
Maintenance & Operation	700				700	700	0.0%
Protective Services					-	-	#DIV/0!
Insurance	3,400		3,400		6,800	6,200	600 9.7%
Payment in Lieu of Taxes (PILOT)					-	-	#DIV/0!
Terminal Leave Payments					-	-	#DIV/0!
Collection Losses					-	-	#DIV/0!
Other General Expense			12,000		12,000	12,000	0.0%
Rents			2,150,000		2,150,000	2,150,000	0.0%
Extraordinary Maintenance					-	-	#DIV/0!
Replacement of Non-Expendible Equipment					-	-	#DIV/0!
Property Betterment/Additions					-	-	#DIV/0!
Miscellaneous COPS*					-	-	#DIV/0!
<b>Total Cost of Providing Services</b>	<b>8,100</b>	<b>-</b>	<b>2,165,400</b>	<b>-</b>	<b>2,173,500</b>	<b>2,172,900</b>	<b>600 0.0%</b>
Total Principal Payments on Debt Service in Lieu of Depreciation	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	#DIV/0!
<b>Total Operating Appropriations</b>	<b>124,528</b>	<b>-</b>	<b>2,433,384</b>	<b>25,000</b>	<b>2,582,912</b>	<b>2,558,748</b>	<b>24,164 0.9%</b>
<b>NON-OPERATING APPROPRIATIONS</b>							
Total Interest Payments on Debt	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	XXXXXXXXXX	-	-	#DIV/0!
Operations & Maintenance Reserve					-	-	#DIV/0!
Renewal & Replacement Reserve					-	-	#DIV/0!
Municipality/County Appropriation					-	-	#DIV/0!
Other Reserves					-	-	#DIV/0!
<b>Total Non-Operating Appropriations</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>TOTAL APPROPRIATIONS</b>	<b>124,528</b>	<b>-</b>	<b>2,433,384</b>	<b>25,000</b>	<b>2,582,912</b>	<b>2,558,748</b>	<b>24,164 0.9%</b>
<b>ACCUMULATED DEFICIT</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>TOTAL APPROPRIATIONS &amp; ACCUMULATED DEFICIT</b>	<b>124,528</b>	<b>-</b>	<b>2,433,384</b>	<b>25,000</b>	<b>2,582,912</b>	<b>2,558,748</b>	<b>24,164 0.9%</b>
<b>UNRESTRICTED NET POSITION UTILIZED</b>							
Municipality/County Appropriation					-	-	#DIV/0!
Other					-	(18,792)	18,792 -100.0%
<b>Total Unrestricted Net Position Utilized</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(18,792)</b>	<b>18,792 -100.0%</b>
<b>TOTAL NET APPROPRIATIONS</b>	<b>\$ 124,528</b>	<b>\$ -</b>	<b>\$ 2,433,384</b>	<b>\$ 25,000</b>	<b>\$ 2,582,912</b>	<b>\$ 2,577,540</b>	<b>\$ 5,372 0.2%</b>

\* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations      \$ 6,226.40      \$ -      \$ 121,669.20      \$ 1,250.00      \$ 129,145.60

## Prior Year Adopted Appropriations Schedule

Franklin Housing Authority

FY 2017 Adopted Budget

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>OPERATING APPROPRIATIONS</b>					
<i>Administration</i>					
Salary & Wages	\$ 27,262		\$ 81,786		\$ 109,048
Fringe Benefits	6,930		62,370		69,300
Legal	5,000		15,000		20,000
Staff Training	1,250		3,750		5,000
Travel	1,250		3,750		5,000
Accounting Fees	5,000		15,000		20,000
Auditing Fees	4,700		4,700		9,400
Miscellaneous Administration*	30,775		92,325	25,000	148,100
<b>Total Administration</b>	<b>82,167</b>	-	<b>278,681</b>	<b>25,000</b>	<b>385,848</b>
<i>Cost of Providing Services</i>					
Salary & Wages - Tenant Services					-
Salary & Wages - Maintenance & Operation					-
Salary & Wages - Protective Services					-
Salary & Wages - Utility Labor					-
Fringe Benefits					-
Tenant Services					-
Utilities	4,000				4,000
Maintenance & Operation	700				700
Protective Services					-
Insurance	1,550		4,650		6,200
Payment in Lieu of Taxes (PILOT)					-
Terminal Leave Payments					-
Collection Losses					-
Other General Expense			12,000		12,000
Rents			2,150,000		2,150,000
Extraordinary Maintenance					-
Replacement of Non-Expendible Equipment					-
Property Betterment/Additions					-
Miscellaneous COPS*					-
<b>Total Cost of Providing Services</b>	<b>6,250</b>	-	<b>2,166,650</b>	-	<b>2,172,900</b>
<b>Total Principal Payments on Debt Service in Lieu of Depreciation</b>	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
<b>Total Operating Appropriations</b>	<b>88,417</b>	-	<b>2,445,331</b>	<b>25,000</b>	<b>2,558,748</b>
<b>NON-OPERATING APPROPRIATIONS</b>					
Total Interest Payments on Debt	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	XXXXXXXXXXXXXX	-
Operations & Maintenance Reserve					-
Renewal & Replacement Reserve					-
Municipality/County Appropriation					-
Other Reserves					-
<b>Total Non-Operating Appropriations</b>	-	-	-	-	-
<b>TOTAL APPROPRIATIONS</b>	<b>88,417</b>	-	<b>2,445,331</b>	<b>25,000</b>	<b>2,558,748</b>
<b>ACCUMULATED DEFICIT</b>					-
<b>TOTAL APPROPRIATIONS &amp; ACCUMULATED DEFICIT</b>	<b>88,417</b>	-	<b>2,445,331</b>	<b>25,000</b>	<b>2,558,748</b>
<b>UNRESTRICTED NET POSITION UTILIZED</b>					
Municipality/County Appropriation					-
Other	(13,623)		(5,169)		(18,792)
<b>Total Unrestricted Net Position Utilized</b>	<b>(13,623)</b>	-	<b>(5,169)</b>	-	<b>(18,792)</b>
<b>TOTAL NET APPROPRIATIONS</b>	<b>\$ 102,040</b>	<b>\$ -</b>	<b>\$ 2,450,500</b>	<b>\$ 25,000</b>	<b>\$ 2,577,540</b>

\* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations	\$ 4,420.85	\$ -	\$ 122,266.55	\$ 1,250.00	\$ 127,937.40
--------------------------------------	-------------	------	---------------	-------------	---------------

# Debt Service Schedule - Principal

Franklin Housing Authority

If Authority has no debt X this box

X

	Fiscal Year Ending in							
	Proposed Budget Year 2018	2019	2020	2021	2022	2023		Thereafter
Type in Issue Name								\$
Type in Issue Name								
Type in Issue Name								
Type in Issue Name								
<b>TOTAL PRINCIPAL</b>	-	-	-	-	-	-	-	
<b>LESS: HUD SUBSIDY</b>	-	-	-	-	-	-	-	
<b>NET PRINCIPAL</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

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

Moody's	Fitch	Standard & Poors

Bond Rating

Year of Last Rating

# Debt Service Schedule - Interest

Franklin Housing Authority

If Authority has no debt X this box

X

	<i>Fiscal Year Ending in</i>					Thereafter	Total Interest Payments Outstanding
	Proposed Budget Year 2018	2019	2020	2021	2022		
Type in issue Name							-
Type in Issue Name							-
Type in Issue Name							-
Type in Issue Name							-
<b>TOTAL INTEREST</b>	-	-	-	-	-	-	-
<b>LESS: HUD SUBSIDY</b>							
<b>NET INTEREST</b>	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

**Net Position Reconciliation**

Franklin Housing Authority  
 For the Period October 1, 2018 to September 30, 2019

**FY 2018 Proposed Budget**

	Public Housing Management	Section 8	Housing Voucher	Other Programs	Total All Operations
<b>TOTAL NET POSITION BEGINNING OF CURRENT YEAR (1)</b>	\$ 1,079,101	\$ -	\$ 265,134	\$ 434,971	\$ 1,779,206
Less: Invested in Capital Assets, Net of Related Debt (1)					-
Less: Restricted for Debt Service Reserve (1)					-
Less: Other Restricted Net Position (1)	641,596		100,217		741,813
Total Unrestricted Net Position (1)	437,505	-	164,917	434,971	1,037,393
Less: Designated for Non-Operating Improvements & Repairs					-
Less: Designated for Rate Stabilization					-
Less: Other Designated by Resolution					-
Plus: Accrued Unfunded Pension Liability (1)	63,813		256,720		320,533
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)					-
Plus: Estimated Income (Loss) on Current Year Operations (2)					-
Plus: Other Adjustments (attach schedule)					-
<b>UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET</b>	501,318	-	421,637	434,971	1,357,926
Unrestricted Net Position Utilized to Balance Proposed Budget	-	-	-	-	-
Unrestricted Net Position Utilized in Proposed Capital Budget	-	-	-	-	-
Appropriation to Municipality/County (3)	-	-	-	-	-
Total Unrestricted Net Position Utilized in Proposed Budget	-	-	-	-	-
<b>PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR (4)</b>	\$ 501,318	\$ -	\$ 421,637	\$ 434,971	\$ 1,357,926

(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 \$ 6,226 \$ - \$ 121,669 \$ 1,250 \$ 129,146

(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.

2018  
FRANKLIN  
  
HOUSING  
AUTHORITY  
CAPITAL  
BUDGET/  
PROGRAM

# 2018 CERTIFICATION OF HOUSING AUTHORITY CAPITAL BUDGET/PROGRAM

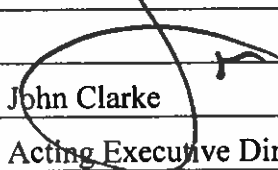
## FRANKLIN HOUSING AUTHORITY

FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19

It is hereby certified that the Housing Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the Franklin Housing Authority, on the 10th day of October, 2018.

OR

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

Officer's Signature:			
Name:	John Clarke		
Title:	Acting Executive Director		
Address:	25 Parkside Street Somerset, N.J. 08873		
Phone Number:	732-545-9430	Fax Number:	732-545-3667
E-mail address	Ed@ftha.org		

# 2018 CAPITAL BUDGET/PROGRAM MESSAGE

## Franklin Housing Authority

FISCAL YEAR: FROM: 10/1/18 TO: 9/30/19

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

1. Has the Capital Budget/Program been prepared in consultation with or reviewed by, the local and county planning board(s), governing body(ies), or other affected governmental entity(ies) of the jurisdiction(s) served by the Housing Authority? Yes, approved by HUD.
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, a five year plan.
3. Has the Housing Authority prepared a long-term (10-20 years) infrastructure needs assessment?  
Yes, a five year plan.
4. Are any of the capital projects/project financings being undertaken in a community that has a State Plan designated center? If so, please describe the relationship of same to the center's goals and objectives. N/A
5. Describe the impact on the schedule of rents and/or user charges if the proposed capital projects are undertaken. Indicate the impact on current and future year's schedules. N/A
6. Have the projects been reviewed and approved by HUD? Yes, reviewed and approved.

*Add additional sheets if necessary.*



# Proposed Capital Budget

Franklin Housing Authority  
For the Period October 1, 2018 to September 30, 2019

	Estimated Total Cost	Funding Sources			
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Other Capital Grants Sources
<i>Public Housing Management</i>					
Operations/Structural & Mechanical	\$ 269,148				\$ 269,148
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	269,148	-	-	-	269,148
<i>Section 8</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
<i>Housing Voucher</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
<i>Other Programs</i>					
Type in Description	-				
Type in Description	-				
Type in Description	-				
Type in Description	-				
Total	-	-	-	-	-
<b>TOTAL PROPOSED CAPITAL BUDGET</b>	<b>\$ 269,148</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 269,148</b>

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

## 5 Year Capital Improvement Plan

Franklin Housing Authority  
 For the Period October 1, 2018 to September 30, 2019

*Fiscal Year Beginning in*

	Estimated Total Cost	Current Budget					
		Year 2018	2019	2020	2021	2022	2023
<b>Public Housing Management</b>							
Operations/Structural & Mechanical	\$ 1,614,888	\$ 269,148	\$ 269,148	\$ 269,148	\$ 269,148	\$ 269,148	\$ 269,148
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	1,614,888	269,148	269,148	269,148	269,148	269,148	269,148
<b>Section 8</b>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<b>Housing Voucher</b>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<b>Other Programs</b>							
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Type in Description	-	-					
Total	-	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$ 1,614,888</b>	<b>\$ 269,148</b>	<b>\$ 269,148</b>	<b>\$ 269,148</b>	<b>\$ 269,148</b>	<b>\$ 269,148</b>	<b>\$ 269,148</b>

*Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.*

# 5 Year Capital Improvement Plan Funding Sources

## Franklin Housing Authority

For the Period **October 1, 2018** to **September 30, 2019**

	Estimated Total Cost	Funding Sources				
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants	Other Sources
<i>Public Housing Management</i>						
Operations/Structural & Mechanical	\$ 1,614,888	\$ 1,614,888				
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	1,614,888	-	-	-	1,614,888	-
<i>Section 8</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Housing Voucher</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<i>Other Programs</i>						
Type in Description	-					
Type in Description	-					
Type in Description	-					
Type in Description	-					
Total	-	-	-	-	-	-
<b>TOTAL</b>	<b>\$ 1,614,888</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,614,888</b>	<b>\$ -</b>
Total 5 Year Plan per CB-4	<u>\$ 1,614,888</u>					
Balance check		- If amount is other than zero, verify that projects listed above match projects listed on CB-4.				

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

**FRANKLIN HOUSING AUTHORITY**  
**CALCULATION OF COMPENSATED ABSENCES**  
**F.Y.E. 9/30/17**

**G/L ACCT# 2135**

ANNUAL SALARY	EMPLOYEE	*DAILY RATE	**VACATION DAYS	TOTAL VACATION ACCRUAL	***SICK DAYS	TOTAL SICK ACCRUAL	TOTAL ACCRUED LEAVE
\$ 71,000	T. ADAMS	\$ 273.08	50.00	\$ 13,654.00	175.00	\$ 15,000.00	28,654.00
\$ 32,960	T. WILLIAMS	\$ 126.77	3.50	\$ 444.00	0.00	\$ -	444.00
N/A	H. DAVIS	\$ 452.96	3.00	1,359.00	129.75	15,000.00	16,359.00

TOTAL	\$ 15,457.00	\$ 30,000.00	\$ 45,457.00
TIMES FICA RATE	1.0765	1.0765	1.0765
TOTAL ACCRUED LEAVE	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	<u>\$ 48,934.00</u>
CURRENT	\$ 16,639.00	\$ 3,230.00	
NON-CURRENT	-	29,065.00	
TOTAL	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	
PHA	\$ 4,160.00	\$ 8,074.00	\$ 12,234.00
SECTION 8	12,479.00	24,221.00	36,700.00
TOTAL	<u>\$ 16,639.00</u>	<u>\$ 32,295.00</u>	<u>\$ 48,934.00</u>

\* BASED ON 260 WORK DAYS

\*\* VACATION DAYS ARE CAPPED AT 50 AS PER THE PERSONEL POLICY.

\*\*\*SICK DAYS CAPPED AT 250 AS PER POLICY OR \$15,000 WHICHEVER IS LOWER.

**FRANKLIN HOUSING AUTHORITY**

**EXPLANATION OF BUDGET VARIANCES IN EXCESS OF TEN PERCENT**

**F.Y.E. 9/30/19**

<b>BUDGET ITEM</b>	<b>PERCENTAGE INCREASE/ (DECREASE)</b>	<b>EXPLANATION</b>
C.F.P. OPERATIONS	216.90%	INCREASE IN 2018 CAPITAL FUND PROGRAM
INVESTMENT INCOME	225.90%	CASH FLOW & RATE INCREASES
LEGAL EXPENSES	10.00%	BASED ON CURRENT YEAR BILLING AND ANTICIPATED REDEVELOPMENT WORK