

SAUGUS HOUSING AUTHORITY
Saugus, Massachusetts
Report on Agreed-Upon Procedures
December 31, 2024

**INDEPENDENT ACCOUNTANTS' REPORT
ON APPLYING AGREED-UPON PROCEDURES**

The Board of Commissioners
Saugus Housing Authority
Saugus, Massachusetts:

We have performed the procedures enumerated in the attached Schedule of Agreed-Upon Procedures on compliance and other matters prescribed by the Massachusetts Executive Office of Housing and Livable Communities (EOHLC) as of and for the year ended December 31, 2024. The Saugus Housing Authority (the Authority) is responsible for compliance and other matters prescribed by EOHLC.

The Authority has agreed to and acknowledged that the procedures performed are appropriate to meet the requirements of EOHLC for the year ended December 31, 2024. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes.

The procedures and the associated findings are presented in the Schedule of Agreed-Upon Procedures included with this report.

We were engaged by the Authority to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the AICPA. We were not engaged to and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on compliance and other matters prescribed by EOHLC for the year ended December 31, 2024. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of the the Authority and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our agreed-upon procedures engagement.

This report is intended solely for the information and use of the EOHLC and the Authority and is not intended to be and should not be used by anyone other than these specified parties.

EFPR Group, CPAs, PLLC

Williamsville, New York
August 8, 2025

Housing Authority Name: SAUGUS HOUSING AUTHORITY

Fiscal Year End (FYE): Dec 2024

Date of AUP Conducted: 7/18/2025 12:00:00 AM

Executive Director: Joe Hart

CPA: EFPR Group

CPA Phone: (716) 634-0700

HMS: Jonathan R. Capan

Total AUP Exceptions: 16

A. General Accounting

Total # of exceptions: 0

Rating: No Findings

Exceptions

Exception Explanation

CPA Recommendations

LHA Response

A. Reconciling financial statements to general ledger.

1. The amounts reported on the Operating Statement and Balance Sheet (DHCD Forms 51-1 and 51-2, respectively) reconcile to the LHA's general ledger. (Tolerable error of +/- \$100). For all cases that don't match, please detail specifics including at a minimum account and variance amount in column to right.

NE

B. The following general ledger accounts reconcile to supporting documentation (Tolerable error of +/- \$100, unless otherwise noted): For all cases that don't match, please detail specifics including at a minimum account and variance amount in CPA Recommendations column.

1. Cash accounts (#1111 to #1114.1 and #1162) are in agreement with bank statements and reconciliations

NE

2. Tenant Accounts Receivable and Prepaid Tenant Rent accounts (#1122, #1124 and #2240) are in agreement with agings of Tenants Accounts Receivable (TAR)

NE

3. Capital Assets and Accumulated Depreciation (all fixed assets except 1400.2) are in agreement with the depreciation schedule/fixed asset listing).

NE

4. Accounts Payables accounts (#2111, #2111.1, #2120 and #2139) are in agreement with supporting documentation for Accounts Payables and accruals.

NE

5. Accrued Compensated Absences accounts (#2135 and #2335.01) are in agreement with the compensated absences schedule.

NE

6. DHCD approved budget exemptions for direct reimbursement as found in the (ANUEL & Subsidy Worksheet - Section 8 in the Operating Statement) are in agreement with LHA record of actual expenses in the General Ledger.

NE

7. Salaries and Gross Wages (4110, 4410, 4120) (tolerable error of +/- 3.0%) are in agreement with the MA form WR-1 (state filings).	NE			
8. Balance Sheet Accounts (#2140, #2339.1, and #2339.2) are in agreement with OPEB/pension reporting.	NE			
C. EOHLC Public Housing Notice #2018-4, Direct Cost Exemption for Operating Reserve Augmentation in FY2018 Budget & New Operating Reserve Thresholds.				
1. The amounts reported on the Operating Statement and Balance Sheet (DHCD Forms 51-1 and 51-2, respectively) reconcile to the LHA's general ledger. (Tolerable error of +/- \$100). For all cases that don't match, please detail specifics including at a minimum account and variance amount in column to right.	N/A			
B. Tenant Accounting				
Total # of exceptions: 1		Rating: Operational Guidance		
	Exceptions	Exception Explanation	CPA Recommendations	LHA Response
A. Select a random sample of rent transactions (Small - 5, Med - 10, Large - 15, Very Large - 20) of rent transactions. Include at least 20% are credit adjustments and 20% are lease enforcements (if have).				
1. The Authority retained supporting documentation for rent receipts.	NE			
2. The Authority posted rent receipts to the correct tenant accounts.	NE			
3. The Authority retained documentation supporting credit adjustments.	NE			
4. The Authority followed its rent collection policy for non-payment of rent (i.e., issued a notice to quit, followed eviction protocol.)	NE			
B. Account Write-Offs				
1. Documentation of Board approval to write-off account (board approval of write-off required per budget guidelines for Acct #4570 - Collection Loss).	NE			
C. Vacancies Being Reported in Vacancy System				
1. Verify that the number of vacant units accounted for in the LHA's operating software is the same number of vacancies reported by the LHA in the EOHLC On Line Vacancy System for the fiscal year	E	The LHA reported 18 vacant units in its operating software and reported 20 vacant units in the EOHLC On-Line Vacancy System, resulting in a discrepancy of 2 units.	We recommend the Authority ensure all vacant units are properly tracked throughout the year in both HAFIS and PHA web	The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
D. Wage Match Certification				

1. Verify the Executive Director and Board Chairperson have signed the Certification Regarding Wage Match (Attachment A, v2, to Public Housing Authority 2023-03 and is supported by a board vote of approval. The Certification Regarding Wage Match has been submitted to EOHLC annually with a list of all employees authorized to request and receive information provided through Wage Match in accordance with Public Housing Notice 2023-03 and 2023-07. For FY '24 the certification must be submitted to EOHLC with the LHAs year end certifications on the EOHLC HousingAps site.	NE			
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C. Payroll				
Total # of exceptions: 1		Rating: Operational Guidance		
	Exceptions	Exception Explanation	CPA Recommendations	LHA Response

A. Wage Reporting

1. Actual wages for the Top 5 highest paid employees was consistent with the DHCD-approved budget (Schedule of All Salaries and Positions Report), excluding over-time and longevity payments. (Tolerable error of +/- 3.0% of budgeted salary)	E	The Top 5 Compensation Form was inconsistent with EOHLC approved budget for 1 out of 5 employees tested. The variance noted was 7.9%	We recommend that the Authority develop internal controls to ensure that wages reported in Top 5 compensation form agree to the Schedule of Salaries and Positions budgeted for	The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
2. Verify the amount reported on the Top 5 Compensation Form matches exactly the amount reported on reconciled to the WR-1.	NE			
3. LHA is in possession of DHCD-approved executive contract signed by the LHA, Executive Director and DHCD. If LHA can show that currently being processed by DHCD and was not returned to the LHA for failing to meet DCHD's requirements, LHA can produce the last DHCD-approved executive contract or at-will agreement signed by the LHA, Executive Director and DHCD.	NE			

B. Payroll Testing for all employees from all funding sources - Select a single payroll period:

1. The payroll register accurately accounts for time worked as logged on employee timesheets/time cards.	NE			
2. Timesheets/time cards are maintained by all employees (including Executive Director) and were approved by supervisor (except Executive Director) including leave taken	NE			

C. Compensated Absences Policy

identified on timesheets/time cards and accurately accounted for in a compensated absences register.	NE			
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1. Personnel Policy includes (1) the limits on the amount of vacation and sick leave that will be accrued each year, and when and how such leave will be accrued; (2) a limit on the amount of accrued vacation that may be carried over from year to year, and; (3) a cap on the payout for accrued and unused sick leave at the end of employment per PHN 2017-14.	NE			
2. The Authority is accounting for annual leave time earned in accordance with the Authority's personnel policy.	NE			

D. Accounts Payable				
Total # of exceptions: 0		Rating: No Findings		
	Exceptions	Exception Explanation	CPA Recommendations	LHA Response

A. Select a random sample of (Small - 15, Med - 20, Large - 25, Very Large - 25) cash disbursement transactions. The auditor may substitute random selections for large or unusual items identified in a review of the cash disbursements journal. The auditor should substitute for at least one credit card statement, at least one employee expense reimbursement transaction, at least one capital expense, at least one operating expense and at least one debit card transaction. For all discrepancies, to the right detail the type of payable, the date, the charge, and the amount.

1. Cash disbursements were authorized in accordance with the Authority's policies.	NE			
2. Cash disbursements are in agreement with supporting documentation.	NE			
3. Supporting documentation is sufficiently detailed.	NE			
4. Costs are allowable (i.e. sales tax, alcohol, lottery tickets)	NE			
5. Costs are properly allocated to the correct program(s). Cost of current year additions are allocated to programs in a manner consistent with the use of the asset.	NE			
6. Costs are properly classified.	NE			

E. Inventory				
Total # of exceptions: 2		Rating: Operational Guidance		
	Exceptions	Exception Explanation	CPA Recommendations	LHA Response

A. Capital and Non-Capital Asset Inventory				
1. The Authority performed a physical count of its capital asset and non-capital asset inventory at least annually (non-capital assets are refrigerators and stoves and other furniture equipment over the Authority's non-capital inventory threshold, which may not exceed \$1,000).	E	The Authority did not performed a physical count of its capital asset and non-capital asset inventory during the year ended December 31, 2024.	We recommend the Authority implement a comprehensive inventory tracking process and perform periodic physical counts to ensure all records are accurate.	The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
2. Capital and Non-Capital Asset inventory includes all necessary information to identify the asset. For non-capital assets that includes a tag with an LHA-assigned number for all assets of \$1,000 or more (and all refrigerators and stoves of any value). For relevant assets of \$5,000 or more that includes the make/model/year for vehicles and the FISH number.	NE			
3. The Authority identified additions and disposals of capital and non-capital assets for the accounting period.	NE			

4. Select a random sample of non-capital assets by tag number (Small - 3, Med - 6, Large - 9, Very Large - 12) and verify existence.	E	The Authority was unable to provide proof of existence for 6 out of the 6 inventory items selected for review	We recommend that the Authority ensure replaced inventory items are immediately tagged and previous tag numbers are updated on the listing	The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
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F. Procurement				
Total # of exceptions: 12		Rating: Corrective Action		
	Exceptions	Exception Explanation	CPA Recommendations	LHA Response
For A to C below, examine the cash disbursements journal (or check register) as well as the contract register and identify purchases of goods and services during the year that should have been competitively procured. From these purchases that should have been competitively procured, select a sample (Small - 3, Med - 5, Large - 7, Very Large - 9) of known or possible procurements valuing \$10,000 or more; if possible when selecting the sample, include at least one procurement valuing \$10,000 to \$50,000 and one procurement valuing more than \$50,000 (for goods and services for MGL c. 30B only). If any in the sample were not competitively procured, enter as an exception in A. For sampled purchases that went through procurement, follow procedures under B or C below depending on the size of the procurement.				

A. Procurement Policy				
1. The Authority's procurement policy is consistent with the requirements of MGL c. 30b (or more conservative federal regulations).	NE			
2. The Authority maintains a contract register which includes the following information: contractor, description, active/inactive, start date, end date, extensions available, contract award amount, change orders amount, contract expenditures to date and remaining value.	NE			

B. Known and possible procurements valuing (\$10,000 up to and including \$50,000) (for goods and services for MGL c. 30B only). LHA can follow more conservative federal regulations when applicable. [- If N/A selected for any one below, then default all drop downs to N/A in this section]				
1. Proper procurement method used.	E	Numerous steps required by the procurement policy were not followed during the procurement process. As a result, both auditor and client determined any testing would inefficient and ineffective as all attributes wouldn't be verified.	We recommend the Authority implement a comprehensive performance and monitoring process over procurement to ensure compliance with requirements.	The Authority's Executive level turnover was a primary factor in the procurement issues noted. The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
2. Proper selection based on MGL c.30B s.5 solicitation of quotes requirements.	E	See above	See above	See above
3. Documentation of a written purchase description with solicitation of written quotes from at least three persons.	E	See above	See above	See above
4. Contract was for not more than 3 years unless majority board vote allowed it to be longer.	E	See above	See above	See above
5. Board vote is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an LHA staff member, usually Executive Director.	E	See above	See above	See above

6. Contract did not go through automatic renewals unless renewals were part of the original procurement.	E	See above	See above	See above
7. The contracts are included on the Authority's contract register.	NE			

C. Known and possible procurements valuing (more than \$50,000) (for goods and services for MGL c. 30B only).

LHA can follow more conservative federal regulations when applicable. [- If N/A selected for any one below, then default all drop downs to N/A in this section]

1. Proper procurement method used.	E	Numerous steps required by the procurement policy were not followed during the procurement process. As a result, both auditor and client determined any testing would inefficient and ineffective as all attributes wouldn't be verified.	We recommend the Authority implement a comprehensive performance and monitoring process over procurement to ensure compliance with requirements.	The Authority's Executive level turnover was a primary factor in the procurement issues noted. The Authority agrees with the finding and plans to implement the recommendation during the year ended December 31, 2025.
2. Proper selection based on MGL c.30B s.5 IFB requirements or MGL c.30B s.6 RFP requirements. If using MGL C.30B s.6 RFP requirements, LHA must have a Chief Procurement Officer (CPO) conduct the procurement under c.30B s.6.	E	See above	See above	See above
3. Documentation of Newspaper advertisement, LHA's Office and COMMBUYS two weeks prior to bidding process. If contract was for over \$100K, it was advertised in the Goods & Services Bulletin.	E	See above	See above	See above
4. If IFB, contract award went to lowest bidder. If RFP, contract went to lowest bidder or letter explaining why went with another bidder.	E	See above	See above	See above
5. Board vote is documented approving individual contract, or a board vote to delegate authority over certain contracts (by dollar threshold or other criteria) to an LHA staff member, usually Executive Director.	E	See above	See above	See above
6. Contract did not go through automatic renewals unless renewals were part of the original procurement.	E	See above	See above	See above
7. The contracts are included on the Authority's contract register.	NE			

G. Eligibility Compliance

Total # of exceptions: 0

Rating: No Findings

	Exceptions	Exception Explanation	CPA Recommendations	LHA Response
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A. Public Housing - Select a sample (Small LHA - 5, Medium LHA - 10, Large or Very Large LHA - 15) of tenant files (from programs 200, 667, 705); if the LHA has multiple property managers, at least one file should be selected per manager.

1. The Authority performed timely annual rent determinations (or bi-annual if the Authority has a waiver from EOHLC to do so).	NE			
2. The Authority properly calculated rent.	NE			

3. The Authority verified family composition.	NE			
4. The Authority verified income, exclusions from income and deductions.	NE			
5. The Authority properly sent notifications of rent redetermination at least 60 days prior to the effective date.	NE			
6. The Authority properly sent notifications of rent change at least 14 days prior to the effective date.	NE			
7. The Authority was timely in the execution of lease addendums.	NE			

B. MRVP - Select a sample of annual rent determinations (sample 10% (min:1 max:15) of leased MRVP units). [- If N/A selected for any one below, then default all drop downs to N/A in this section]

1. The Authority performed timely annual rent determinations.	N/A			
2. The Authority properly calculated rent.	N/A			
3. The Authority verified family composition.	N/A			
4. The Authority verified income, exclusions from income and deductions.	N/A			
5. The Authority obtained Certificates of Fitness (COF).	N/A			
6. The Authority obtained Letters of Compliance for Lead Paint if child <6 years old and building built prior to 1978 with no new construction permit.	N/A			
7. The Authority obtained Proofs of Ownership	N/A			
8. The Authority obtained W9s for landlords.	N/A			