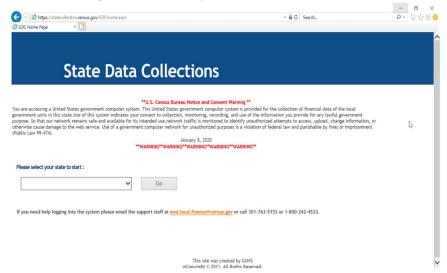
State Data Collection Website Instructions

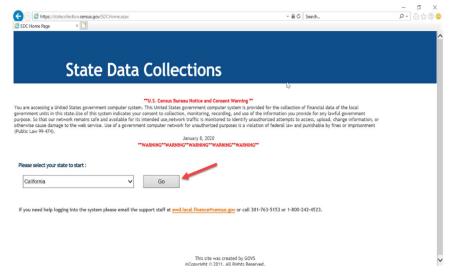
I. Logging In

a. In Browser, navigate to website

https://statecollection.census.gov/SDCHome.aspx



b. Select state from the drop down menu, then click 'Go.'



c. The State homepage will then appear.



d. Enter userID (lowercase letters only) and password. See section c if this is the first time logging into the system.

Note: UserID provided in the initial notification letter.



e. If it is your first time logging into the system, click 'Forgot Password' to create a password for the account.



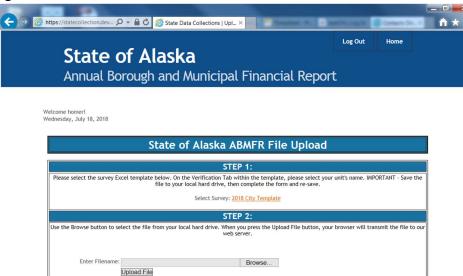
f. Enter UserID and Email address associated with the account and click 'Reset Password'.



g. Two emails will be sent to the email address associated with the account (from Kristen.i.ricks@census.gov), one verifying the UserID and one containing a link back to the website to create a new password.

Note: If emails are not received or an error message is received, please contact the Census support staff at ewd.local.finance@census.gov.

- h. After clicking on the link, create a password containing at least 12 characters with one uppercase character, one lowercase character, a number, and a special character (!, @, #, \$, & are known acceptable special characters).
- i. Confirm the password by re-entering it into the next space provided.
- j. Click 'Continue,' which returns user to the home screen.
- k. Enter UserID and newly created password.
- I. Click 'Login.'



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II. Download Survey

a. Select '2018 City Template' to download the Annual Financial Report.



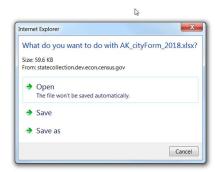
b. From the pop-up window, select 'Open.'

Note: Depending on the browser, the result after clicking the template link will be different. The below screenshot will appear if using **Internet Explorer** and a similar pop-up window in **Firefox**.

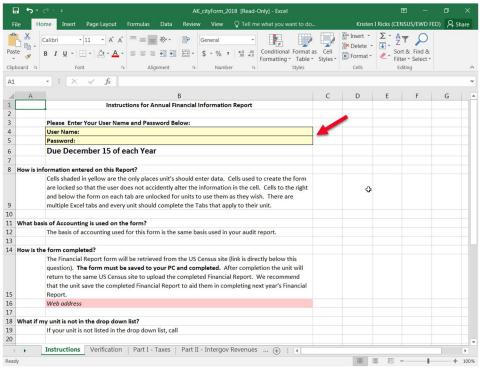
Microsoft Edge will open the template as a read only browser window. You must download the file and open in Excel for all functions to work properly.

Google Chrome will automatically download the template, showing up as a tab on a bottom left tool bar. You must select that tab and open the template in Excel.

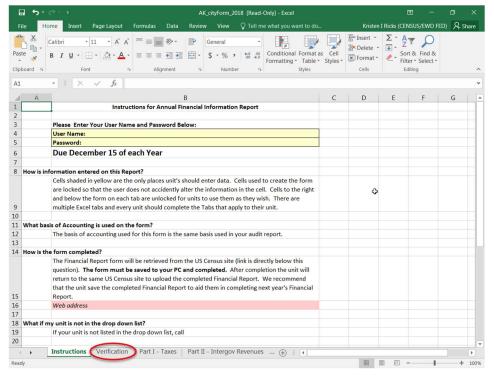




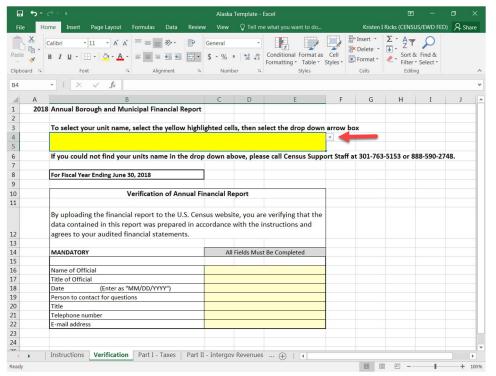
c. Once the template opens in Excel, enter your User Name and Password into the highlighted fields.



d. Then, select the Verification tab.



e. Using the drop down arrow, select the appropriate community name from the menu.



- f. Save the template to your local hard drive. (Ex.: homer2018.xlxs)
- g. Complete each tab of the template, Parts I XI, and re-save to your local hard drive.

III. Upload Survey

- a. Log in to the State Data Collection website using steps from Part I.
- b. From the File Upload screen Step 2, select Browse to find the completed Annual Financial Report on your local hard drive.



c. Once the completed file has been selected from the hard drive and the Filename field is populated, select Upload File.



d. You will receive a notification once file has successfully uploaded.



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e. Click 'Log Out.'





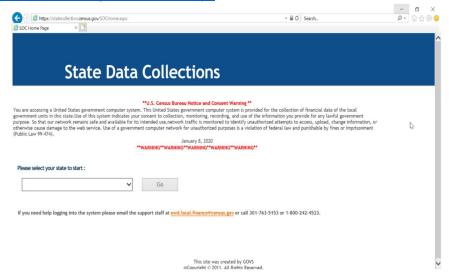
this site was created by govs

State Data Collection Website Instructions

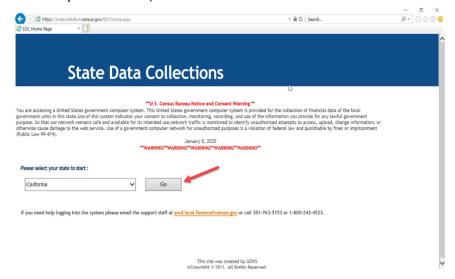
I. Logging In

a. In Browser, navigate to website

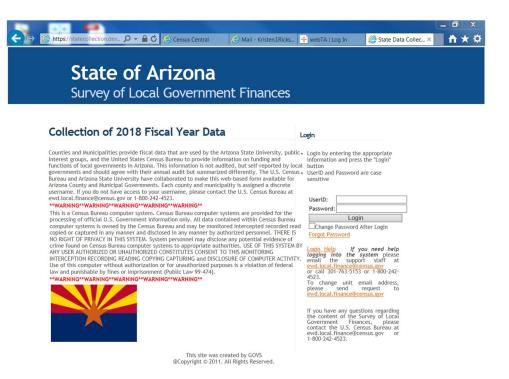
https://statecollection.census.gov/SDCHome.aspx



b. Select state from the drop down menu, then click 'Go.'



c. The State homepage will then appear.

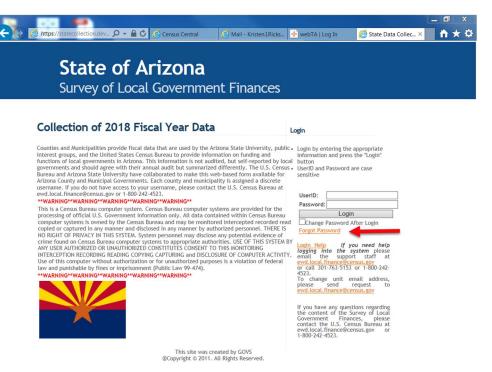


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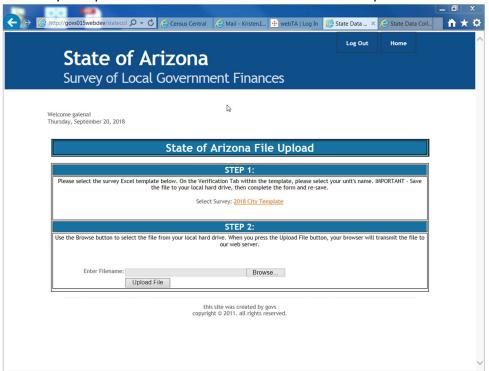
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- i. Confirm the password by re-entering it into the next space provided.
- j. Click 'Continue,' which returns user to the home screen.
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- I. Click 'Login.'



II. Download Survey

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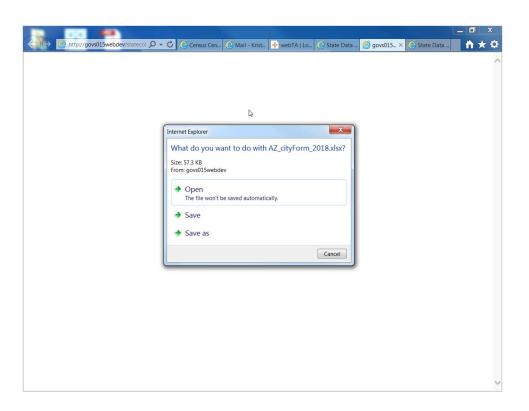


b. From the pop-up window, select 'Open.'

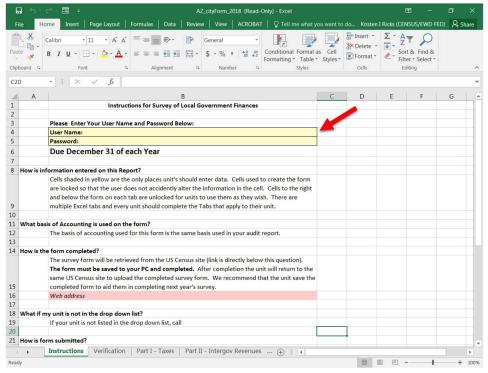
Note: Depending on the browser, the result after clicking the template link will be different. The below screenshot will appear if using **Internet Explorer** and a similar pop-up window in **Firefox**.

Microsoft Edge will open the template as a read only browser window. You must download the file and open in Excel for all functions to work properly.

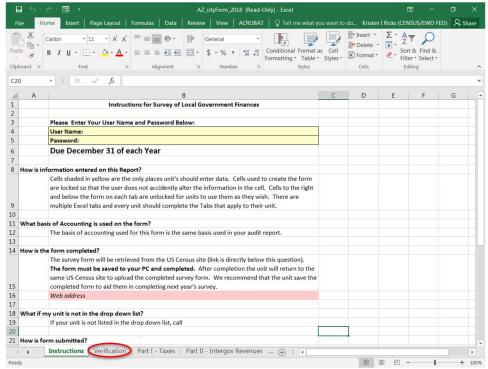
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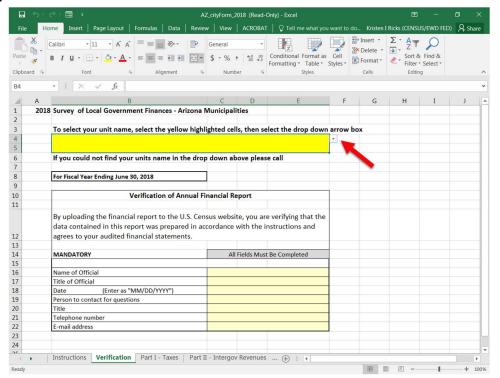
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d. Then, select the Verification tab.



e. Using the drop down arrow, select the appropriate community name from the menu.



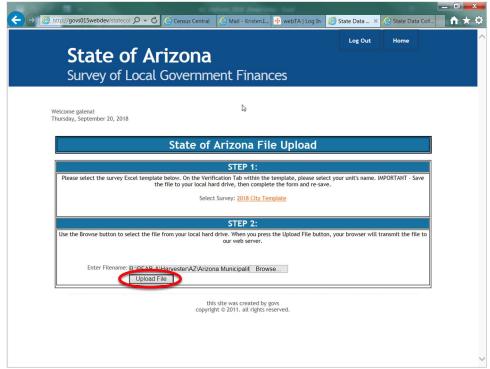
- f. Save the template to your local hard drive. (Ex.: homer2018.xlxs)
- g. Complete each tab of the template, Parts I XI, and re-save to your local hard drive.

III. Upload Survey

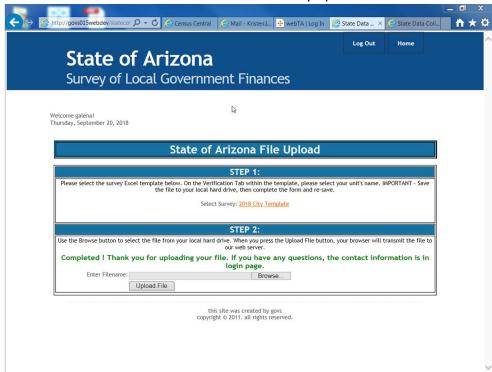
- a. Log in to the State Data Collection website using steps from Part I.
- b. From the File Upload screen Step 2, select Browse to find the completed Annual Financial Report on your local hard drive.



c. Once the completed file has been selected from the hard drive and the Filename field is populated, select Upload File.



d. You will receive a notification once file has successfully uploaded.



e. Click 'Log Out.'







Website: Survey of Local Government Finances

Email: ewd.local.finance@census.gov

Telephone: 1-800-832-2839 weekdays, 8 AM to 5 PM ET

Burden Statement

We estimate this survey will take between 1.5 hours to 6 hours to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

You may e-mail comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: EWD.Surveys@census.gov. Be sure to use "EWD Survey Comments 0607-0585" as the subject.





Website: Survey of Local Government Finances

Email: ewd.local.finance@census.gov

Telephone: 1-800-832-2839 weekdays, 8 AM to 5 PM ET

Welcome to the Annual Survey of Local Government Finances

- The due date is December 12, 2023.
- Title 13, United States Code, Sections 161 and 182 authorizes the Census Bureau to conduct this collection and to request your voluntary
 assistance. These data are subject to provisions of Title 13, United States Code, Section 9(b) exempting data that are customarily provided in
 public records from rules of confidentiality. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity
 risks through screening of the systems that transmit your data.
- This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB number is 0607-0585 and appears at the
 upper right of this screen. Without this approval we could not conduct this survey.

Login

- · To log in, please enter the User ID and Password indicated on your letter and press the "Login" button.
- User ID and Password are case sensitive.

Please note: Sessions will expire (requiring you to log back in) after 15 minutes of inactivity. No data will be lost.

User ID:
Password:

Login

U.S. Census Bureau Notice and Consent Warning

You are accessing a United States Government computer network. Any information you enter into this system is confidential. It may be used by the Census Bureau for statistical purposes and to improve the website. If you want to know more about the use of this system, and how your privacy is protected, visit our online privacy webpage at https://www.census.gov/about/policies/privacy-policy.html.

Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).





Website: Survey of Governments - Pensions

Email: ewd.pensions@census.gov

Telephone: 1-800-832-2839 weekdays, 8 AM to 5 PM ET

Burden Statement

We estimate this survey will take an average of 2.5 hours to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

You may e-mail comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: EWD.Surveys@census.gov; use "EWD Survey Comments 0607-0585" as the subject.

OMB No.: 0607-0585 Approval Expires: 07/31/2024





Website: Survey of Governments - Pensions

Email: ewd.pensions@census.gov

Telephone: 1-800-832-2839 weekdays, 8 AM to 5 PM ET

Welcome to the Annual Survey of Public Pensions

- . The due date is PAST DUE Respond within 10 days
- Title 13, United States Code, Sections 161 and 182 authorizes the Census Bureau to conduct this collection and to request your voluntary assistance.
 These data are subject to provisions of Title 13, United States Code, Section 9(b) exempting data that are customarily provided in public records from rules of confidentiality. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data.
- This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB number is 0607-0585 and appears at the
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- · User ID and Password are case sensitive.

Please note: Sessions will expire (requiring you to log back in) after 15 minutes of inactivity. No data will be lost.

User ID:
Password:

Login

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You are accessing a United States Government computer network. Any information you enter into this system is confidential. It may be used by the Census Bureau for statistical purposes and to improve the website. If you want to know more about the use of this system, and how your privacy is protected, visit our online privacy webpage at https://www.census.gov/about/policies/privacy-policy.html.

Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).

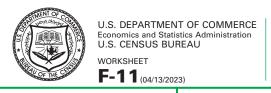
| State Name | State # | Code | Amt 23 | Amt 22 | Amt 21 |
|--|---------|------|--------|--------|--------|
| Total taxes (reported) | | | | | |
| Property taxes | | T01 | | | |
| Sales and gross receipts General sales and gross receipts | | T09 | | | |
| Selective sales taxes Alcoholic beverages | | T10 | | | |
| Amusements | | T11 | | | |
| Insurance premiums | | T12 | | | |
| Motor fuels | | T13 | | | |
| Public Utilities | | T15 | | | |
| Tobacco products | | T16 | | | |
| Total marijuana sales (include recreational and medical, if collected) | | T17 | | | |
| Sports betting (including pari-mutuels) | | T18 | | | |
| Other selective sales | | T19 | | | |
| Licenses Alcoholic beverages | | T20 | | | |
| Amusements | | T21 | | | |
| Corporation | | T22 | | | |
| Hunting and fishing | | T23 | | | |
| Motor vehicle | | T24 | | | |
| Motor vehicle operators | | T25 | | | |

| 126 |
|-----|
| T27 |
| T28 |
| T29 |
| T40 |
| T41 |
| T50 |
| T51 |
| T53 |
| Т99 |
| |

Total taxes (calculated)

Report

State Government Tax Collections: 2023



2023 ANNUAL SURVEY OF PUBLIC PENSION PLANS Locally-Administered Defined Benefit Plans

OMB No. 0607-0585: Approval Expires 07/31/2024

DUE DATE:

November 7, 2023

Need help or have questions?

Visit

https://www.census.gov/ programs-surveys/aspp/ information.html

• Call

1-800-832-2839 weekdays, 8AM to 5PM ET

WORKSHEET

DO NOT use this worksheet to respond to the survey. It is intended to assist you with gathering and preparing your data prior to reporting online.

Return to https://portal.cenus.gov when you are ready to report online.

GENERAL INSTRUCTIONS

Before filling out this survey, please read carefully each part and all related definitions and instructions. **Note especially:**

- **1.** To complete this worksheet, you will need the Annual Comprehensive Financial Report (ACFR) for the retirement system listed in the mailing address (*Use the annual report if the retirement system does not have a ACFR*).
- 2. Report figures for **Defined Benefit** plans only. Do **not** include Defined Contribution or other Postemployment Benefit plans in the data.
- 3. If you are including data for any retirement system(s) administered in addition to the system identified in the address box above, list retirement system(s) in ②, REMARKS section, at the end of the worksheet.
- **4.** Report corporate stocks and bonds at market value, and adhere to Governmental Accounting Standards Board (GASB) guidelines when reporting gains and losses on investments.
- **5.** Report figures relating to all accounts and reserves of the system, including amounts for retirement, disability, survivors', and other benefits, as well as any amounts for administration of the system. Exclude transfers between reserves of the system.
- **6.** Do **not** delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.

| Ad | dressee Title or Department | | | |
|--------------------------------|--|--|----------|--------------------------------------|
| АТ | TTN: | | | |
| Str | reet 1 | | | |
| | | | | |
| Str | reet 2 | | | |
| | | | | |
| Cit | y State | Zip Code | | |
| | | | | |
| | | | | |
| | | | | |
| T 1 | ENDING DATE OF FISCAL YEAR | | | (MM) (E |
| Wh | hat is the retirement system's fiscal year end date? | | | |
| ~~ | nat is the retirement system s usear year end date: | | | |
| | | | | |
| WE | hat was the retirement system's latest fiscal year and date | () | (==) | 00000 |
| tha | hat was the retirement system's latest fiscal year end date at occurred before July 1, 2023? Use this fiscal year data to | (MM) | (DD) | (YYYY) |
| tha cor | at occurred before July 1, 2023? Use this fiscal year data to mplete the remainder of this worksheet even though more recent | | (DD) | (YYYY) |
| tha cor dat | at occurred before July 1, 2023? Use this fiscal year data to mplete the remainder of this worksheet even though more recent ta may be available. | | (DD) | (YYYY) |
| tha cor dat | at occurred before July 1, 2023? Use this fiscal year data to mplete the remainder of this worksheet even though more recent ta may be available. MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS | | | |
| tha con dat | at occurred before July 1, 2023? Use this fiscal year data to mplete the remainder of this worksheet even though more recent ta may be available. | | | indicated in |
| tha con dat T 2 Wh | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system dur kclude Beneficiaries | ring the fisc | | indicated in |
| tha con dat T 2 Wh | at occurred before July 1, 2023? Use this fiscal year data to implete the remainder of this worksheet even though more recent ita may be available. MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system durexclude | ring the fise | cal year | indicated in |
| tha con dat T 2 Wh | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system dur kclude Beneficiaries Active members – Current contributors in contributory systems or emplete the remainder of this worksheet even though more recent to make the total plane. 1. 2023? Use this fiscal year data to make the recent to make the total plane. 1. 2023? Use this fiscal year data to make the recent to make the recent to make the total plane. 2. 2023? Use this fiscal year data to make the recent to make the recen | ring the fise | cal year | indicated ir Number of Members |
| tha con dat T 2 Wh | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system dur xclude Beneficiaries Active members – Current contributors in contributory systems or empire in non-contributory systems. | ring the fiscond | cal year | indicated in |
| that condate | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system during beneficiaries Active members – Current contributors in contributory systems or empire in non-contributory systems. Inactive members – Former employees and employees on military or extended leave without pay having retained retirement credits, but not contributors. | ring the fise | cal year | indicated in Number of Members |
| that condate | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system due clude Beneficiaries Active members – Current contributors in contributory systems or empire in non-contributory systems Inactive members – Former employees and employees on military or extended leave without pay having retained retirement credits, but not or receiving retirement benefit payments. | ring the fisc ployees other currently | cal year | indicated in Number of Members |
| that condate | MEMBERSHIP AND BENEFITS FOR DEFINED BENEFIT PLANS hat was the total number of members of the retirement system during the members — Current contributors in contributory systems or employees and employees on military or extended leave without pay having retained retirement credits, but not receiving retirement benefit payments. 1. Vested. | ring the fisc | cal year | indicated in Number of Members |
| that condate | Active members – Current contributors in contributory systems or empin non-contributory systems. Inactive members – Former employees and employees on military or extended leave without pay having retained retirement credits, but not creceiving retirement benefit payments. 1. Vested | ring the fisc | cal year | indicated in Number of Members |
| that condate | Active members – Current contributors in contributory systems or empin non-contributory systems. Inactive members – Former employees and employees on military or extended leave without pay having retained retirement credits, but not creceiving retirement benefit payments. 1. Vested | ring the fisc | cal year | indicated in Number of Members |

| | vide estimates if detailed data are not available. | | | Numb Retir Benefic | ees/ |
|----|---|----------------|------------------------|---|--------------------|
| A. | Retirees and beneficiaries of system | | | | |
| Г3 | RECEIPTS FOR DEFINED BENEFIT PLANS | | | | |
| Wh | at was the amount of receipts during the fiscal year indica | ted in | 3 ? | | |
| | Amounts received from sales of investments (should be reported) Amounts received from repayment of loans made to members | ed in 7 |)) | | |
| A. | Employee contributions Amounts contributed by all member employees or withheld from their salaries for financing benefits | \$Bil. | Employe Mil. | e Contributio Thou. | ns Dol. |
| В. | Employer (government) contributions | | | | |
| | 1. From parent local government(s) Include Employer contributions from the government for financing of benefits Parent government contributions or appropriations for administration or other support of the system Local taxes credited directly to the system | \$Bil. | | e r (Governmer n tributions Thou. | nt) Dol. |
| | 2. From state government Include State aid Shared taxes received by the system from the state government either directly or through the parent local government Amounts received from other local governments on behalf of their employees | | | | |
| C. | Earnings on investments Include Interest Dividends Rents Other earnings on investments | | | | |
| | Gains and losses on investment transactions (should be reported in 7) | \$Bil. | Investn Mil. | n ent Earnings Thou. | Dol. |
| | 1. Interest | | | | |
| | 2. Dividends | | | | |
| | 3. Other investment earnings – <i>Specify:</i> _▼ | | | | |
| | | | | | |
| | 4. TOTAL – (Sum of items C1. through C3.) | | | | |

| | port losses as a negative value. | \$Bil. | Mil. | Ind Losses Thou. | Dol. |
|------|---|------------------|------------------------------------|--------------------------|--------|
| A. | Realized and unrealized gains or losses on investments | | | | |
| RT 4 | PAYMENTS FOR DEFINED BENEFIT PLANS | | | | |
| W | nat was the amount of payments during the fiscal year i | ndicated | in 3 ? | | |
| E | cclude | | | Payments | |
| | Amounts paid out for purchase of investments and loans made to members | \$Bil. | Mil. | Thou. | Dol. |
| A. | Benefit payments - Report annual amounts | | | | |
| В. | Withdrawals – Amounts paid to employees, former employees, or their survivors, representing return of contributions made by employees during the period of their employment, and any interest on such amounts | | | | |
| C. | Administrative expenses – Include costs related to the administration and general operation of the pension system, including but not limited to: | | | | |
| | Interest expenseActuary fees | | | | |
| | Directors/trustees fees and expenses Personnel costs (excluding investment managers) | | | | |
| | Rental costs | | | | |
| | • Legal fees | | | | |
| D. | Investment expenses – Include costs arising from investment management, including, but not limited to: • Internal investment management personnel costs • Investment management fees (paid to external asset managers) | | | | |
| | Trading expenses Legal fees (investment management related) Asset consultant fees | | | | |
| ye | CASH AND INVESTMENTS FOR DEFINED BENEFIT PLA nat was the total amount of cash and investments (at m ar indicated in 3 ? | | ue) held at | the end of the | fiscal |
| | Cash and short-term investments | | | | |
| A. | Include | | | | |
| A. | Cash on hand | | Cach and | Short-term | |
| A. | Cash on handDemand deposits | | Inves | stments | |
| A. | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper | \$Bil. | | Thou. | Dol. |
| A. | Cash on hand Demand deposits Time or savings deposits Repurchase agreements | \$Bil. | Inve | | Dol. |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments | \$Bil. | Inve | Thou. | Dol. |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments Include | | Inves Mil. | Thou. | |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments Include Equities Fixed income | \$Bil. \$Bil. | Inve | Thou. | Dol. |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments Include Equities Fixed income Real property | | Inves Mil. | Thou. | |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments Include Equities Fixed income | | Investigation Mil. Long-term Mil. | Thou. | |
| | Cash on hand Demand deposits Time or savings deposits Repurchase agreements Commercial company paper Bankers acceptances Money market mutual funds Long-term investments Include Equities Fixed income Real property | | Investigation Mil. Long-term Mil. | Thou. Investments Thou. | |

| ш | T 6 ACTUARIAL INFORMATION FOR DEFINED BENEFIT | PLANS | | | |
|----|---|--------------|-----------------|-----------------------|------|
| | omplete this part, continue using the ACFR or annual re | | to complete the | e previous pa | arts |
| tŀ | te form. Use this report even though more recent data may b | e available. | | | |
| | Are actuarial data available for this plan? | | | | |
| | ☐ Yes – Continue | | | | |
| | □ No – Go to Part 7, Remarks | \$Bil. | Total Pension | on Liability Thou. | Dol. |
| | What was the total pension liability (TPL) at the beginning of the fiscal year? | | | | |
| | Below is a list of potential changes in the employer's to Provide values for only those that apply for the fiscal y | | n liability. | | |
| | | фD:1 | Total Pension | • | Dal |
| | | \$Bil. | Mil. | Thou. | Dol. |
| | A. Total service cost | | | | |
| | B. Changes of benefit terms | | | | |
| | C. Difference between expected and actual experience and other adjustments | | | | |
| | D. Changes of assumptions | | | | |
| | E. Benefit payments Include • Refunds of member contributions | | | | |
| | F. Interest | | | | |
| | G. Other changes | | | | |
| | | \$Bil. | Total Pension | on Liability Thou. | Dol. |
| | | | | | |

| | | | +5. | | ary Net Position | |
|---------------|-----------------------|---|--|-----------------|--|---------------------------|
| | | | \$Bi | I. Mil | . Thou. | Dol. |
| 4 | | the fiduciary net position (FNP) | | | | |
| 5 | Calculat of FNP re | ion of net pension liability (NPI eported in 14 and TPL reported in 1 | L) (Difference | | | |
| 6 | to emplo | ed ratio of financial net position byer's total pension liability (TP) in 4 divided by TPL reported in | PL) (FNP | | | |
| | | | A | ctuarially D | etermined Contril | oution |
| | | | \$Bi | - | | Dol. |
| D | | the actuarially determined cont | | | | |
| | | | | | bution Received | |
| 18 | relation | ere the contributions actually reto the actuarial determined couplan? | ntribution | l. Mil | . Thou. | Dol. |
| | | | 1 | | -Employee Payrol . Thou. | l i Dol. |
| | | | \$Bi | i. IVIII | | |
| 9 | What is for this | the amount of covered-employed | ee payroll | i. IVIII | | |
| 20 | What is a (also cal | the current discount rate for th led the investment rate of retu e below asks about the sensitiv this plan. What is the amount o | ee payroll nis plan rn)? vity of net pension liabil of the net pension liabil | lity/(asset) to | o changes in the d | discount |
| 20 | What is a (also cal | the current discount rate for the led the investment rate of returned the sensitive below asks about the sensitive this plan. What is the amount of the net per | ee payroll is plan irn)? vity of net pension liabili of the net pension liabili nsion liability with a 1% | lity/(asset) to | o changes in the d decrease in the the discount rate | liscount discount ? |
| 20 21 | What is (also cal | the current discount rate for th led the investment rate of retu e below asks about the sensitiv this plan. What is the amount o | ee payroll nis plan rn)? vity of net pension liabil of the net pension liabil | lity/(asset) to | o changes in the d | liscount discount ? |
| 19 20 21 Rate | What is (also cal | the current discount rate for the led the investment rate of returned the sensitive below asks about the sensitive this plan. What is the amount of the net per | ee payroll is plan irn)? vity of net pension liabili of the net pension liabili nsion liability with a 1% | lity/(asset) to | o changes in the d decrease in the the discount rate | disco |

| | urring within the last year | |
|--|-----------------------------|---|
| Any difficulties encountered | in completing this workshee | # |
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| RT 8 CONTACT INFORMATION | | |
| Who should be contacted to ar | | |
| Who should be contacted to ar | | ta reported on this survey? of contact person |
| Who should be contacted to ar | | |
| Who should be contacted to arme of contact person | | |
| Who should be contacted to arme of contact person | Title of | of contact person |
| RT 8 CONTACT INFORMATION Who should be contacted to an me of contact person ea code and phone number | Title of | of contact person |

Retain a copy of the completed report for your records.

NOTE: Title 13 United States Code (U.S.C.), Sections 161 and 182 authorizes the Census Bureau to conduct this collection. These data are subject to provisions of Title 13, U.S.C., Section 9(b) exempting data that are customarily provided in public records from rules of confidentiality. Per the Federal Cybersecurity Enhancement Act of 2015, your data are protected from cybersecurity risks through screening of the systems that transmit your data.

This collection has been approved by the Office of Management and Budget (OMB). The eight-digit OMB approval number is 0607-0585 and appears at the upper right of this screen. Without this approval, we could not conduct this survey.

We estimate this survey will take an average of 2.5 hours to complete, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.



2022 ANNUAL SURVEY OF STATE GOVERNMENT FINANCES Finances of Insurance Trust Systems

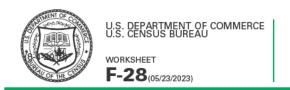
| F-13 | (12-01-2022) | | ОМВ | No. 0607-0585: Approval Expires 07/31/2024 |
|--|---|--|--|--|
| DUE DATE: | | | | |
| February 17, 2023 | 3 | | | |
| RETURN TO: ewd.state.finance@census | s.gov | | | |
| Need help or have questions? | | | | |
| Visit census.gov/programs-su state.html | rveys/ | Agency | or Fund Nan | ne: |
| • Call 1-866-820-7210 weekdays, 7AM to 5P | м ет | | | |
| Email ewd.state.finance@censi | us.gov | | | |
| that transmit your data. This collection has been approvupper right of this form. Withou Please note that this collection of served, and the extent and complour, including the time for reviewing the collection of infor | ed by the Office of N t this approval, we c of information applie olexity of their activit ewing instructions, s mation. Send comm urden, to: EWD Surve | lanagement and Budget (Could not conduct this surve s to governments with wid ies. We estimate the time t earching existing data sour ents regarding this burden by Comments 0607-0585, U | MB). The eight-digit OMB appay. e differences in the size of the complete this survey varies roses, gathering and maintainir estimate or any other aspect. S.Census Bureau, 4600 Silver | this collection and to request your voluntary omarily provided in public records from rules of ecurity risks through screening of the systems proval number is 0607-0585 and appears at the eir service areas, the amount of population from 30 minutes to 2 hours, with an average of 1 ng the data needed, and completing and of this collection of information, including r Hill Road, Room EWD-5K071, Washington, DC 0607-0585 as the subject. |
| Before filling out this | form, please read | | ISTRUCTIONS If all related definitions and | d instructions. Note especially: |
| Report figures relating and other benefits, as and also any investme Report in whole doll PLEASE COMPLETE Mark these items with Do not delay reporting | to all accounts as well as any amount transactions rears. ALL ITEMS ON "None" or a dast g to await finally a | nd reserves of the systems for administration clating to loans to system of the FORM. If some item in the reporting space audited figures, if substances. | em, including amounts for of the system. Exclude tra in members. The syprovided in the syprovided. | d September 30, 2022. retirement, disability, survivors, ansfers between reserves of the system, estem, do not leave them blank. an be supplied on a preliminary basis. |
| PART 1 – ENDING D | ATE OF FISCA | L YEAR | | |
| between Octob | er 1, 2021 an | dicates the ending d September 30, 2 k "X" only one box. | date of the system's 2022? Use this fiscal y | fiscal year that ended year even though a more |
| 2021 | | | 2022 | |
| October | | January | April | July |
| November | | February | May | August |
| December | | March | June | September |

| Wh | at was the amount of receipts during the fiscal year in | dicated in | 1 1 ? | | |
|------------------------------|---|-----------------------------|--------------------------------|-------------------|----------------|
| A. | Contributions other than from State government – Pre assessments, or contributions collected from employers (oth the State government) and from employees for financing be | ner than | | | |
| | Include • Amounts received from local governments and their | | | from State go | overnme |
| | employeesAmounts received from State government employees | (SHOU | ld be reporte | a in item b.) | |
| | Dividends or return of excess premiums (report as a deduction from total contributions) | | | ributions | |
| | deduction from total contributions/ | \$Bil. | Mil. | Thou. | Dol |
| | | | | | |
| В. | Contributions from State government - Premiums | | | | |
| | or contributions paid by the State government and State | | | | |
| | institutions or agencies for financing benefits, and any State government contributions or appropriations for administration or other support of the system | | | | |
| C. | Earnings on investments – Interest earnings on investmen | ıt | | | |
| | securities, deposits, and other interest-bearing accounts. | | | | |
| | Include • Accrued interest on investment securities sold | Exclude • Rent | als from the | State governn | nent |
| | Recorded profits on investment transactions (minus) | • Itelit | | _ | Henr |
| | any realized losses) Rentals | \$Bil. | Mil. | rnings Thou. | rnment Dol. |
| | Other earnings on investments | | | | |
| | | | | | |
| D | | | | | |
| υ. | Other receipts (Exclude Receipts from sale of investments) |) | 041 | D | |
| | Other receipts (Exclude Receipts from sale of investments) Specify and report other receipts: | \$Bil. | Other Mil. | Receipts Thou. | Dol. |
| | Specify and report other receipts: | | | - | Dol. |
| | | | | - | Dol. |
| | Specify and report other receipts: 1. | | | - | Dol. |
| | Specify and report other receipts: | | | - | Dol. |
| | Specify and report other receipts: 1. | | | - | Dol. |
| | Specify and report other receipts: 1. | | | - | Dol. |
| | Specify and report other receipts: 1 2 3 | | | - | Dol. |
| 「3 - | Specify and report other receipts: 1 2 3 PAYMENTS | \$Bil. | Mil. | - | Dol. |
| 「3 - | Specify and report other receipts: 1 2 3 | \$Bil. | Mil. | Thou. | Dol. |
| 「3 - | Specify and report other receipts: 1 2 3 PAYMENTS | \$Bil. | Mil. | Thou. | Dol. |
| Г 3 – Wha | Specify and report other receipts: 1 | \$Bil. | Mil. | Thou. ? ments | |
| Γ3 – Wha | Specify and report other receipts: 1 2 3 PAYMENTS | \$Bil. | Mil. | Thou. ? ments | |
| ГЗ – Wha | Specify and report other receipts: 1 2 3 PAYMENTS It was the amount of payments made during the fiscal Benefits – Amounts paid to, or on behalf of, insurance | \$Bil. | Mil. | Thou. ? ments | |
| Г 3 – Wha А. В. (| Specify and report other receipts: 1 | \$Bil. year indice \$Bil. | eated in Pay | ? ments Thou. | |
| Г 3 – Wha А. В. (| Specify and report other receipts: 1 | \$Bil. year indice \$Bil. | Mil. | ? ments Thou. | |
| Г 3 – Wha А. В. (| Specify and report other receipts: 1 | \$Bil. year indice \$Bil. | Mil. Pay Mil. of investment | ? ments Thou. | Dol. |
| Г 3 – Wha А. В. | Specify and report other receipts: 1. 2. 3. PAYMENTS It was the amount of payments made during the fiscal beneficiaries. Other payments Include Administrative expenses Recorded costs on investment transactions | \$Bil. year indice \$Bil. | eated in Pay | ? ments Thou. | Dol. |
| A. B. Spe | Specify and report other receipts: 1. 2. 3. PAYMENTS It was the amount of payments made during the fiscal Benefits – Amounts paid to, or on behalf of, insurance beneficiaries. Other payments Include Administrative expenses Recorded costs on investment transactions Other costs or payments not representing benefits excify and report other payments: | \$Bil. year indice \$Bil. | Mil. Pay Mil. of investment | ? ments Thou. | |
| Г 3 – Wha А. В. | Specify and report other receipts: 1. 2. 3. PAYMENTS It was the amount of payments made during the fiscal beneficiaries. Other payments Include Administrative expenses Recorded costs on investment transactions Other costs or payments not representing benefits | \$Bil. year indice \$Bil. | Mil. Pay Mil. of investment | ? ments Thou. | Dol. |



3.

| | or the | fiscal year indica | ated in 19: | | | \$Bil. | Amoun M | | l of Fisc Thou. | al Year |
|-------|----------|---|------------------|----------------|-------------|-----------|------------|-----------|--------------------|----------|
| | | sh and deposits ne or savings depo | | | | | | | | |
| | B. Fee | deral government easury and Federal | t securities – (| Obligations of | | | | | | |
| | Inc | clude Short term notes | _ | | | | | | | |
| | sec | deral agency sec curities issued by 0 stal Service, and T | CCC, Export-Imp | ort Bank, FHA | A, GNMA, | | | | | |
| | | curities of State | | | | | | | | |
| | E. Ot | her securities Corporate bonds | | | | | | | | |
| | | Include • Debentures . | | | | | | | | |
| | 2. | Corporate stocks | | | | | | | | |
| | | · | | | | | | | | |
| | 3. | Mortgages | | | | | | | | |
| | 4. | Other Exclude -Real pro | perty | | | | | | | |
| | F. TO | TAL – (Sum of ite | ms A. through | E.) | | | | | | |
| 5 l | Jse thi | EMARKS s space for any e | - | - | | | | | - | |
| PART | 6 – C | ONTACT INFORM | IATION | | | | | | | |
| | | hould be contact | | questions ab | | - | | | | |
| ivam | e or cor | ntact person - Plea | se print | | Title of co | ontact pe | erson - P | riease pr | int | |
| Area | code and | d phone number | | Extension | | Ar | ea code a | and fax n | umber | |
| | | | | | | | | | | |
| Email | Address | s - Please print | | | | Date | form wa | s comple | eted (MM) | (DD) (YY |
| | | | | | | | | | | |
| | | | | | | | | | | |



2023 ANNUAL SURVEY OF LOCAL GOVERNMENT FINANCES County, Municipal, and Township

OMB No. 0607-0585: Approval Expires 07/31/2024

DUE DATE:

December 12, 2023

Need help or have questions? • Visit

https://www.census.gov/ programs-surveys/govfinances.html

• Call

1

1-800-832-2839 weekdays, 8AM to 5PM ET

WORKSHEET

DO NOT use this worksheet to respond to the survey. It is intended to assist you with gathering and preparing your data prior to reporting online.

Return to https://portal.cenus.gov when you are ready to report online.

ATTN:

GENERAL INSTRUCTIONS

Before filling out this survey, please read carefully each part and all related definitions and instructions. **Note especially:**

- Please report amounts covering all funds and accounts of this government except for any employee retirement funds administered by this government. **Include** bond redemption and interest funds, and construction or development funds, as well as current funds. **Exclude** refunds and transfers between funds or accounts of this government.
- 2. Exclude all school revenue and expenditures for school systems run by this government.
- 3. You may report on either a cash or accrual basis.
- 4. As this survey is used for various kinds of governments, some of the items may not apply to this government. However, read carefully the definition of each item to determine whether it applies to any of this government's transactions.
- Do not delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.

| Enter correct information for any errors in | he mailing address below: |
|---|---------------------------|
| Addressee Title or Department | |
| ATTN: | |
| Street 1 | |
| | |
| Street 2 | |
| City | Chata Zin Cada |
| City | State Zip Code |
| | |

| PAR | T 1 - | ENDING DATE OF | FIS | CAL YEAR | | | | | | | | |
|-----|-------|--|--------|---------------------|----------------------|--------|-----------------|----------------|------|-----------------|---------|------------|
| 2 | bet | ich one of the follo ween July 1, 2022 ilable. Mark "X" only | and | June 30, 2023? | | | | | | | | |
| | | 2022 | | | | | 2 | 023 | | | | |
| | | July | | October | |] | January | | | April | | |
| | | August | | November | |] | February | | | May | | |
| | | September | | December | |] | March | | | June | | |
| PAR | T 2 - | - GOVERNMENT AC | TIV | TY | | | | | | | | |
| 3 | Was | s this government a | activ | e during the fisc | cal year indic | at | ed in quest | ion 2 ? | • | | | |
| | | Yes - Go to 4 | | | | | | | | | | |
| | | No - Continue | | | | | | | | | | |
| | Plea | ase indicate the rea | son | this governmen | t was inactiv | /e | during the | fiscal y | ear | indicated in q | uestion | 2 . |
| | | Closed | | | | | | | | | | |
| | | Open with no rever | nue d | or expenditures | | | | | | | | |
| | | Never existed | | | | | | | | | | |
| | | Other – <i>Specify:</i> | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| PAR | ТЗ- | - REVENUES | | | | | | | | | | |
| 4 | | at was the amount | of t | ax collections du | ring the fisc | al | vear indica | nted in (| 20 f | rom all taxes i | mposed | |
| | by 1 | this government? | 01 1 | ix concenions at | ining the rise | , ca i | year maio | iteu iii (| | iom an taxes i | mposec | • |
| | | lude Levies for debt serv | ice | | | | | | | | | |
| | | Levies for contribut Levies for other fun | | | | | | | | | | |
| | • | Special property tax Taxes collected for Current and delinqu | this (| government by an | other governr | nei | | | | | | |
| | | clude | ent | imounts, penalties | s, and interest | | | | | | | |
| | | Receipts from service Special assessments | | arges | | | | | | | | |
| | • | Interest earnings Fines | | | | | | | | | | |
| | | Any other sources t | hat a | re not taxes or lic | enses | | | | | | | |
| | | Property taxes - Al | | | | | | | | | | |
| | | Report collections du all funds of this gove | | | | or | | | Р | roperty Taxes | | |
| | | • Any taxes collect | tad o | n behalf of other | governmente | | | \$Mil. | | Thou. | Dol. | |
| | | Taxes not measure Payments in lieu | ıred | by value | _ | an | d/or (A) | | | | | |
| | | • rayments in flet | OI (| ando (Silvuiù De le | sported in 😈 | ail | u/01 0 1 | | | | | |
| | | | | Continue | with 4 on the | n | ext page | | | | | |

PART 3 - REVENUES - Continued

| B. | I ocal | sales | tavas |
|----|--------|-------|-------|
| D. | LOGAI | sales | Laxes |

Include

- · Taxes on goods and services, measured as a percent of sales or receipts, or as an amount per unit sold (e.g., gallon, package, etc.)
- Only taxes imposed by this government

- Shares of taxes imposed by another government (should be reported in 5)
- 1. General sales and gross receipts taxes

| ln | CI | п | а | ρ |
|----|----|---|---|---|

- · Sales and use taxes
- Taxes applicable with only specified exceptions (e.g., food and prescribed medicines) to sales of all goods and services or to all gross receipts, whether at a single rate

Tax Revenues

\$Mil.

Thou. Dol.

2. Alcoholic beverages sales tax

Include

- · Taxes on sale of alcoholic beverages, whether collected through government-operated liquor stores or through private outlets
- 4. Motor fuels sales tax

Include

- Taxes on gasoline, diesel oil, aviation fuel, gasohol, ethanol, and any other fuels used in motor vehicles
- 5. Parimutuels tax.....
- 6. Public utilities sales tax

Include

- · Taxes imposed distinctively on public utilities, and measured by gross receipts, gross earnings, or units of service sold, either as a direct tax on consumers or as a percentage of gross receipts of utility
- Telephone, cable, and other telecom taxes (e.g., 911
- 7. Tobacco products tax

Include

- Taxes on sale of tobacco products and synthetic-cigars and cigarettes, including related products like cigarette
- 8. Other sales tax Specify:

 ✓



| • | Lic | ensing and permit taxes - (e.g., license and permit fees exacted (eulation) as a condition to the exercise of a business or nonbusiness | ither for re | evenue raising or | for |
|---|-----|---|--------------|-----------------------|------|
| | reg | ulation) as a condition to the exercise of a business of horibusiness | \$Mil. | Tax Revenues Thou. | Dol. |
| | 1. | Alcoholic beverages licensing and permit taxes | | | |
| | 2. | Amusements licensing and permit taxes | | | |
| | 3. | Motor vehicles licensing and permit taxes | | | |
| | 4. | Public utilities licensing and permit taxes | | | |
| | 5. | Occupation and business licensing and permit taxes (not reported above) | | | |
| | 6. | Other licensing and permit taxes – Specify: | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | Loc | eal income taxes | | | |
| | 1. | Local individual income taxes | | | |
| | | Include | | | |
| | | Taxes on individuals measured by net income and taxes on special types of income (e.g., interest, dividends, income from intangible property, etc.) | | | |
| | | Exclude | | | |
| | | Income tax distribution for revenue sharing from the State or from other governments | | | |
| | 2. | Local corporation net income tax | | | |
| | | Include Tayon on corporations and unincorporated businesses | | | |
| | | Taxes on corporations and unincorporated businesses (when taxed separately from individual income), | | | |
| | | measured by net income, whether on corporations in general or on specific kinds of corporations, such as financial institutions | | | |
| | Otl | er taxes | | | |
| | 1. | Death and gift tax | | | |
| | 2. | Documentary and stock transfer tax | | | |
| | | Savanana tay | | | |
| | 3. | Severance tax | | | |

PART 3 - REVENUES - Continued



What was the amount of intergovernmental revenues received by this government from other governments during the fiscal year indicated in 2?

Include

- Grants
- Shares of taxes imposed by other governments
- Payments in lieu of taxes
- Reimbursements for services performed for other governments
- Payments under the American Recovery and Reinvestment Act of 2009 (ARRA)

- Loans
- Any taxes imposed by this government which were collected for it by another government (should be reported in 4)
- Receipts from utility sales to other governments (should be reported in 6)

| Re | oort total intergovernmental revenue received | \$Mil. | Thou. | Dol. |
|----|---|--------|-------|------|
| Α. | From other local governments | | | |
| В. | From the State | | | |
| | Include | | | |
| | Any amounts financed wholly or in part from Federal grants to the State (i.e., pass-throughs) | | | |
| | Exclude | | | |
| | Collection fees | | | |

PART 3 - REVENUES - Continued



What was the amount of revenues, other than tax and intergovernmental revenues, received by this government during the fiscal year indicated in 2?

Include

• Revenues of all funds

Exclude

- · Refunds and transfers between funds and accounts of this government
- **A. Utility sales revenues -** Gross receipts of any water, electric, gas, or transit systems operated by this government, from utility sales and charges.

| | _ | _ | I — |
|--|---|-------|-----|
| | | | |
| | | | |

| | • | Amounts received from the sale of utility commodities and | Utili | ty Sales Reve | niies | |
|----|-----|--|----------|-----------------------|--------------------|---|
| | | services to the Federal, State, or other local governments | \$Mil. | Thou. | Dol. | |
| | | | | | | |
| | 1. | Water supply system | | | | |
| | | | | | | |
| | 2. | Electric power system | | | | |
| | • | | | | | |
| | 3. | Gas supply system | | | | |
| | 4. | Transit or bus system | | | | |
| В. | sal | her sales and service revenues - Gross receipts from fees, es, rentals, tolls, maintenance assessments, and other charges commodities or services. | | | | _ |
| | | cclude | | | | |
| | | Utility receipts (should be reported in item A.) Amounts received from other governments (should be | • | ula Bara | | |
| | | reported in (5) | \$Mil. | ther Revenue Thou. | e s Dol. | |
| | | | 4 | | 20 | |
| | 1. | Sewerage charges | | | | |
| | | | | | | |
| | 2. | Refuse collection, disposal, and recycling charges | | | | |
| | 3. | Parks and recreation charges (e.g., swimming, golf, | | | | |
| | | auditoriums, etc.) | | | | _ |
| | 4. | Airports | | | | |
| | 4. | Include | | | | |
| | | Rentals and gross sales of gas and oil | | | | |
| | 5. | Hospital charges | | | | |
| | | Include | | | | |
| | | Amounts received on behalf of individual patients under the Medicare program or other insurance-type arrangements | | | | |
| | | Exclude | | | | |
| | | Medicaid and the amounts for hospital purposes received from other governments (should be reported in 5) | | | | |
| | | nom other governments (should be reported in 5) | | | | _ |
| | 6 | Parking facilities (e.g., lots, garages, meters, etc.) | | | | |
| | 6. | raiking lacilities (e.g., lots, garages, fileters, etc.) | | | | _ |
| | 7 | Haveing project reptale (green) | | | | |
| | 7. | Housing project rentals (gross) | | | | _ |
| | | | | | | |

Continue with 6 on the next page

| Т3- | - RE | VENUES - Continued | |
|-----|-------------|--|-------------------------------------|
| | | | |
| | 8. | Highways and other roads | |
| | | Include Bridges Tunnels Ferries | Other Revenues \$Mil. Thou. Dol. |
| | | (a) Operated on a fee or toll basis | |
| | | (b) Other street and highway charges | |
| | | | |
| | 9. | Sea and inland port facilities | |
| | 10. | Miscellaneous commercial activities directly operated by this government (e.g., cemeteries, cable television, telephone utilities, rail lines, etc.) | |
| | 11. | Natural resources charges - Sale of minerals and other natural products from public lands and revenue from agricultural fairs and shows | |
| | 12. | Other sales and service revenues - Specify: | |
| | | Include • Miscellaneous fee collections | |
| | | | |
| | | | |
| | rein imp | ecial assessments - Compulsory contributions and inbursements from owners of property benefited by provements (e.g., streets, sewers, sidewalks, water ensions, etc.) as well as for servicing special essment debt. | |
| | • | Proceeds from sales of special assessment bonds (should be reported in (3)) Maintenance assessments (should be reported in item B.) | |
| D. | | ceipts from sale of property and other capital assets | |
| | | Property sold to other governments | 1 |
| | | clude Tax sales (should be reported in 4) | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | Continue with 6 on the next page | |

PA

| • | Interest earnings - Interest received on all deposits and investment holdings of this government and its agencies. Include | | Ot \$Mil. | ther Revenue | e s Dol. |
|----|---|--------|---------------------|------------------|--------------------|
| | Interest on construction funds | | ΦIVIII. | mou. | DOI. |
| | Interest earnings of any employee pension funds | | | | |
| Ξ. | Fines and forfeits - Receipts from penalties imposed for violations of law and civil penalties | | | | |
| 3. | Rents - Revenues from temporary possession or use of government-owned buildings, land, and other properties | | | | |
| 1. | Royalties - Compensation or portion of proceeds from extraction of natural resources (<i>e.g.</i> , <i>oil</i> , <i>gas</i> , <i>and mineral rights</i>) | | | | |
| - | Private donations - Gifts of cash or securities from private individuals or corporations | | | | |
| J. | Miscellaneous other revenues - Revenues of this government and its agencies not reported in items A. through I. or question 4 through 5. | | | | |
| | Include | | | | |
| | Insurance claims | | | | |
| | Recoveries of prior year expendituresDividends | | | | |
| | Recorded profits from sale of investments | | | | |
| | Payments in lieu of taxes from private sources | | | | |
| | Proceeds from borrowing | | | | |
| | Receipts from sale of security holdings | | | | |
| | Transfers between funds or accounts of this government | | | | |
| | Employee contributions to employee pension funds Interest earnings of any employee pension funds | | | | |
| | Specify and report miscellaneous revenue: | | \$Mil. | Thou. | Dol. |
| | 1. | | | | |
| | | _ | | | |
| | 2. | | | | |
| | | - | | | |
| | 3. | | | | |
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| | 4. | | | | |
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| | 5. | | | | |
| | o . | | | | |
| | | | | | |
| | | \$Bil. | Tota Mil. | I Revenues Thou. | Dol. |
| | | | 13/11/1 | Lhou | 1101 |

| PAI | RT 4 – EXPENDITURES |
|----------|--|
| 8 | Were payments made to other governments for services or programs performed on a reimbursement or cost sharing basis (i.e., intergovernmental expenditures) during the fiscal year indicated in 2? |
| | Yes - Go to 9 |
| | □ No - Go to 10 |
| 9 | What was the amount of payments made to other governments for services or programs performed on a reimbursement or cost-sharing basis (i.e., intergovernmental expenditures) during the fiscal year indicated in ? |
| | Intergovernmental Expenditures |
| | \$Mil. Thou. Dol. |
| | A. To other local governments |
| | B. To the State |
| 1 | What was the amount of direct expenditures by purpose and type during the fiscal year indicated in 2? Include • Expenditures of all funds except those noted in any supplementary instructions with this survey Exclude • Transfer between funds or accounts of this government • Payments made to other governments (should be reported in 9) • Benefits and payments from self-administered employee pension plans |
| | Current Operations - for employee compensation and for supplies, materials, operating leases, and contractual services |
| | Include Gross salaries and wages before deductions Contributions to employee pension plans administered by this government Exclude Capital outlays Depreciation/amortization Benefits and payments made by pension plans administered by this government |
| | Capital Outlays - direct expenditures on construction and purchases of equipment, land, and existing structures |
| | Include Production, additions, replacements, or major structural alterations to buildings and other improvements Capital leases |
| A. | Toll highways - Maintenance, operation, repair, and construction of highways, roads, bridges, ferries, and tunnels operated on a fee or toll basis. |
| | \$Mil. Thou. Dol. |
| | Current operations |
| | Capital outlays |
| | Continue with (1) on the next page |
| | Continue with the off the flext page |

| 3. | Highways - Construction and maintenance of roads, sidewalks and bridges engineering, control, and safety. | ; street light | ting; snow rem | noval; high |
|----|---|-------------------|-----------------------|-------------|
| | Exclude | | | |
| | Street cleaning expenditures (should be reported in item G.) | | | |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | |
| | Capital outlays | | | |
| | - | | | |
| | | | | |
| :- | Financial administration - Office of the finance director, auditor, comptro collection; central accounting, budgeting, and purchasing services, etc. | ller, treasur | er; tax assessr | nent and |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | |
| | Constant and and | | | |
| | Capital outlays | | | |
| | | | | |
| | | | | |
| | | | | |
| ٠. | Central administration - County or city council, aldermen or commissione administrator or manager; clerks office, recorder, planning, zoning, and personal | | city or town | |
| ٠- | Central administration - County or city council, aldermen or commissione administrator or manager; clerks office, recorder, planning, zoning, and personal control of the council, aldermen or commissione administrator or manager; clerks office, recorder, planning, zoning, and personal control of the council, aldermen or commissione administration or city council, aldermen or commissione administration or manager; clerks office, recorder, planning, zoning, and personal control of the council of t | | city or town Thou. | Dol. |
|). | | sonnel. | | Dol. |
| ١- | | sonnel. \$Mil. | | Dol. |
| | administrator or manager; clerks office, recorder, planning, zoning, and pers | sonnel. \$Mil. | | Dol. |
| ٠. | administrator or manager; clerks office, recorder, planning, zoning, and personal content of the | sonnel. \$Mil. | | Dol. |
| | administrator or manager; clerks office, recorder, planning, zoning, and pers | sonnel. \$Mil. | | Dol. |
| ٠. | Current operations | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays | sonnel. \$Mil. | | Dol. |
| | Current operations | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund | sonnel. \$Mil. | Thou. | |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude | sonnel. \$Mil. | | Dol. |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) | sonnel. \$Mil. | Thou. | |
| - | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude | sonnel. \$Mil. | Thou. | |
| - | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) | sonnel. \$Mil. | Thou. | |
| : | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) | sonnel. \$Mil. | Thou. | |
| - | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) Current operations | sonnel. \$Mil. | Thou. | |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) Current operations | sonnel. \$Mil. | Thou. | |
| | Current operations Capital outlays Fire - Firefighting and fire prevention. Include • Ambulance and paramedic services handled by the fire department • Contributions of volunteer fire units • Contributions to a local fire pension fund Exclude • Forest fire protection amounts (should be reported in item U.) Current operations | sonnel. \$Mil. | Thou. | |

| Parks and recreation - Playgrounds; golf courses; swimming pools; museum estivals; zoos, and other cultural activities. | ns; marinas | u communit | |
|---|-------------|---------------|----------------|
| | | s, community | music, dram |
| | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| Capital outlays | | | |
| Solid waste management - Street cleaning and the collection, recycling, and | d disposal | of refuse and | l garbage. |
| | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| Capital outlays | | | |
| Sewerage - Construction, maintenance, and operation of sanitary and storm solants. | - | | |
| Current operations | \$Mil. | Thou. | Dol. |
| Capital outlays | | | |
| Vater supply system | | | |
| | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| Capital outlays | | | |
| lospitals - Construction and operation of hospitals by this government; paym | ents to ho | spitals opera | ted privately. |
| | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| Capital outlays | | | |
| | | | |
| Continue with 10 on the next page | | | |

PART 4 - EXPENDITURES - Continued

K. Health (other than hospitals) - All public health activities; except provision of hospital care.

Include

- Environmental health activities
- · Health regulation and inspection
- · Water and air pollution control
- · Mosquito control
- Animal control warden
- · Inspection of food handling establishments
- Ambulance and paramedic services not part of a fire department
- Public health nursing
- · Vital statistics collection
- · All other services performed directly by the public health department

Exclude

• Payments under public welfare programs (should be reported in item R.)

| | | \$Mil. | Thou. | Dol. |
|----|--|--------------------------------|-----------------------------------|-------------------------------|
| | Current operations | | | |
| | Capital outlays | | | |
| L. | Police - Police agencies for preventing, controlling, or reducing crime; law constable offices; coroners; medical examiners; vehicular inspection activities lock-up operations. Include Contributions to a local police pension fund | enforcement es; traffic cor | activities of s atrol and safe | sheriff and ty activities; |
| | Local court activities (should be reported in item M.) Local correction activities (should be reported in items N. and/or O.) | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| M. | Judicial and legal - All county or municipal court and court-related activities prosecutors, bailiffs, marshals, public defenders, attorneys, legal department departments. Exclude • Activities related to probation and parole (should be reported in item O.) | ts, and cour | | |
| | | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | | | | |
| | Capital outlays | | | |

Continue with no on the next page

| Αľ | RI 4 - EXPENDITURES - Continued | | | |
|----|--|---|--|---------------------|
| | Correctional institutions - Construction, maintenance, and operation of condetention facilities, etc., whether for adults or juveniles. Exclude | | acilities, refori | matories, |
| | Activities related to probation and parole (should be reported in item 0. | .) | | |
| | | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | | | | |
| | | | | |
| | Capital outlays | | | |
| | | | | |
| | Other corrections - Activities related to probation and parole, training of chalfway houses, and community corrections centers. | corrections o | fficers, nonre | sidential |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | |
| | Capital outlays | | | |
| | | | | |
| | General public buildings - Construction, maintenance, and operation of go to particular purposes. <i>Report single-purpose buildings</i> (e.g., firehouses, hos | | | |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hos | spitals, etc.) \$Mil. | at the purpos | e specified Dol. |
| | | spitals, etc.) \$Mil. | at the purpos | e specified Dol. |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hos | spitals, etc.) \$Mil. | at the purpos | e specified Dol. |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hos | spitals, etc.) \$Mil. | at the purpos | e specified Dol. |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hos | spitals, etc.) \$Mil. | at the purpos | e specified Dol. |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hose continuous for the continuou | spitals, etc.) \$Mil. | at the purpos | e specified |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hose | spitals, etc.) \$Mil. | at the purpos | e specified |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | to particular purposes. Report single-purpose buildings (e.g., firehouses, hose continuous for the continuou | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. Current operations | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. Current operations | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. Current operations | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |
| | Current operations Capital outlays Libraries - Payments to nongovernmental libraries as well as expenditures government. Current operations | spitals, etc.) \$Mil. for libraries \$Mil. | at the purpos Thou. operated by the state of the state o | be specified Dol. |

| PA | RT 4 - EXPENDITURES - Continued | | | |
|----|---|---|-------------------------------|------------------|
| R. | Public welfare - Support of, and assistance to, needy persons, including exclude | xpenditures fr | om State and | d Federal grants |
| | Any payments to the State for this government's share of the welfare of | osts (<i>should l</i> | e reported in | 9) |
| | Welfare institutions operated by this government, including nursing hom elderly, and indigent care institutions. | ies, veterans' | homes, home | es for the |
| | | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| | 2. All other welfare expenditures Include | | | |
| | Money paid directly to needy persons (e.g., Federal aid programs, Temp Families, general relief, home relief, poor relief, etc.). Payments to landlords, utilities, vendors, etc., for rent, goods, and service other than for medical and hospital care. Payments to private vendors for medical and hospital care provided to nother public welfare - Administration of relief and assistance, foster care programs, and other welfare activities not reported in item R.1. Exclude Payments to hospital or health agencies operated by this government (s) | es furnished t eedy persons , related com | o needy pers munity action | ons, |
| | к.) | | | |
| | | \$Mil. | Thou. | Dol. |
| s | Capital outlays | | tion of the n | ublic and |
| 0. | inspection of hazardous activities (including building inspection), except whealth, natural resources, etc.). | | | |
| | | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| т. | Housing and community development - Gross expenditures for urban activities. | renewal hous | ing projects a | and similar |
| | | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| | Continue with 10 on the post nego | | | |

| PA | RT 4 – EXPENDITURES - Continued | | | |
|------------|--|--------------|----------------|-----------|
| U. | Natural resources - Flood control, soil and water conservation, drainage, protection, agricultural fairs, and any other activities for promotion of agricultures. | | onservation of | f natural |
| | Current operations | | | |
| | Capital outlays | | | |
| V. | Airports | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| N. | Electric power system | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| ĸ. | Parking facilities - Garages, parking lots, and all purchases and maintenant | nce of meter | s, etc. | |
| | Current operations | \$Mil. | Thou. | Dol. |
| | Capital outlays | | | |
| ′ . | Gas supply system | \$Mil. | Thou. | Dol. |
| | Current operations | | | |
| | Capital outlays | | | |
| | Continue with 🕡 on the next page | | | |

| P# | ART 4 - EXPENDITURES - Continued | | | |
|----|---|----------------------|---------------|------------|
| | | | | |
| - | Turnella en hora constant | | | |
| ۷. | Transit or bus system | | | |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | 1 |
| | | | | |
| | Capital outlays | | | |
| | | | | |
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| | | | | |
| AA | A. Sea and inland port facilities - Docks, wharves, harbors, piers, canals, | waterways, | and related w | arehouses. |
| | | \$Mil. | Thou. | Dol. |
| | | φινιιι. | mou. | DOI. |
| | Current operations | | | |
| | Current operations | | | |
| | | | | |
| | Capital outlays | | | |
| | Capital outlays | | | |
| | | | | |
| | | | | |
| | | | | |
| ВВ | Miscellaneous commercial activities - Directly operated by this gover television, telephone utilities, rail lines, etc.). | nment (<i>e.g.,</i> | cemeteries, d | cable |
| | tolovioloti, tolophone utilitios, rail lilios, etc., | | | |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | 1 |
| | | | | |
| | Capital outlays | | | |
| | | | | |
| | | | | |
| | | | | |
| CC | · · · · · · · · · · · · · · · · · · · | hort-term or | non-guarante | ed |
| | obligations as well as general obligations. | | | |
| | Include | | | |
| | Capitalized interest paid on construction loans Interest on water supply system debt | | | |
| | 1. Interest on water supply system debt | \$Mil. | Thou. | Dol. |
| | | φινιιι. | mou. | Doi: |
| | Current operations | | | |
| | | | | |
| | | | | |
| | Interest on electric power system debt | | | |
| | | \$Mil. | Thou. | Dol. |
| | | | | |
| | Current operations | | | |
| | | | | |
| | Continue with 10 on the next page | | | |
| | Continue with HU on the next hade | | | |

| RT 4 - EXPENDITURES - Continued | | | |
|--|--------------|--------------|------------|
| 3. Interest on gas supply system debt | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| 4. Interest on transit or bus system debt | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| 5. Interest on all other debt | \$Mil. | Thou. | Dol. |
| Current operations | | | |
| All other expenditures - Any amounts which have not been allocated ablinclude • Employer contributions to a state administered retirement system or to | | | rity |
| Administration Judgments and insurance premiums Government service agencies, such as a central garage or an IT or engineer than one functional agency, and whose expenses are not allocat Recorded losses from sale of investments | gineering de | partment, wh | ich serves |
| Payments for retirement of debt Payments for purchase of securities Transfers between funds or agencies of this government Benefits and payments from self-administered employee pension fund | ls | | |
| Other expenditures - Specify: | | | |
| | \$Mil. | Thou. | Dol. |
| | | | |
| Current operations | | | |
| Current operations | | | |
| | | | |
| Capital outlays | | | |
| Capital outlays | \$Mil. | Thou. | Dol. |
| Capital outlays | \$Mil. | Thou. | Dol. |
| Capital outlays Other expenditures - Specify: | \$Mil. | Thou. | Dol. |

| PAR | T 4 - EXPENDITURES - Continued | | | | |
|-----|--|----------------------|----------------|---------------------|----------------------|
| | 1 | | | | 1 |
| 2 | . Other expenditures - Specify: | | | | |
| 3. | . Other expenditures - Specify: | | | | |
| | | | \$Mil. | Thou. | Dol. |
| | | | φινιιι. | mou. | Doi. |
| | Ourself amounting | | | | |
| | Current operations | · · · · · — | | | |
| | | | | | |
| | Consider a continue | | | | |
| | Capital outlays | · · · · · · <u> </u> | | | |
| | | | | | |
| 4 | . Other expenditures - Specify: | | | | |
| | . , | | | | |
| | | | \$Mil. | Thou. | Dol. |
| | | | | | |
| | Current operations | | | | |
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| | Capital outlays | | | | |
| | • | | | | |
| | | | | | |
| 5 | o. Other expenditures - Specify: | | | | |
| | , , , | | | | |
| | | | \$Mil. | Thou. | Dol. |
| | | | φίνιιι. | mou. | Doi: |
| | Current operations | | | | |
| | Current operations | · · · · · · <u> </u> | | | |
| | | | | | 1 |
| | Capital outlays | | | | |
| | Capital outlays | · · · · · <u> </u> | | | |
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| | | | | | |
| | | \$Bil. | Tota Mil. | I Expenditure Thou. | es Dol. |
| | | фВП. | IVIII. | inou. | Doi. |
| T | What was the total amount of expenditures reported on this worksheet (Sum of through 10)? | | | | |
| | reported on this worksneet (Sum or of through the sum of the sum o | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | ъ. | | |
| 12 | What was the total amount of expenditures for salaries | \$Bil. | Person Mil. | nel Expendit | u res Dol. |
| | and wages reported in 10? | ψυII. | | mou. | 50 |
| | Exclude • Fringe benefits | | | | |
| | - Thinge beliefits | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| PART | 5 - IN | DERT | FDN | FSS |
|------|---------|------|-----|-----|
| | 3 - IIV | DEDI | | -00 |



What was the total amount of long-term debt held by this government for the fiscal year indicated in 2? Report bonds, mortgages, etc., with an original term of more than one year, including revenue bonds and special assessment bonds as well as general obligation bonds.

Include

Debt refunded

Exclude

- Capital leases (should be reported in 10)
- Conduit debt

| A. | W | nat was this government's debt? | Long-term Debt | | | |
|----|----|---|----------------|------|-------|------|
| | | | \$Bil. | Mil. | Thou. | Dol. |
| | 1. | Outstanding at beginning of fiscal year + | | | | |
| | 2. | Issued during fiscal year (include all refunding issues)+ | | | | |
| | 3. | Retired during fiscal year (include debt refunded) | | | | |
| | 4. | Outstanding total at end of fiscal year (items A.1. + A.2 A.3.) | | | | |

What was the total amount of short-term debt held by this government for the fiscal year indicated in 2? Report tax-anticipation notes, bond-anticipation notes, interest-bearing warrants, and other obligations with an original term of one year or less.

Exclude

· Accounts payable

| | | Short-term Debt | | | |
|----|--|-----------------|------|-------|------|
| | | \$Bil. | Mil. | Thou. | Dol. |
| | | | | | |
| A. | Amount outstanding at beginning of fiscal year | | | | |
| | | | | | |
| В. | Amount outstanding at end of fiscal year | | | | |

PART 6 - CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR



What was the total amount of cash and investments (at market value) held by this government at the end of the fiscal year indicated in 2?

Include

- Total amount of cash and cash equivalents on hand and on deposit
- Investments in Federal government, Federal agency, State and local government, and non-governmental securities
- Reserves held for redemption of long-term debt
- Unexpended from sale of bond issues pending disbursement

Exclude

- Accounts receivable
- Value of real property
- All non-security assets
- · Employee retirement funds

| Am | ount | at | End |
|----|-------|----|-----|
| of | Fisca | ΙY | ear |

\$Bil. Mil. Thou.

Dol.

| T-4-1 b d : 4 b -ld -4 d -f fi l | |
|---|--|
| Total cash and investments held at end of fiscal year | |

PART 7 - REMARKS



Use this space for any explanations that may be essential in understanding the reported data.

nclude

- · Any significant changes occurring within the last year
- Any difficulties encountered in completing this survey

PART 8 - CONTACT INFORMATION

| T | Who | shou | ld be | cont | tacted |
|---|------|------|-------|------|--------|
| | Mana | | + + | | |

Who should be contacted to answer questions about data reported on this survey?

| | itaat paraaii | | | | and port | | | |
|--------------|---------------|------|-----------|---|----------|-----------------|-----------------|--------|
| | | | | | | | | |
| Area code ai | nd phone num | nber | Extension | 1 | Area c | ode and t | fax numbe | r |
| | | | | | | | | |
| Email Addre | ss | | | | | Date co (MM) | mpleted (DD) | (YYYY) |
| | | | | | | | | |

Title of contact person

Thank you for completing this survey. Retain a copy of the completed report for your records.

NOTE: The U.S. Census Bureau receives its authorization to conduct this survey from Title 13, United States Code, Sections 161 and 182. This survey has been approved by the Office of Management and Budget (OMB) and given the number 0607-0585. Please note the number displayed in the upper right-hand corner of this worksheet. Display of this number confirms that we have approval from OMB to conduct this survey. If this number was not displayed, under the Paperwork Reduction Act, we could not request your participation in this voluntary survey. Information provided on this questionnaire compiled from or customarily provided in public records are exempt from confidential treatment as cited in Title 13, United States Code, Section 9(b).

Please note that this is a national survey that applies to governments with wide differences in the size of their service areas, the amount of population served, and the extent and complexity of their activities. Public reporting burden for this collection of information is estimated to vary from 3 hours to 40 hours per response, with an average of 6 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.



2023 ANNUAL SURVEY OF LOCAL GOVERNMENT FINANCES Multi-Function Special Agencies

OMB No. 0607-0585: Approval Expires 07/31/2024

DUE DATE:

December 12, 2023

Need help or have questions?

Visit

https://www.census.gov/ programs-surveys/govfinances.html

Call

1-800-832-2839 weekdays, 8AM to 5PM ET

WORKSHEET

DO NOT use this worksheet to respond to the survey. It is intended to assist you with gathering and preparing your data prior to reporting online.

Return to https://portal.cenus.gov when you are ready to report online.

ATTN:

GENERAL INSTRUCTIONS

Before filling out this survey, please read carefully each part and all related definitions and instructions. **Note especially:**

- 1. Please report amounts covering all funds and accounts of this agency except for any employee retirement funds administered by this agency. **Include** bond redemption and interest funds, and construction or development funds, as well as current funds. **Exclude** refunds and transfers between funds or accounts of this agency.
- 2. You may report on either a cash or accrual basis.
- 3. As this survey is used for various kinds of agencies, some of the items may not apply to this agency. However, read carefully the definition of each item to determine whether it applies to any of this agency's transactions.
- Do not delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.

| Enter correct information for any erro | ors in the mailing address | belo | w: | |
|--|----------------------------|------|----------|--|
| Addressee Title or Department | | | | |
| ATTN: | | | | |
| Street 1 | | | | |
| | | | | |
| Street 2 | | | | |
| City | Sta | te | Zip Code | |
| , | | | , | |
| | | | | |

| PAR | T 1 - | END | DING DATE OF | FISC | AL YEAR | | | | | |
|-----|-------|--------|---|-------|----------------------|-----------------|-------|----------------|--------------|-----------------------------------|
| 2 | bet | ween | ne of the follow July 1, 2022 a Mark "X" only o | and . | June 30, 202 | | | | | r that ended recent one may be |
| | | | 2022 | | | | | 202 | 3 | |
| | | Jul | у | | October | | | January | | April |
| | | Aug | gust | | November | | | February | | May |
| | | Sep | otember | | December | | | March | | June |
| PAR | T 2 - | GO\ | /ERNMENT AC | TIVI | ГҮ | | | | | |
| 3 | Was | this | government a | ctiv | e during the | fiscal year ind | licat | ed in questio | n ② ? | |
| | | Yes | s - Go to 4 | | | | | | | |
| | | No | - Continue | | | | | | | |
| | Plea | ase iı | ndicate the rea | son | this governm | ent was inac | tive | during the fis | cal year i | indicated in question 2. |
| | | Clo | sed | | | | | | | |
| | | Оре | en with no rever | nue o | r expenditures | ; | | | | |
| | | Nev | ver existed | | | | | | | |
| | | Oth | er – <i>Specify:</i> 📝 | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| PAR | A. | Plea | /ERNMENT FU se select the t | ype(s | of <u>utility fu</u> | nctions this | gove | rnment perfo | rmed dur | ing the fiscal year |
| | | indic | cated in questi | on 🙋 | . Select all t | that apply: | | | | |
| | | | Electric Supply | | | | | | | |
| | | | Gas Supply | | | | | | | |
| | | | Public Mass Tr | ansit | | | | | | |
| | | | Sea and Inland | Port | Facilities (Wat | ter Transportat | ion) | | | |
| | | | Sewerage | | | | | | | |
| | | | Solid Waste Ma | anage | ement | | | | | |
| | | | Water Supply | | | | | | | |
| | | | None of the ab | ove | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

Continue with 4 on the next page

| PAR | T 3 | – GO\ | VERNMENT FUNCTION Continued |
|-----|-----|---------------|--|
| 4 | В. | Plea year | se select the type(s) of <u>natural resource functions</u> this government performed during the fiscal indicated in question 2. Select all that apply: |
| | | | Conservation (Soil, Water, Land) |
| | | | Drainage |
| | | | Flood Control |
| | | | Irrigation |
| | | | Reclamation |
| | | | Other Natural Resource Activities – Specify: |
| | | | |
| | | | None of the above |
| | C. | Plea indic | se select any of the following <u>other functions</u> this government performed during the fiscal year cated in question ②. Select all that apply: |
| | | | Fire Protection |
| | | | Police Protection |
| | | | Hospitals |
| | | | Health (excluding hospitals) |
| | | | Toll Highways |
| | | | Highways (excluding tolls) |
| | | | Parks and Recreation |
| | | | None of the above |
| | D. | | se specify any <u>additional functions</u> this government performed that were not listed in 4B or 4C. |
| | | | Other – Specify: |
| | | | Other – Specify: |
| | | | Other – Specify: |
| | | | |

PART 4 - REVENUES



What was the amount of tax collections during the fiscal year indicated in 2 from all taxes imposed by this agency?

Include

- · Levies for debt service
- Levies for contributions to pension funds
- Levies for other funds or purposes
- Special property taxes (e.g., automobiles or intangible property)
- Taxes collected for this agency by another government
- Current and delinquent amounts, penalties, and interest

- Receipts from service charges
- Special assessments
- Interest earnings
- Fine:
- Any other sources that are not taxes or licenses

| Δ | Property taxes - All taxes on property, real or personal. | P | roperty Taxe | es |
|----|--|---------|--------------|----------|
| Α. | | \$Mil. | Thou. | Dol. |
| | Exclude | | | |
| | Taxes not measured by value | | | |
| | Payments in lieu of taxes (should be reported in 6 and/or 7) | | | |
| B. | Sales taxes | | Sales taxes | |
| В. | Jaies takes | ΦNA:I | Thou. | Dal |
| | | \$Mil. | i nou. | Dol. |
| | 4. Consultation to | | | |
| | 1. General sales tax | | | |
| | | | | |
| | 2. Public utilities sales tax | | | |
| | | | | |
| | 3. Other sales and gross receipts sales tax | | | |
| | g | | | |
| | | т | ax Revenues | ; |
| C. | Licensing and permit taxes - (e.g., license and permit | \$Mil. | Thou. | Dol. |
| | fees exacted (either for revenue raising or for regulation) | φινιιι. | mou. | Боі. |
| | as a condition to the exercise of a business or | | | |
| | nonbusiness privilege.) | | | |
| | | | | |
| | | | | |
| D. | All other taxes – Specify: | | | |
| | | | | |
| | | | | |
| | | | | |

Intergovernmental Revenues

PART 4 - REVENUES - Continued



What was the amount of intergovernmental revenue received by this agency from other governments during the fiscal year indicated in question 2? (If none, enter a zero.)

Include

- Grants
- Shares of taxes imposed by other governments
- Payments in lieu of taxes
- Reimbursements for services performed for other governments
- Payments under the American Recovery and Reinvestment Act of 2009 (ARRA)

Exclude

- Loans
- Any taxes imposed by this agency which were collected for it by another government (report in 5)
- Receipts from utility sales to other governments (*report in* **7**)

| Re | port total intergovernmental revenue received | \$Mil. | Thou. | Dol. |
|----|---|--------|-------|------|
| A. | From other local governments | | | |
| В. | From the State | | | |
| | Include | | | |
| | Any amounts financed wholly or in part from Federal grants to the State (i.e., pass-throughs) | | | |
| | Exclude | | | |
| | Collection fees | | | |
| | | | | |



For each of this agency's functions listed below in Column 1, what was the amount of revenues obtained from current charges, as defined in Column 2, for commodities and services provided by this agency from all funds, other than taxes and intergovernmental revenues, during the fiscal year indicated in question 2. (If none, enter a zero.)

A. Current charges

Include

• Utility services, including sales to the Federal, State, or other local governments

Exclude

• Grants and other amounts received from the Federal, State and other local governments (report in 6)

| Column 1 | | Column 2 | | |
|----------|--|----------|------|--|
| Function | Current Charges: gross receipts from fees, sales, rentals, tolls, maintenance assessments, and other charges for commodities and services | | | |
| | \$Mil. | Thou. | Dol. | |
| | | | | |
| | | | | |
| | | | | |

| В. | Special assessments - Compulsory contributions and reimbursements from owners of property benefited by improvements (e.g., streets, sewers, sidewalks, water extensions, etc.) as well as for servicing special assessment debt. | | | | |
|----------|---|------|--------|------------------------|--------------------|
| | | | | Other Revenue | es |
| | Proceeds from sales of special assessment bonds (report in (5)) Maintenance assessments (should be reported in item A.) | | \$Mil. | Thou. | Dol. |
| C. | Receipts from sale of property and other capital assets | _ | | | |
| . | Include • Property sold to other governments | | | | |
| | • Tax sales (should be reported in 5) | _ | | | |
| D. | Interest earnings - Interest received on all deposits and investment holdings of this agency. | | | | |
| | Include • Interest on construction funds | | | | |
| | Exclude ■ Interest earnings of any employee pension funds | _ | | | |
| E. | Fines and forfeits - Receipts from penalties imposed for violations of law and civil penalties | _ | | | |
| F. | Royalties - Compensation or portion of proceeds from extraction of natural resources (e.g., oil, gas, and mineral rights) | _ | | | |
| G. | Private donations - Gifts of cash or securities from private individuals or corporations | | | | |
| Н. | Miscellaneous other revenues - Revenues of this agency not reported in items A. through G. or questions 5 through G. | | | | |
| | Include Insurance claims Recoveries of prior year expenditures Dividends Recorded profits from sale of investments Payments in lieu of taxes from private sources | | | | |
| | Exclude | | | | |
| | Proceeds from borrowing Receipts from sale of security holdings Transfers between funds or accounts of this agency Employee contributions to employee pension funds Interest earnings of any employee pension funds | | \$Mil. | Other Revenue Thou. | e s Dol. |
| | | _ | To | tal Revenues | |
| | \$ | Bil. | Mil. | Thou. | Dol. |

| | ☐ Yes – Go to 10 | | | | |
|---|---|---|-----------------------|----------------|---------|
| | \square No – Go to \bigcirc | | | | |
| | What was the amount of payments made to other government on a reimbursement or cost-sharing basis during the fiscal year enter a zero.) | | | | |
| | | Inte | ergovernm | nental Expend | ditures |
| | | \$Bil. | Mil. | Thou. | Do |
| | A. To other local governments | | | | |
| | A. To other local governments | | | | |
| | | \$Bil. | Mil. | Thou. | Do |
| | B. To the State | | | | |
| | b. To the State | | | | |
| | question ②? (If none, enter a zero.) Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency | | ed by this ag | gency | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this g Exclude | overnment | ed by this a | gency | |
| | Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension | overnment | ed by this aç Mil. | gency Thou. | Do |
| - | Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension | overnment on plans | | | Do |
| | Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension | overnment on plans \$Bil. | | | Do |
| | Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension Interest on debt (report in 12) | overnment on plans \$Bil. | | | Do |
| | Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension Interest on debt (report in 12) | overnment on plans \$Bil. | Mil. | Thou. | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations | overnment on plans \$Bil. | Mil. | Thou. | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations | overnment on plans \$Bil. | Mil. | Thou. | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 0) Benefits and payments from self-administered employee pension interest on debt (report in 2) Current operations Capital outlays | sn plans \$Bil. | Mil. | Thou. | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations | sn plans \$Bil. | Mil. | Thou. | |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this g Exclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations Current operations Current operations | spernment specification plans specification \$Bil. | Mil. | Thou. | |
| - | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this gexclude Transfer between funds or accounts of this agency Payments made to other governments (report in 0) Benefits and payments from self-administered employee pension interest on debt (report in 2) Current operations Capital outlays | spernment specification plans specification \$Bil. | Mil. | Thou. | Do |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this g Exclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations Current operations Current operations | spernment specification plans specification \$Bil. | Mil. | Thou. | Do |
| | Include Expenditures of all funds other than employee-retirement funds Contributions to employee pension plans administered by this g Exclude Transfer between funds or accounts of this agency Payments made to other governments (report in 10) Benefits and payments from self-administered employee pension interest on debt (report in 12) Current operations Current operations Current operations | spernment specification plans specification | Mil. | Thou. | |

| ago | _ | | | | | |
|----------|--|--------|---------|--------------|------|--|
| PAI | RT 5 - EXPENDITURES - Continued | | | | | |
| 12 | What was the total amount of interest paid on long-term and during the fiscal year ending indicated in question 2? (If none include • Capitalized interest paid on construction loans | | | | | |
| | ExcludeDebt retirement (should be reported in (5)) | | \$Mil. | Thou. | Dol. | |
| | - Best Tetilement (Should be Teported III 18) | | | | | |
| | A. Interest on water supply system debt | | | | | |
| | B. Interest on electric power system debt | – | | | | |
| | C. Interest on gas supply system debt | – | | | | |
| | D. Interest on transit or bus system debt | | | | | |
| | E. Interest on all other debt | | | | | |
| | | | Total | Expenditure | s | |
| | | \$Bil. | Mil. | Thou. | Dol. | |
| 13 | What was the total amount of expenditures reported on this form (Sum of through ?)? | | | | | |
| a | Milest was the total amount of amountitures for relative and | | Personn | el Expenditu | ires | |
| 14 | What was the total amount of expenditures for salaries and | \$Bil. | Mil. | Thou. | Dol. | |

wages reported in 11

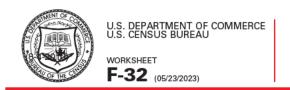
| | t was the total amount of long-term debt held by this agated in question ②? (If none, enter a zero). | gency udi | ing the its | oui year enui | y |
|--|---|--|---|---------------------------------------|---------------------|
| Incl | | | | | |
| | Debt refunded | | | | |
| | lude | | | | |
| | Capital leases (<i>should be reported in</i> (1) Amounts for compensated absences | | | | |
| | Conduit debt | | | | |
| | | | Long-t | erm Debt | |
| A. V | What was this agency's debt? | \$Bil. | Mil. | Thou. | Dol. |
| 1 | . Outstanding at beginning of fiscal year + | | | | |
| | - | | | | |
| 2 | 2. Issued during fiscal year (include all refunding issues) | | | | |
| | (module an rotationing todate) | | | | |
| 3 | 8. Retired during fiscal year | | | | |
| | (include debt refunded) | | | | |
| 4 | . Outstanding total at end of fiscal year | | | | |
| | (items A.1. + A.2 A.3.) = | | | | |
| indic Exc | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). Iude Accounts payable | agency du \$Bil. | | scal year end t-term Debt Thou. | |
| indic Exc • | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). | | Shor | t-term Debt | |
| Exc • | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). lude Accounts payable Amount outstanding at beginning of fiscal year | | Shor | t-term Debt | ling Dol. |
| A. A. | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). lude Accounts payable Amount outstanding at beginning of fiscal year | \$Bil. | Shor | t-term Debt | |
| A. A. | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). lude Accounts payable Amount outstanding at beginning of fiscal year | \$Bil. | Shor | t-term Debt | |
| A. A. A. A. Wha | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). lude Accounts payable Amount outstanding at beginning of fiscal year | \$Bil. | Shor Mil. | t-term Debt Thou. | Dol |
| A. A. A. Whaend | t was the total amount of short-term debt held by this acated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year Amount outstanding at end of fiscal year | \$Bil. | Shor Mil. | t-term Debt Thou. | Dol. |
| A. A. A. Whaend Incl | t was the total amount of short-term debt held by this acated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR Was the total amount of cash and investments (at material year ending indicated in question ②? (If not ude) Total amount of cash and cash equivalents on hand and on desired. | \$Bil. EAR arket value one, enter a | Shor Mil. e) held by to a zero). | t-term Debt Thou. | Dol. |
| A. A. A. Whaend Incl | t was the total amount of short-term debt held by this acated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year Amount outstanding at end of fiscal year | \$Bil. EAR arket value one, enter a | Shor Mil. e) held by to a zero). | t-term Debt Thou. | Dol. |
| A. A. A. What end Incl. | t was the total amount of short-term debt held by this acated in question (2)? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR OF the fiscal year ending indicated in question (2)? (If not ude) Total amount of cash and cash equivalents on hand and on dinvestments in Federal government, Federal agency, State an non-governmental securities Reserves held for redemption of long-term debt | \$Bil. arket value one, enter a leposit d local gov | Shor Mil. e) held by to a zero). | t-term Debt Thou. | Dol. |
| A. A | t was the total amount of short-term debt held by this acated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR WAS the total amount of cash and investments (at material year ending indicated in question ②? (If notated in question ②? (If notated in payable)) Total amount of cash and cash equivalents on hand and on delivestments in Federal government, Federal agency, State an non-governmental securities Reserves held for redemption of long-term debt Unexpended from sale of bond issues pending disbursement | \$Bil. arket value one, enter a leposit d local gov | Shor Mil. e) held by to a zero). | t-term Debt Thou. | Dol. |
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| A. A | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR WAS the total amount of cash and investments (at material of the fiscal year ending indicated in question ②? (If not ude) Total amount of cash and cash equivalents on hand and on delinvestments in Federal government, Federal agency, State an non-governmental securities Reserves held for redemption of long-term debt Unexpended from sale of bond issues pending disbursement lude Accounts receivable Value of real property All non-security assets | \$Bil. arket value one, enter a leposit d local gov | Shor Mil. | t-term Debt Thou. this agency a | Dol. |
| A. A | t was the total amount of short-term debt held by this a cated in question ②? (If none, enter a zero). Iude Accounts payable Amount outstanding at beginning of fiscal year CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR Was the total amount of cash and investments (at man of the fiscal year ending indicated in question ②? (If not ude) Total amount of cash and cash equivalents on hand and on delinvestments in Federal government, Federal agency, State an non-governmental securities Reserves held for redemption of long-term debt Unexpended from sale of bond issues pending disbursement lude Accounts receivable Value of real property | \$Bil. arket value one, enter a leposit d local gov | Shor Mil. | t-term Debt Thou. | Dol. |

| ۱R | | | | | | | | | | |
|-----|---|--------------------------------|------------------------------------|------|-------|---------------------------|-------|-----------------------------|--------|--------------|
| | T 8 – REMARKS | | | | | | | | | |
|) | Use this space for any explanations that | may be esse | ential in u | nde | ersta | nding | the | reported | d data | n. |
| | Include | | | | | | | | | |
| | Any significant changes occurring within Any difficulties encountered in completir | i the last yea na this form | r | | | | | | | |
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| .R | T 9 – CONTACT INFORMATION | | | | | | | | | |
| | T 9 – CONTACT INFORMATION Who should be contacted to answer gues | stions about | t data repo | orte | ed on | this f | form | .? | | |
| AR' | Who should be contacted to answer ques | etions about | | | | | | | | |
| | | etions about | t data repo Title of con | | | | | | | |
| | Who should be contacted to answer ques | | | | | | | | | |
| | Who should be contacted to answer ques | etions about | | ntac | t per | son - F | Pleas | | er | |
| | Who should be contacted to answer ques Name of contact person - Please print | | | ntac | t per | son - F | Pleas | e print | er | |
| | Who should be contacted to answer ques Name of contact person - Please print | | | ntac | t per | son - F | Pleas | e print | er | |
| | Who should be contacted to answer ques Name of contact person - Please print Area code and phone number | | | ntac | t per | son - F code a Date | nd fa | e print ax numbe m was co | mplet | ed |
| | Who should be contacted to answer ques Name of contact person - Please print | | | ntac | t per | son - F | nd fa | e print | mplet | ed (YYYY) |

Thank you for completing this form. Retain a copy of the completed questionnaire for your records.

NOTE: The U.S. Census Bureau receives its authorization to conduct this survey from Title 13, United States Code, Sections 161 and 182. This form has been approved by the Office of Management and Budget (OMB) and given the number 0607-0585. Please note the number displayed in the upper right-hand corner of this form. Display of this number confirms that we have approval from OMB to conduct this survey. If this number was not displayed, under the Paperwork Reduction Act, we could not request your participation in this voluntary survey. Information provided on this questionnaire compiled from or customarily provided in public records are exempt from confidential treatment as cited in Title 13, United States Code, Section 9(b).

Please note that this is a national form that applies to governments with wide differences in the size of their service areas, the amount of population served, and the extent and complexity of their activities. Public reporting burden for this collection of information is estimated to vary from 2 hours to 8 hours per response, with an average of 3 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: ECON Survey Comments 0607-0585, U.S. Census Bureau, 4600 Silver Hill Road, EMD-8K122, Washington, DC 20233. You may e-mail comments to ECON.Survey.Comments@census.gov; use ECON Survey Comments 0607-0585 as the subject.



2023 ANNUAL SURVEY OF LOCAL GOVERNMENT FINANCES Special Agencies

OMB No. 0607-0585: Approval Expires 07/31/2024

DUE DATE:

December 12, 2023

Need help or have questions?

Visit

https://www.census.gov/ programs-surveys/govfinances.html

Call

1-800-832-2839 weekdays, 8AM to 5PM ET

WORKSHEET

DO NOT use this worksheet to respond to the survey. It is intended to assist you with gathering and preparing your data prior to reporting online.

Return to https://portal.census.gov when you are ready to report online.

ATTN:

-

GENERAL INSTRUCTIONS

Before filling out this survey, please read carefully each part and all related definitions and instructions. Note especially:

- Please report amounts covering all funds and accounts of this agency except for any employee retirement funds administered by this agency. **Include** bond redemption and interest funds, and construction or development funds, as well as current funds. **Exclude** refunds and transfers between funds or accounts of this agency.
- 2. You may report on either a cash or accrual basis.
- 3. As this survey is used for various kinds of agencies, some of the items may not apply to this agency. However, read carefully the definition of each item to determine whether it applies to any of this agency's transactions.
- Do not delay reporting to await finally audited figures, if substantially accurate figures can be supplied on a preliminary basis.

| Addressee Ti | tle or Departme | ant | | | | |
|--------------|-----------------|------|--|-------|----------|--|
| | пе от Берагин | 5110 | | | | |
| ATTN: | | | | | | |
| Street 1 | | | | | | |
| | | | | | | |
| Street 2 | | | | | | |
| City | | | | State | Zip Code | |

| PART 1 – ENDING DATE OF FISCAL YEAR | | | | | | | | |
|-------------------------------------|--------------------------------------|---|------------|-------------------|-----------------------------|----------------|--------------|---|
| 2 | July | | | | | | | ar that ended between may be available. Mark |
| | 2022 | | | | | | | |
| | | July | | October | | January | | April |
| | | August | | November | | February | | May |
| | | September | | December | | March | , 📮 | June |
| PAR | T 2 - | GOVERNMENT | T ACTIVI | TY | | | | |
| 3 | Was | this governme | ent activ | e during the fisc | al year indicat | ted in questio | n ② ? | |
| | | Yes - Go to 4 |) | | | | | |
| | | No - Continue | | | | | | |
| | Plea | se indicate the | e reason | this government | t was inactive | during the fis | scal year | indicated in question 2 |
| | | Closed | | | | | | |
| | Open with no revenue or expenditures | | | | | | | |
| | ☐ Never existed | | | | | | | |
| | Other – Specify: 📈 | | | | | | | |
| | | | | | | | | |
| D 4 D | T 0 | COVERNMEN | FUNCTIO | | | | | |
| 4 | A. | GOVERNMET Please select t indicated in qu | he type(s | | tions this gove t apply: | ernment perfo | rmed dur | ing the fiscal year |
| | | ☐ Electric Su | ipply | | | | | |
| | | Gas Suppl | У | | | | | |
| | | Public Mas | ss Transit | | | | | |
| | | Sea and In | land Port | Facilities (Water | Transportation) | | | |
| | | Sewerage | | | | | | |
| | | ☐ Solid Was | te Manag | ement | | | | |
| | | ■ Water Sup | ply | | | | | |
| | | ■ None of the | ne above | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Continue with 4 on the next page

| PAR | ТЗ. | - GO\ | /ERNMENT FUNCTION - Continued |
|-----|-----|----------------|--|
| 4 | В. | Plea: year | se select the type(s) of <u>natural resource functions</u> this government performed during the fiscal indicated in question 2 . Select all that apply: |
| | | | Conservation (Soil, Water, Land) |
| | | | Drainage |
| | | | Flood Control |
| | | | Irrigation |
| | | | Reclamation |
| | | | Other Natural Resource Activities – Specify: 📈 |
| | | | |
| | | | None of the above |
| | C. | Pleas indic | se select any of the following <u>other functions</u> this government performed during the fiscal year cated in question ②. Select all that apply: |
| | | | Fire Protection |
| | | | Police Protection |
| | | | Hospitals |
| | | | Health (excluding hospitals) |
| | | | Toll Highways |
| | | | Highways (excluding tolls) |
| | | | Parks and Recreation |
| | | | None of the above |
| | D. | Pleas 4A, 4 | se specify any <u>additional functions</u> this government performed that were not listed in 4B or 4C. |
| | | | Other – Specify: 📈 |
| | | | |
| | | | Other – Specify: |
| | | | |
| | | | Other – Specify: Z |
| | | | |
| | | | |

| ВΛ | RT 4 | 1 | D | EW | 1 | м | П | EC |
|--------------|------|----------|---|----|---|----|---|----|
| \mathbf{F} | п. | _ | ш | - | _ | N. | • | - |



What was the amount of tax collections during the fiscal year indicated in 2 from all taxes imposed by this agency?

Include

- Levies for debt service
- · Levies for contributions to pension funds
- · Levies for other funds or purposes
- Special property taxes (e.g., automobiles or intangible property)
- Taxes collected for this agency by another government
- · Current and delinquent amounts, penalties, and interest

- · Receipts from service charges
- · Special assessments
- Interest earnings
- Fines
- · Any other sources that are not taxes or licenses

| | Any other sources that are not taxes of incerises | | | |
|----|--|--------|------------------------|--------------------|
| | Property taxes - All taxes on property, real or personal. Exclude • Taxes not measured by value • Payments in lieu of taxes (should be reported in 6 and/or 7) Sales taxes | \$Mil. | Property Taxe Thou. | e s Dol. |
| В. | Sales taxes | \$Mil. | Sales Taxes Thou. | Dol. |
| | 1. General sales tax | | | |
| | 2. Public utilities sales tax | | | |
| | 3. Other sales and gross receipts sales tax | | | |
| | | Licens | ing and Permi | it Taxes |
| C. | Licensing and permit taxes - (e.g., license and permit fees exacted (either for revenue raising or for regulation) as a condition to the exercise of a business or nonbusiness privilege.) | \$Mil. | Thou. | Dol. |
| | | \$Mil. | Other Taxes Thou. | S Dol. |
| D. | All other taxes – Specify: 🖟 | | | |
| | | | | |

PART 4 - REVENUES - Continued



What was the amount of intergovernmental revenues received by this agency from other governments during the fiscal year indicated in

Include

- Grants
- · Shares of taxes imposed by other governments
- · Payment in lieu of taxes
- Reimbursements for services performed for other governments
- Payments under the American Recovery and Reinvestment Act of 2009 (ARRA)

Exclude

- Loans
- Any taxes imposed by this agency which were collected for it by another government (should be reported in (5)
- Receipts from utility sales to other governments (should be reported in 7)



Intergovernmental Revenues

Report total intergovernmental revenue received

\$Mil.

- **B.** From the State

Include

· Any amounts financed wholly or in part from Federal grants to the State (i.e., pass-throughs)

Exclude



What was the amount of revenues, other than tax and intergovernmental revenues, received by this agency during the fiscal year indicated in 2?

Include

· Revenues of all funds

Exclude

- · Refunds and transfers between funds and accounts of this agency
- A. Current charges Gross receipts from fees, sales, rentals, tolls, maintenance assessments, and other charges for commodities or services.

Include

 Utility services, including utility sales to the Federal, State, or other local governments

Other Revenues

\$Mil.

Thou.

Dol.

Exclude

· Grants and other amounts received from the Federal, State, or other local governments (should be reported in



B. Special assessments - Compulsory contributions and reimbursements from owners of property benefited by improvements (e.g., streets, sewers, sidewalks, water extensions, etc.) as well as for servicing special assessment debt.

Exclude

- Proceeds from sales of special assessment bonds (should be reported in 11)
- Maintenance assessments (should be reported in item A.)

C. Receipts from sale of property and other capital assets

Include

Property sold to other governments

Exclude

• Tax sales (should be reported in 5)



Continue with 7 on the next page

| | Interest earnings - Interest received on all deposits and investment holdings of this agency. | | | | |
|----|--|--------|-------|-----------------------|--------------------|
| | Include | | SMil. | ther Revenue Thou. | e s Dol. |
| | Interest on construction funds Exclude Interest earnings of any employee pension funds | | | | |
| E. | Fines and forfeits - Receipts from penalties imposed for violations of law and civil penalties | | | | |
| F. | Royalties - Compensation or portion of proceeds from extraction of natural resources (e.g., oil, gas, and mineral rights) | | | | |
| G. | Private donations - Gifts of cash or securities from private individuals or corporations | | | | |
| Н. | Miscellaneous other revenues - Revenues of this agency not reported in items A. through G. or questions 5 through 7. | | | | |
| | Include | | | | |
| | Insurance claims Recoveries of prior year expenditures Dividends Recorded profits from selections are provided by the first process of investments. | | | | |
| | Recorded profits from sale of investments Payments in lieu of taxes from private sources | | | | |
| | Proceeds from borrowing | | | | |
| | Receipts from sale of security holdings Transfers between funds or accounts of this agency Employee contributions to employee pension funds Interest earnings of any employee pension funds | | | | |
| | | _ | | | |
| | | | Tota | al Revenues | |
| | | \$Bil. | Mil. | Thou. | Dol. |

| A. E | Expenditures for capital outlay Include Expenditures for construction • Production, additions, replacements, or major structural alterations to buildings and other improvements • Major repairs and alterations • Amounts for constructions performed on a contract basis • Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure • Amounts for replacement and additional equipment • For lease purchase installment contracts Exclude • Interest capitalized as a cost of construction (should be reported in item B.) | ndicated | \$Mil. | Expenditures Thou. | |
|----------|---|--------------------|--------------------|------------------------------|---------|
| 1 | Include Expenditures for construction Production, additions, replacements, or major structural alterations to buildings and other improvements Major repairs and alterations Amounts for constructions performed on a contract basis Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure Amounts for replacement and additional equipment For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
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| | alterations to buildings and other improvements Major repairs and alterations Amounts for constructions performed on a contract basis Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure Amounts for replacement and additional equipment For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| | Major repairs and alterations Amounts for constructions performed on a contract basis Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure Amounts for replacement and additional equipment For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| | Amounts for constructions performed on a contract basis Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure Amounts for replacement and additional equipment For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| | Any expenditures for construction carried out by personnel of this agency Purchase of equipment, land, and existing structure Amounts for replacement and additional equipment For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| | of this agency Purchase of equipment, land, and existing structure • Amounts for replacement and additional equipment • For lease purchase installment contracts Exclude • Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| | Purchase of equipment, land, and existing structure | | \$Mil. | - | |
| ı | For lease purchase installment contracts Exclude Interest capitalized as a cost of construction (should be | | \$Mil. | - | |
| • | Exclude Interest capitalized as a cost of construction (should be | | φινιιι. | mou. | Do |
| ı | Interest capitalized as a cost of construction (should be | | | | Бо |
| | | | | | |
| | reported in item B.) | | | | |
| | | · · · · · <u> </u> | | | |
| | ladana da an dalla. Tatal annonet afintana da sid an all dalla | | | | |
| | Interest on debt - Total amount of interest paid on all debt, long-term and short-term, of this agency. | | | | |
| | | | | | |
| ' | Include • Capitalized interest paid on construction loans | | | | |
| | Exclude | | | | |
| | Debt retirement (should be reported in 1) | | | | |
| | | _ | | | |
| | Payments to other governments - Payment in lieu of taxes, reimbursements for services received, etc. | | | | |
| 1 | 1. To State government | ··· _ | | | |
| 2 | 2. To local governments | | | | |
| D | All other expenditures - All expenditures not reported in | _ | | | |
| | items A. through D. | | | | |
| ı | Include | | | | |
| | Expenditures for salaries and wages | | | | |
| | Operating leases | | | | |
| | Rent Utility services | | | | |
| | Materials and supplies for current operation and maintenant | ce | | | |
| | All other expenditures | 00 | | | |
| | Contributions to employee pension plans administered by the | nis | | | |
| | agency | | | | |
| I | Exclude | | | | |
| | Payments for retirement of debt Payments for purchase of acquities | | | | |
| | Payments for purchase of securities Transfers between funds and accounts of this agency | | | | |
| | Provisions for depreciation | | | | |
| | Benefits and payments from self-administered employee | | | | |
| | pension funds | · · · – | | | |
| | | \$Bil. | Tot Mil. | tal Expenditures Thou. | i Do |
| | | += | | 41 | 23 |
| E. 1 | TOTAL - (Sum of items A. through D.) | | | | |
| | | | Perso | nnel Expenditu | res |
| | nt was the total amount of expenditures for salaries and les reported in █_? | \$Bil. | Mil. | Thou. | Do |

| age 8 | 3 | | | | | |
|-------|---|--|--------|-------|-----------|------|
| PAF | RT 5 – II | NDEBTEDNESS | | | | |
| 0 | Repor | was the total amount of long-term debt held by this a t bonds, mortgages, etc., with an original term of more than I assessment bonds as well as general obligation bonds. | | | | |
| | Include Debt refunded Exclude Capital leases (should be reported in 9) Amounts for compensated absences | | | Long- | term Debt | |
| | • Co | onduit debts | \$Bil. | Mil. | Thou. | Dol. |
| | 1. | hat was this agency's debt? Outstanding at beginning of fiscal year + Issued during fiscal year (include all refunding issues) + | | | | |
| | 3. | Retired during fiscal year (include debt refunded) | | | | |

12 What was the total amount of short-term debt held by this agency for the fiscal year indicated in 2? Report tax-anticipation notes, bond-anticipation notes, interest-bearing warrants, and other obligations with an original term of one year or less.

Exclude

4. Outstanding total at end of fiscal year

| • | Accounts payable | | | | |
|----|--|-----------------|------|-------|------|
| | | Short-term Debt | | | |
| | | \$Bil. | Mil. | Thou. | Dol. |
| | | | | | |
| Α. | Amount outstanding at beginning of fiscal year | | | | |
| | | | | | |
| R | Amount outstanding at end of fiscal year | | | | |
| Ь. | Amount outstanding at end of fiscal year. | | | | |

PART 6 - CASH AND INVESTMENTS HELD AT END OF FISCAL YEAR



What was the total amount of cash and investments (at market value) held by this agency at the end of the fiscal year indicated in 2?

Include

- · Total amount of cash and cash equivalents on hand and on deposit
- Investments in Federal government, Federal agency, State and local government, and non-governmental securities
- Reserves held for redemption of long-term debt
- · Unexpended from sale of bond issues pending disbursement

Exclude

- Accounts receivable
- Value of real property
- All non-security assets
- Employee retirement funds

| Am | ou | nt | at | Enc |
|----|-----|----|----|-----|
| of | Fis | ca | ΙY | ear |

\$Bil. Mil. Thou. Dol.

Total cash and investments.....

| D | Δ | RI | Г 7 | 7 - | R | FI | M | Δ | R | KS |
|---|---|----|-----|-----|---|----|---|---|-----|----|
| | А | | | | ш | _ | M | н | 101 | 1 |



Use this space for any explanations that may be essential in understanding the reported data.

Include

- · Any significant changes occurring within the last year
- Any difficulties encountered in completing this form

PART 8 - CONTACT INFORMATION

| (145) |
|-------|
| |

Who should be contacted to answer questions about data reported on this form?

| Name of contact person - Please print | | | | Title of contact person - Please print | | | | | |
|---------------------------------------|---|--|-----------|--|--|--|--|---|--|
| | | | | | | | | | |
| Area code and phone number | | | Extension | n Area code and fax number | | | | r | |
| | | | | | | | | | |
| | | | | | | | | | |
| Email Addre | | Date form was completed (MM) (DD) (YYYY) | | | | | | | |
| | · | | | | | | | | |

Thank you for completing this form. Retain a copy of the completed questionnaire for your records.

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