CITY COUNCIL AGENDA

June 9, 2025

City Council Chambers

Pledge of Allegiance

3rd Floor

Roll Call - Council Clerk

City Hall

7:00p.m. PUBLIC SESSION

*Public Comment Procedures

- There will be a five (5) minutes per person Public speaking allowed until such time as the Chair is satisfied that ample opportunity
 for all wishing to address the Council has been provided or until continuance of the session would compromise the responsible
 conduct of the Regular Council Meeting.
- There is a one-time speaking rule.
- Please wait to be recognized, approach the podium, and give your name and address.
- Please address the Council with your concern.
- Speakers, meeting attendees, and members are expected to observe proper decorum at all times.
- The use of profane, abusive, or disparaging language directed at the members of the City Council, City Officials, City employee, or members of the general public will not be tolerated.

7:05p.m. REGULAR COUNCIL MEETING

I. APPROVAL OF MINUTES:

Approval of the minutes of the Regular Meeting of May 12, 2025.

Approval of the minutes of the Regular Meeting of May 27, 2025.

II. COMMUNICATIONS:

Communication A: from the Tax Collector regarding Overpayment of refunds for June 2025.

Communication B: from the Community Development Administration regarding approval of the Program Year 51 Neighborhood Assistance Program budget; West Haven Child Development Center, Inc.-\$15,000.00, Ward Heitmann House Museum Foundation, Inc.-\$24,500.00 and West Haven Community House-\$20,000.00.

Communication C: from Mayor Dorinda Borer regarding an application to the Connecticut Department of Economic and Community Development for funding up to \$2,000,000 to undertake the School Streetscapes and Safety Project and to execute an Assistance Agreement.

Communication D: from Mayor Dorinda Borer regarding an application to the Connecticut Department of Economic and Community Development for funding up to \$2,500,000 to undertake the Wagner Pedestrian Bridge Project and to execute an Assistance Agreement.

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Communication E: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$927,000.00 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget.

Communication F: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$345,000.00 to the Capital Improvement Plan within the FY 2025-2026 Capital Budget.

Communication G: from Finance Director Gormany, regarding a bid waiver for purchase of used vehicles valued at \$35,000.00 or less for FY 2025-2026.

III. COMMITTEE MEETINGS:

<u>HEALTH, WELFARE AND SAFETY COMMITTEE, Councilwoman Tucker, Chairwoman, Councilwoman Meuller, Councilman McMillian, Councilwoman Heffernan, Councilwoman Garthwait</u>

Presentation by Health & Human Services regarding upcoming initiatives.

FINANCE COMMITTEE, Councilwoman Ackbarali, Chairwoman- Committee members; Councilman Vargo, Councilman Laucks, Councilwoman Tucker and Councilman Johnstone

Communication B: from the Community Development Administration regarding approval of the Program Year 51 Neighborhood Assistance Program budget; West Haven Child Development Center, Inc.-\$15,000.00, Ward Heitmann House Museum Foundation, Inc.-\$24,500.00 and West Haven Community House-\$20,000.00.

Communication C: from Mayor Dorinda Borer regarding an application to the Connecticut Department of Economic and Community Development for up to \$2,000,000 to undertake the School Streetscapes and Safety Project and to execute an Assistance Agreement.

Communication D: from Mayor Dorinda Borer regarding an application to the Connecticut Department of Economic and Community Development for up to \$2,500,000 to undertake the Wagner Pedestrian Bridge Project and to execute an Assistance Agreement.

Communication E: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$927,000.00 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget.

Communication F: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$345,000.00 to the Capital Improvement Plan within the FY 2025-2026 Capital Budget.

Communication G: from Finance Director Gormany, regarding a bid waiver for purchase of used vehicles valued at \$35,000.00 or less for FY 2025-2026.

<u>LEGISLATIVE MATTERS COMMITTEE, Councilman Vargo, Chairman -Committee members: Councilman Laucks, Councilwoman Tucker, Councilwoman Melton and Councilman Johnstone</u>

Communication C, from the April 28, 2025 agenda, from Mayor Dorinda Borer regarding an ordinance amending Chapter 178 of the Code of the City of West Haven: Posting of Bills.

IV: UNFINISHED BUSINESS:

V. COMMITTEE REPORTS

Clerk to read Communication A into record

FINANCE COMMITTEE, Councilwoman Ackbarali, Chairwoman- Committee members; Councilman Vargo, Councilman Laucks, Councilwoman Tucker and Councilman Johnstone

Communication B: from the Community Development Administration regarding approval of the Program Year 51 Neighborhood Assistance Program budget; West Haven Child Development Center, Inc.-\$15,000.00, Ward Heitmann House Museum Foundation, Inc.-\$24,500.00 and West Haven Community House-\$20,000.00.

Communication C: from Mayor Dorinda Borer regarding an application to the Connecticut Department of Economic and Community Development for up to \$2,000,000 to undertake the School Streetscapes and Safety Project and to execute an Assistance Agreement.

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Communication E: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$927,000.00 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget.

Communication F: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Paving" in the amount up to \$345,000.00 to the Capital Improvement Plan within the FY 2025-2026 Capital Budget.

Communication G: from Finance Director Gormany, regarding a bid waiver for purchase of used vehicles valued at \$35,000.00 or less for FY 2025-2026.

<u>LEGISLATIVE MATTERS COMMITTEE, Councilman Vargo, Chairman -Committee members: Councilman Laucks, Councilwoman Tucker, Councilwoman Melton and Councilman Johnstone</u>

Communication C, from the April 28, 2025 agenda, from Mayor Dorinda Borer regarding an ordinance amending Chapter 178 of the Code of the City of West Haven: Posting of Bills.

VII. COUNCIL LIAISON REPORTS

VIII. NEW BUSINESS

IX. ADJOURNMENT

Nicholas Pascale
Chairman of the Council

Stacy Riccio
Clerk of the Council

Carlotta M. Serrini City Council Administrator Minutes of the May 12, 2025, Regular Meeting of the West Haven City Council in the Council Chambers 3rd floor, West Haven City Hall

The Regular Meeting of the West Haven City Council was held on Monday, May 12, 2025 at 7:00p.m. in the City Council Chambers 3rd floor. Chairman Pascale called the meeting to order at 7:04 p.m.

Pledge of Allegiance

Roll Call: Council Members Present: Edward McMillian, Gary Donovan, Christopher Vargo, Jr., Dawn Callahan, Kathleen Mueller, Brian Laucks, Katherine Tucker, Ruby Melton, Meli Garthwait, and Steven Johnstone (7:34pm), Nicholas Pascale and Anne Heffernan. Absent: Sarah Ackbarali. Also present: Paul Dorsi, Corporation Counsel and Mike Ajello, Deputy Corporation Counsel.

<u>7:00-7:01 p.m.-PUBLIC HEARING</u> Legislative Committee- Communication B, from the April 28, 2025 agenda, from Mayor Dorinda Borer regarding an ordinance amending Chapter 174 of the Code of the City of West Haven: Peddling and Soliciting. **No one present.**

7:01-7:02 p.m.-PUBLIC HEARING-Public Lands Committee-Communication E, from the April 14, 2025 agenda, from Mayor Dorinda Borer regarding an offer of \$15,000.00 from the Estate of Richard Shippy to purchase city owned vacant lot located at 37 Myrtle Avenue, West Haven, CT. See City's website for remarks.

7:02-7:07p.m. PUBLIC SESSION

See City's website for remarks.

Chairman Pascale called the Regular Meeting to order at 7:07 p.m.

I. APPROVAL OF MINUTES:

Councilwoman Melton made a MOTION to APPROVE the Regular Meeting minutes from the April 28, 2025, meeting, which was **SECONDED** by Councilman Vargo. All in favor. **MOTION passed UNANIMOUSLY**. Councilwoman Heffernan and Chairman Pascale abstained.

Councilwoman Heffernan made a **MOTION to APPROVE** the Regular Meeting minutes from the May 1, 2025, meeting, which was **SECONDED** by Councilman Vargo. All in favor. **MOTION passed UNANIMOUSLY.**

II. COMMUNICATIONS:

Communication A: from the Tax Collector regarding Overpayment of refunds for May 2025.

Communication B: from Deputy Chief Carl Flemmig regarding Animal Shelter Donations.

Communication C: from Michael Gormany, Finance Director, requesting the designation of PKF O'Connor Davies, LLP to conduct the annual audit for fiscal year ending June 30, 2025.

III. COMMITTEE MEETINGS:

Finance Committee called to order at 7:09 p.m.

FINANCE COMMITTEE, Councilman Vargo, Acting Chairman- Committee members; Councilwoman Ackbarali (absent), Councilwoman Tucker, Councilman Laucks, and Councilman Johnstone (absent)

FINANCE UPDATES

- 1. Finance updates from Michael Gormany, Finance Director-None.
- 2. MARB Meeting update-None.

Councilwoman Tucker presented a **MOTION** to recommend the acceptance to the entire Council regarding **Communication B:** from Deputy Chief Carl Flemmig regarding Animal Shelter Donations, which was **SECONDED** by Councilman Laucks. All in favor. **MOTION passed UNANIMOUSLY viva voce**.

Councilwoman Tucker presented a **MOTION** to recommend the acceptance to the entire Council regarding **Communication C:** from Michael Gormany, Finance Director, requesting the designation of PKF O'Connor Davies, LLP to conduct the annual audit for fiscal year ending June 30, 2025, which was **SECONDED** by Councilman Laucks. All in favor. **MOTION passed UNANIMOUSLY viva voce**.

Finance Committee closed at 7:13 p.m.

Legislative Matters Committee called to order at 7:13 p.m.

<u>Laucks, Councilwoman Tucker, Councilwoman Melton and Councilman Johnstone (absent)</u>

Councilwoman Tucker presented a MOTION to recommend the acceptance to the entire Council regarding Communication B, from the April 28, 2025 agenda, Communication B: from Mayor Dorinda Borer regarding an Ordinance amending Chapter 174 of the Code of the City of West Haven: Peddling and Soliciting, which was SECONDED by Councilwoman Melton. All in favor. MOTION passed UNANIMOUSLY viva voce.

Communication C, from the April 28, 2025 agenda, from Mayor Dorinda Borer regarding an ordinance amending Chapter 178 of the Code of the City of West Haven: Posting of Bills. **HELD**

Legislative Matters Committee closed at 7:15 p.m.

Public Lands Committee called to order at 7:16 p.m.

Majority Caucus from 7:16p.m. to 7:26 p.m.

<u>PUBLIC LANDS COMMITTEE, Councilman Donovan, Chairman -Committee members: Councilman Laucks, Councilwoman Callahan, Councilman Vargo and Councilman Johnstone (absent), Councilwoman Garthwait</u>

Councilwoman Callhan presented a MOTION to recommend the acceptance to the entire Council regarding Communication E, from the April 14, 2025 agenda, from Mayor Dorinda Borer regarding an offer of \$15,000.00 from the Estate of Richard Shippy to purchase city owned vacant lot located at 37 Myrtle Avenue, West Haven, CT, which was SECONDED by Councilman Vargo. MOTION passed UNANIMOUSLY viva voce. Councilman Laucks abstained. Councilwoman Garthwait did not vote as she was not put on the committee until after the vote.

Communication F, from the April 14, 2025 agenda, from Mayor Dorinda Borer regarding a proposal to sell North End Field, a 3.2-acre City owned former playground (comprising a 0.58-acre property located at 1101 Campbell Avenue and the 2.60-acre former Baggot Street playground), to the University if New Haven ("UNH") for five hundred thousand dollars (\$500,000.00). Public Hearing to be set for May 27, 2025 at 6:55 p.m.

Public Lands Committee resumed at 7:27 and closed at 7:31 p.m.

IV: UNFINISHED BUSINESS: -None.

V. COMMITTEE REPORTS-7:31 p.m.

Clerk to read Communication A into record

FINANCE COMMITTEE, Councilman Vargo, Acting Chairman- Committee members; Councilwoman Ackbarali (absent), Councilwoman Tucker, Councilman Laucks, Councilwoman Garthwait and Councilman Johnstone (absent)

Communication B: from Deputy Chief Carl Flemmig regarding Animal Shelter Donations. Councilman Vargo made a **MOTION to APPROVE** which was which was **SECONDED** by Councilwoman Tucker. All in favor. **MOTION passed UNANIMOUSLY.**

Resolved: The West Haven Police Department has received the following donations, totaling \$ 8,267.91, to the Animal Shelter. Per Connecticut Statues 7-148(c) (3) (A&B) and General Order 98-04, we are forwarding these donations for approval.

RESOLVED: The City Council of the City of West Haven hereby approves the Animal Shelter Donations to be deposited into the Animal Shelter Donations account # 10100000-28285.

	<u>Name</u>	Check Number	<u>Amount</u>
1.	Kimberly Lucas	1134	\$25.00
2.	Alinabal	007641	\$500.00
3.	The Hometown Foundation, Inc.	4031	\$3,000.00
4.	Garafalo Markets, LLC	6688437	\$4,742.91

Communication C: from Michael Gormany, Finance Director, requesting the designation of PKF O'Connor Davies, LLP to conduct the annual audit for fiscal year ending June 30, 2025. Councilman Vargo made a **MOTION to APPROVE** which was which was **SECONDED** by Councilwoman Heffernan. All in favor. **MOTION passed UNANIMOUSLY.**

BE IT RESOLVED: That the City Council of the City of West Haven hereby approves and authorizes PKF O'Conner Davies, LLP to conduct the annual audit for fiscal year ending June 30, 2025; and

BE IT FURTHER RESOLVED, Dorinda Borer, as Mayor of The City of West Haven, is authorized and directed to execute and deliver any and all documents related to this Resolution on behalf of the City of West Haven and to do and perform all acts and things which she deems to be necessary or appropriate to carry out the terms of such documents, including, but not limited to, executing and delivering all agreements and documents contemplated by such documents.

<u>LEGISLATIVE MATTERS COMMITTEE, Councilman Vargo, Chairman -Committee members: Councilman Laucks, Councilwoman Tucker, Councilwoman Melton and Councilman Johnstone</u>

Communication B: from Mayor Dorinda Borer regarding an Ordinance amending Chapter 174 of the Code of the City of West Haven: Peddling and Soliciting. Councilman Vargo made a **MOTION to APPROVE** which was which was **SECONDED** by Councilwoman Heffernan. All in favor. **MOTION passed UNANIMOUSLY.**

AN ORDINANCE AMENDING THE CODE OF THE CITY OF WEST HAVEN CHAPTER 174 PEDDLING AND SOLICITING

BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF WEST HAVEN, Chapter 174 of the Code of the City of West Haven is hereby amended to read as follows:

§ 174-1 License Required.

It shall be unlawful for any person over 16 years of age to solicit orders of purchase for future delivery of any goods, wares or merchandise, including magazines and other printed matter, from door to door or on any street or highway within, or by telephone from and within the City of West Haven without first obtaining a license to solicit from the Police Department of the City of West Haven as provided in § 174-3 and 174-4 hereof.

§ 174-2. Entrance onto privately policed areas.

A license to solicit shall not constitute a permit to enter privately policed areas.

§ 174-3. License Application Required.

- A. An applicant must apply for a License to Solicit. Applications shall be available at the West Haven Police Department Monday through Friday between the hours of 8:00 a.m. and 3:45 p.m., excluding holidays.
- B. Application Requirements.
 - 1. Applications shall be completed in full and notarized.
 - 2. A background check authorization form shall be completed and submitted with the application.
 - 3. A solicitor violation acknowledgement form shall be signed and submitted with the application.
 - 4. An application fee of \$250 (Two Hundred Fifty Dollars) and a license fee of \$150 (One Hundred Fifty Dollars) shall be paid upon submission of the completed application.
 - 5. Identification satisfactory to the Police Department which shall contain a specimen of the applicant's signature and fingerprints.
- C. Any single business or entity shall be limited to five (5) individuals so licensed to solicit on its behalf at any given time.

§ 174-4. Issuance of license.

Upon compliance with the provisions of § 174-3 hereof, the Police Department shall approve or deny the applicant's license to solicit based on the information so provided. If approved, the applicant will be provided with a 1 (one) year license to solicit in the City of West Haven, contingent upon adherence to all rules and regulations set forth herein and be issued a photo identification badge. The West Haven Police department shall have the discretion and authority to deny an applicant a license to solicit based on an unfavorable background check.

§ 174-5. Transferability of credentials; exhibition upon request.

A License to solicit shall be nontransferable and shall entitle the holder thereof, for the period indicated therein, unless revoked, to solicit orders within the City of West Haven between the hours of 9:00 a.m. to dusk for the purchase of the goods, wares or merchandise specified in his application, provided that the holder shall have their issued soliciting license photo identification badge in their possession at all times while soliciting orders and shall exhibit the same at any time upon request by any police officer of the City of West Haven or any purchaser or prospective purchaser.

§ 174- 6 Penalties for offenses; cancellation of credentials.

- <u>A.</u> Unlicensed soliciting is a violation of the City of West Haven Code 174 and shall be punishable by a fine of \$250 (Two Hundred Fifty Dollars) for each residence solicited.
- B. A license to solicit under this chapter shall be revoked upon any conviction of any crime or misdemeanor under this chapter, or involving moral turpitude, and such person shall not thereafter solicit orders in the city without reapplying for and obtaining a new license to solicit.
- C. It shall be a violation of this chapter to solicit on a property that has a sign clearly posted "no soliciting or no sales," or with similar language to that effect, and such violation shall be punishable by a fine of \$250 for each such offense.
- D. It shall be a violation of this chapter for any single business or entity to solicit at the same property more than one (1) instance during a period of six months between such solicitations, and any such violation shall be punishable by a fine of \$250 for each such offense.

§ 174-7. Exception.

Communication C, from the April 28, 2025 meeting, from Mayamending Chapter 178 of the Code of the City of West Haven: F	
APPROVED BY THE MAYOR:	DATE: _
ENACTED BY THE CITY COUNCIL ON:	
This chapter shall not apply to salesmen selling goods to reta	ail or wholesale stores for resale.

<u>PUBLIC LANDS COMMITTEE, Councilman Donovan, Chairman -Committee members: Councilman Laucks, Councilwoman Callahan, Councilman Vargo and Councilman Johnstone</u>

Communication E, from the April 14, 2025 agenda, from Mayor Dorinda Borer regarding an offer of \$15,000.00 from the Estate of Richard Shippy to purchase city owned vacant lot located at 37 Myrtle Avenue, West Haven, CT. Councilman Donovan made a **MOTION to APPROVE** which was which was **SECONDED** by Councilman McMillian. All in favor. **MOTION passed by MAJORITY.** Councilman Laucks abstained. Councilwoman Garthwait opposed.

BE IT RESOLVED: That the City Council of the City of West Haven hereby approves the sale of city owned property known as 37 Myrtle to the Estate of Richard Shippy for the sum of \$15,000; and BE IT FURTHER RESOLVED, Dorinda Borer, as Mayor of The City of West Haven, is authorized and directed to execute and deliver any and all documents related to this Resolution on behalf of the City of West Haven and to do and perform all acts and things which she deems to be necessary or appropriate to carry out the terms of such documents, including, but not limited to, executing and delivering all agreements and documents contemplated by such documents.

Communication F. from Mayor Dorinda Borer regarding a proposal to sell North End Field, a 3.2-acre City owned former playground (comprising a 0.58-acre property located at 1101 Campbell Avenue and the 2.60-acre former Baggot Street playground), to the University if New Haven ("UNH") for five hundred thousand dollars (\$500,000.00). **Public Hearing to be set for May 27, 2025 at 6:55 p.m.**

VI. COUNCIL LIAISON REPORTS

Councilwoman Callahan spoke about a ceremony for Volunteer Firefighters including the Mayor's Proclamations. Councilwoman Heffernan stated that IMLS funding was not cut. Councilman Johnstone provided a Police Department staff report and thanked the officers for Police Appreciation Week.

See remarks on City's website.

VII. NEW BUSINESS

None.

See remarks on City's website.

VIII. ADJOURNMENT

Councilman McMillian made a MOTION to ADJOURN which was SECONDED by Councilman Laucks. All in favor. MOTION passed UNANIMOUSLY.

The City Council meeting was ADJOURNED at 7:41 p.m.

Nicholas Pascale
Chairman of the Council

Stacy Riccio
Clerk of the Council

Carlotta M. Serrini City Council Administrator

^{**}These minutes are subject to City Council approval.

Minutes of the May 27, 2025, Regular Meeting of the West Haven City Council in the Council Chambers 3rd floor, West Haven City Hall

The Regular Meeting of the West Haven City Council was held on Tuesday, May 27, 2025 at 7:00p.m. in the City Council Chambers 3rd floor. Chairman Pascale called the meeting to order at 7:02 p.m.

Pledge of Allegiance

Roll Call: Council Members Present: Meli Garthwait, Edward McMillian, Sarah Ackbarali Gary Donovan, Christopher Vargo, Jr., Katherine Tucker, and Steven Johnstone, Nicholas Pascale and Anne Heffernan. Absent: Brian Laucks, Ruby Melton, Dawn Callahan and Kathleen Mueller. Also present: Mayor Dorinda Borer, Paul Dorsi, Corporation Counsel, Phil Sissick, Commissioner of Public Works, Steve Fontana, Director of Economic Development, George Syondi and Louis Anninio, Jr. both of UNH.

<u>7:02-7:03 p.m.- PUBLIC HEARING</u>-Public Lands Committee-Communication F, from the April 14, 2025 agenda, from Mayor Dorinda Borer regarding a proposal to sell North End Field, a 3.2-acre City owned former playground (comprised of a 0.58-acre property located at 1101 Campbell Avenue and the 2.60-acre former Baggot Street playground), to the University of New Haven ("UNH") for five hundred thousand dollars (\$500,000.00). **No one spoke.**

7:03-7:09 p.m. PUBLIC SESSION

See City's website for remarks.

Chairman Pascale called the Regular Meeting to order at 7:09 p.m.

I. APPROVAL OF MINUTES:

Approval of the minutes of the Regular Meeting of May 12, 2025. HELD.

II. COMMUNICATIONS:

Communication A: from the Tax Collector regarding Overpayment of refunds for May 2025.

Communication B: from the Tax Manager Rachel A-Massih regarding the Tax Suspense List for Grand List 2021.

Communication C: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Public Facilities" in the amount of \$76,109.04 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget.

Councilman Vargo made a **MOTION to ADD** Introduction of Phil Sissick, Commissioner of Public Works, to Council-as-a-Whole and **REMOVE** Communication C from the Public Lands Committee, which was **SECONDED** by Councilman Donovan. All in favor. **MOTION passed UNANIMOUSLY.**

III. COMMITTEE MEETINGS:

Council-as-a-Whole called to order at 7:12 p.m.

1. Introduction of Phil Sissick, Commissioner of Public Works.

Council-as-a-Whole closed at 7:19 p.m.

Finance Committee called to order at 7:19 p.m.

FINANCE COMMITTEE, Councilwoman Ackbarali, Chairman- Committee members; Councilman Vargo, Councilwoman Tucker, Councilman Laucks (absent), and Councilman Johnstone

FINANCE UPDATES

- 1. Finance updates from Michael Gormany, Finance Director-See City's website for remarks.
- MARB Meeting update-The Mayor gave an update, reporting that there will be no more MARB
 meetings because the MARB Board voted to release the City of West Haven from MARB
 oversight.

Councilwoman Ackbarali made a **MOTION to REMOVE** MARB Meeting updates from the agenda, which was **SECONDED** by Councilman Vargo and Councilwoman Tucker. All in favor. **MOTION passed UNANIMOUSLY.**

Councilman Vargo presented a **MOTION** to recommend the acceptance to the entire Council regarding **Communication B**: from the Tax Manager Rachel A-Massih regarding the Tax Suspense List for Grand List 2021, which was **SECONDED** by Councilman Johnstone. All in favor. **MOTION passed UNANIMOUSLY viva voce**.

Councilman Vargo presented a **MOTION** to recommend the acceptance to the entire Council regarding **Communication C**: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Public Facilities" in the amount of \$76,109.04 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget, which was **SECONDED** by Councilman Johnstone. All in favor. **MOTION passed UNANIMOUSLY viva voce**.

Finance Committee closed at 7:43 p.m.

Legislative Matters Committee called to order at 7:43 p.m.

Laucks (absent), Councilwoman Tucker, Councilwoman Melton (absent) and Councilman Johnstone

Communication C, from the April 28, 2025 agenda, from Mayor Dorinda Borer regarding an ordinance amending Chapter 178 of the Code of the City of West Haven: Posting of Bills. **HELD**

Legislative Matters Committee closed at 7:43 p.m.

Public Lands Committee called to order at 7:43 p.m.

<u>PUBLIC LANDS COMMITTEE, Councilman Donovan, Chairman -Committee members: Councilman Laucks (absent), Councilman Callahan (absent), Councilman Vargo and Councilman Johnstone</u>

Councilman Johnstone presented a **MOTION** to recommend the acceptance to the entire Council regarding **Communication F, from the April 14, 2025 agenda,** from Mayor Dorinda Borer regarding a proposal to sell North End Field, a 3.2-acre City owned former playground (comprising a 0.58-acre property located at 1101 Campbell Avenue and the 2.60-acre former Baggot Street playground), to the

University if New Haven ("UNH") for five hundred thousand dollars (\$500,000.00). which was **SECONDED** by Councilman Vargo. All in favor. **MOTION** passed **UNANIMOUSLY viva voce**.

Public Lands Committee closed at 7:51 p.m.

IV: UNFINISHED BUSINESS: -None.

V. COMMITTEE REPORTS-7:52 p.m.

Clerk to read Communication A into record

<u>FINANCE COMMITTEE, Councilman Vargo, Chairman- Committee members; Councilwoman Ackbarali</u> (absent), Councilwoman Tucker, Councilman Laucks (absent), and Councilman Johnstone

Councilwoman Ackbarali departed early for a personal matter and Councilman Vargo assumed the role of Chairperson.

Communication B: from the Tax Manager Rachel A-Massih regarding the Tax Suspense List for Grand List 2021. Vargo made a **MOTION to APPROVE** which was which was **SECONDED** by Councilman Johnstone. All in favor. **MOTION passed UNANIMOUSLY.**

WHEREAS, in accordance with Connecticut General Statutes Section 12-165, the Tax Collector for the City of West Haven has delivered a statement of outstanding personal property and motor vehicle taxes for the West Haven Grand List year of 2021 that he has deemed to be uncollectable and that should be transferred to the Suspense Tax Book.

RESOLVED: That the City Council for the City of West Haven herby approves the transfer of uncollectable taxes listed on said statement to the Suspense Tax Book, and that the total amount of unpaid taxes so transferred be reflected in the minuets as \$1,026,853.41, with a breakdown as follows:

Personal Property – 322 Accounts: \$346,287.56

Motor Vehicle – 2149 Accounts: \$560,199.89

Supplemental Motor Vehicle - 554 Accounts: \$120,365.96

Communication C: from the Finance Director Gormany and Public Works Commissioner Sissick, requesting an authorization to add LOCIP project name "Public Facilities" in the amount of \$76,109.04 to the Capital Improvement Plan within the FY 2024-2025 Capital Budget. Vargo made a MOTION to APPROVE which was which was SECONDED by Councilwoman Tucker. All in favor. MOTION passed UNANIMOUSLY.

BE IT RESOLVED: That the City of West Haven, by and through its Finance Director, is authorized to obligate remaining LOCIP funds in the amount of \$76,109.04 to LOCIP project name "Public Facilities;" and

BE IT FURTHER RESOLVED: That the City of West Haven, by and through its Finance Director, is authorized to add LOCIP project name "Public Facilities" to the FY 2024-2025 Capital Improvement Plan; and

BE IT FURTHER RESOLVED: That such funds shall be used in accordance with LOCIP entitlement guidelines for public facilities projects within the City of West Haven that are on-going or in the planning stage including, but not limited to, construction, renovation, code compliance, energy conservation, and fire safety.

<u>LEGISLATIVE MATTERS COMMITTEE, Councilman Vargo, Chairman - Committee members: Councilman Laucks (absent), Councilwoman Tucker, Councilwoman Melton (absent) and Councilman Johnstone</u>

Communication C, from the April 28, 2025 meeting, from Mayor Dorinda Borer regarding an ordinance amending Chapter 178 of the Code of the City of West Haven: Posting of Bills. **HELD**

<u>PUBLIC LANDS COMMITTEE, Councilman Donovan, Chairman -Committee members: Councilman Laucks</u> (absent), Councilwoman Callahan (absent), Councilman Vargo and Councilman Johnstone

Communication F. from Mayor Dorinda Borer regarding a proposal to sell North End Field, a 3.2-acre City owned former playground (comprised of a 0.58-acre property located at 1101 Campbell Avenue and the 2.60-acre former Baggot Street playground), to the University of New Haven ("UNH") for five hundred thousand dollars (\$500,000.00). Councilman Donovan made a MOTION to APPROVE which was which was SECONDED by Councilwoman Heffernan. MOTION passed by MAJORITY.

Roll Call vote: 7 In Favor and	1 Opposed	5 Absent
Councilwoman Garthwait	No	
Councilman Laucks		Absent
Chairman Pascale	Yes	
Councilwoman Heffernan	Yes	
Councilwoman Melton		Absent
Councilwoman Ackbarali		Absent
Councilman Donovan	Yes	
Councilman McMillan	Yes	
Councilwoman Callahan		Absent
Councilwoman Tucker	Yes	
Councilman Vargo	Yes	
Councilwoman Mueller		Absent
Councilman Johnstone	Yes	

WHEREAS, in accordance with the offer received from the University of New Haven for the acquisition of the city owned property located at 1101 Campbell Avenue, known as North End Field and Baggott Street Playground, which offer has been reviewed and considered by the City Council;

AND WHEREAS, pursuant to the provisions of Connecticut General Statutes Section 8-24, the West Haven Planning and Zoning Commission has reported back to the City Council favorably on the acquisition; and

WHEREAS The City Council of the City of West Haven held a public hearing on Tuesday, May 27, 2025, to review and discuss the offer:

RESOLVED, That the City Council of the City of West Haven, after review and due consideration, hereby accepts the offer in the amount of Five Hundred Thousand (\$500,000.00) Dollars received from the University of New

Haven for the city owned property located at 1101 Campbell Avenue known as North End Field and Baggott Street Playground.

FURTHER RESOLVED, Dorinda Borer, as Mayor of The City of West Haven, is authorized and directed to execute and deliver any and all documents related to this Resolution on behalf of the City of West Haven and to do and perform all acts and things which she deems to be necessary or appropriate to carry out the terms of such documents, in substantial compliance, including, but not limited to, executing and delivering all agreements and documents contemplated by such documents.

VI. COUNCIL LIAISON REPORTS

Councilman Johnstone gave a report on the Police Department. Councilwomen Heffernan and Garthwait said the Memorial Day parade was great.

See remarks on City's website.

VII. NEW BUSINESS

Councilman Donovan asked if the re-zoning of certain properties would have any effect on the West Haven Grand List, and Attorney Paul Dorsi said it will have no effect as the properties listed for re-zoning are all tax exempt already, except for 1 & 55 Forest Road. 403 Orange Avenue is partially tax exempt due to commercial use. He is interested in ways to prevent MARB oversight in the future. Mayor Borer thanked everyone for an amazing Memorial Day parade, noting that 2 monument walls were added. She announced that Acoustic Sunday begins June 1st, and the summer concert series is kicking off, as well as the Savin Rock Festival in July along with the 4th of July Fireworks celebration. A bicycle safety event will take place on Saturday at Carrigan School, where free helmets and locks will be given out. Ribbon Cutting for new tennis courts and pickle ball courts at Painter Park is scheduled for June 26th. Additional training classes for AED, CPR and Narcan for city employees are upcoming. Councilwoman Tucker reported that the Opioid Advisory Committee met last month, and an update will be provided at the next meeting.

See remarks on City's website.

VIII. ADJOURNMENT

Councilwoman Heffernan made a MOTION to ADJOURN which was SECONDED by Councilman McMillian. All in favor. MOTION passed UNANIMOUSLY.

The City Council meeting was ADJOURNED at 8:15 p.m.

Nicholas Pascale Stacy Riccio Carlotta M. Serrini
Chairman of the Council Clerk of the Council City Council Administrator

^{**}These minutes are subject to City Council approval.

COMMUNICATION A

Department of Revenue Collection

City of West Haven 355 Main Street West Haven, Connecticut 06516

Dorinda Borer Mayor

Eric Murillo
Tax Collector



To: Nicholas Pascale Chairman, City Council

From: Eric Murillo

Tax Collector

Rachel A-Massih Tax Manager

Re: Overpayment of Taxes - Tax Refunds

Attached is a list(s) of refunds, for June 2025, which require council approval. Any additional information can be supplied upon request.

Thank you.

West Haven Tax Office RAM/TL

CITY OF WEST HAVEN TAX COLLECTOR'S REFUND REPORT

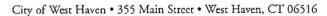
	OVERPAYMENTS		,- ,- ,-		ONTH OF	
LIST #	NAME	CITY	FIRST	WS	ALL	TOTALS
2023-03-79782	ROY, THOMAS A	\$ 34.22	\$	3.49		\$ 37.
2023-03-79782	ROY, THOMAS A	\$ 1.54	, \$	0.16		\$ 1
2023-03-79783	ROY, THOMAS A	\$ 29.77	\$			\$ 32
2023-03-79783	ROY, THOMAS A	\$ 1.34	\$			\$ 1
2023-03-86860	WILLIAMS-ORANGE, FLORR	\$ 17.31				**
2023-03-67502	JORDAN III, ROBERT H	\$ 18.14			:	\$ 17
2023-06-1834	RAPPA, LISA A		. :		:	\$ 18
		\$ 498.98			1	\$ 498
2023-03-81203	SEVERINO, ROBERT P	\$ 53.00			:	\$ 53
2023-04-84977	PENSKE LEASING	\$ 743.69	\$ 75.73			\$ 819
2023-04-84962	PENSKE LEASING	\$ 348.16			\$ 35.45	
2016-04-87017	KLEIN, PETER	\$ 13.65	\$ 17.40	-	· / · · · · · · · · · · · · · · · · · ·	\$ 31
2016-04-87017	KLEIN, PETER	\$ 9.66				t kang da sa sa masa da sa sa sa sa
2017-03-81846	KLEIN, PETER		¢ 31.60		ļ	\$ 9.
2017-03-81846	KLEIN, PETER				ļ	\$ 121.
			\$ 26.02			\$ 146.
017-03-81846	KLEIN, PETER	\$ 40.25				\$ 40.
2023-03-68982	LAST, LORI	\$ 106.75				\$ 105.
023-01-14542	THOMAS, INGRID	\$ 39.58				\$ 39
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		\$ 2,176.65	\$ 140.83 \$	6.81	\$ 35.45	'
				5.51	- 55.45	
12-145 Waiver of	Interest	•				
12-145 Waiver of	Interest	-i				:
12-145 Waiver of					TOTAL	\$ 2,359.
		- i		· · · · · · · · · · · · · · · · · · ·	TOTAL	\$ 2,359.

COMMUNICATION B



COMMUNITY DEVELOPMENT ADMINISTRATION





May 19, 2025

Nicholas A. Pascale, Chairman of Council City of West Haven 355 Main Street West Haven, CT. 06516

Dear Chairman Pascale,

The following applications have been received for the 2025 State of Connecticut Neighborhood Assistance Act:

NAA Funding Request

1. West Haven Child Development Center Inc.\$15,000.002. Ward Heitmann House Museum Foundation, Inc.\$24,500.003. West Haven Community House\$20,000.00

I respectfully request that the Neighborhood Assistance program be placed on the City Council agenda for June 9, 2025. Please schedule the Public Notice and Hearing and place on the agenda for action on June 9, 2025.

Please do not hesitate to contact me if you have any questions regarding this matter.

Respectfully,

Ronald C. Dumas

CDA Housing Specialist

West Haven Municipal Liaison Officer



Municipality: City of West Haven

Form NAA-01

2025 Connecticut Neighborhood Assistance Act (NAA) Program Proposal

This form must be completed and submitted to your municipality for approval. All items must be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. Do not submit this form directly to the Department of Revenue Services.

Part I — General Information								
Name of tax exempt organization/municipal agency:								
Address: 227 ELM STREET, WEST HAVEN CT								
Federal Employer Identification Number: 0 6 - 0 6 4 6 9 5 7								
Program title: ENEREGY CONSERVATION AND CAPITAL IMPROVEMENTS TO FACILITIES								
Name of contact person: AMY GUAY-MACFARLANE, EXECUTIVE DIRECTOR								
Telephone number: (203) 934-5221								
Email address: <u>forquhorsonp6</u> egmail, Com								
Fotal NAA funding requested (\$250 minimum, \$150,000 maximum): \$ 20,000.00								
Is your organization required to file federal Form 990 or 990EZ. Return of Organization Exempt from Income Tax?								
X Yes No								
If Yes, attach a copy of the first page of your most recent return.								
If No , attach a copy of your determination letter from the U.S. Treasury Department, Internal Revenue Service.								

Part II — Program Information Check the appropriate description of your program: 100% credit percentage _X__ Energy conservation; or _____ Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)). 60% credit percentage __ Job training/education for unemployed persons aged 50 or over: Job training/education for persons with physical disabilities: Program serving low-income persons: ____ Child care services: _____ Establishment of a child day care facility: _____ Open space acquisition fund; or _____ Other (specify): _____ Description of program: We are reconfiguring the heating system in our main building located at 227 Elm Street, currently served by radiant heat. To enhance energy efficiency, we will add forced hot air heating for more consistent and responsive temperature control. The project includes replacing 2 aging rooftop units (RTU's) that use phased-out R-22 refrigerant. The new high-efficiency RTU's will provide both heating and cooling. This upgrade will improve energy performance, reduce reliance on space heaters, and enhance occupant safety while meeting modern sustainability & energy code requirements. Need for program: _ Our organization is committed to providing a safe, comfortable, and energy-efficient environment for our staff and community. Unfortunately, our current HVAC units are outdated, unreliable, and no longer meet today's energy or environmental standards. With limited funding, we are unable to replace them without assistance. A grant for new high-efficiency HVAC units would not only reduce our energy costs and environmental impact. but also ensure that our space remains warm in the winter, cool in the summer, and healthy year-round. Your support would make a meaningful difference in the daily lives of everyone who walks through our doors. Neighborhood area to be served: _

WHCH services a) Head Start preschool for 3 & 4 year olds; b) Children and Youth Services including before and after school programs for K-6 grade students, and c) Day, Residential High School Transition programs for adults with intellectual disabilities. A grant to support the replacement of our HVAC units would directly impact hundreds of individuals; children, families, and adults with disabilities- by ensuring they have access to warm, cool, and safe spaces year-round. Your investment would not only improve efficiency and reduce operational costs, but most importantly, help us continue to provide high-quality, inclusive services to our community.

Plan to implement the program:

Work will be completed according to the timeline outlined once funding is secured. All efforts will be coordinated to minimize disruption to ongoing programs and ensure a smooth transition to the upgraded HVAC systems.

Timetable:	
Program start date: 07-01-2025	
Program completion date 06-30-2026	
Post-project audit due date	
The program start date must not be more than two years prior Additionally, the program completion date must not extend beyon Any program receiving \$25,000 or more in NAA funding is require prepared by a certified public accounting firm, to the municipality than three months after the program completion date.	d December 31, 2027. d to provide a post-project audit,
Part III — Financial Information	
Program Budget: Complete in full. Expenditures must equal or exceed total funding.	
Sources of Revenue:	
NAA funds requested	\$20,000.00
Other funding sources - itemized sources:	
a) WHCH CAPTIAL IMPROVEMENT SAVINGS	\$20.500.00
b)	
c)	
G)	
Total Funding:	\$40.500.00
Proposed Program Expenditures:	
Direct operating expenses - itemized description:	
a) REPLACEMENT RTU LOBBY(#1) AND ACTIVITY RM (#	\$40,500.00
b)	
c)	
d;	
Administrative expenses - itemized description:	
a):	
b);	
C)	THE RESERVE OF THE PERSON OF T
d;	
Total Proposed Expenditures:	\$40,500.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: City of West Haven Mailing address: 355 Main Street, 2nd Floor, West Haven, CT. 06516	_
City of West Haven	
City of West Haven Mailing address: 355 Main Street, 2nd Floor, West Haven, CT. 06516 Name of municipal liaison: Ronald C Dumas Telephone number: (203) 937-3546	
355 Main Street, 2nd Floor, West Haven, CT. 06516	
Name of municipal liaison: Ronald C Dumas	
Telephone number: (203) 937-3546	-
Fax number: (203) 937-4213	
Email address: rdumas@westhaven-ct.gov	

(c-triangle-c-triangle
Post-Project Audit
Is a post-project audit required for this proposal?
Yes X No
If Yes, date post-project audit due:
Date

Form **8868**

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury

File a separate application for each return.

Internal Reve	nue Service	► Go to www.irs.go	v/Form8	868 for the latest information.				
forms liste Contracts	ed below with t s, for which an	You can electronically file Form 8868 to the exception of Form 8870, Information R extension request must be sent to the IRS www.irs.gov/e-file-providers/e-file-for-charit	letum for ' in paper	Transfers Associated With Certain Permat (see instructions). For more d	ersonal Be	enefit	nic	
Automa	atic 6-Mont	h Extension of Time. Only subm	it origin	al (no copies needed).				
All corpor	ations required	to file an income tax return other than Fo	rm 990-T	(including 1120-C filers), partnership	s, REMICs	, and trust	ts	
must use	Form 7004 to	request an extension of time to file income	tax retur	ns.				
Type or		empt organization or other filer, see instruc			Taxpayer	identificat	tion numbe	er (TIN)
print	•	ST HAVEN COMMUNITY HO ATION INC	USE			0.0	C4C051	r i
File by the		eet, and room or suite no. If a P.O. box, se	a inatmos	Hana		06-0	64695	'
due date for filing your return. See		M STREET	ee instruct	noris.				
instructions.	WEST H	r post office, state, and ZIP code. For a fo AVEN , CT 06516		· .				
Enter the	Return Code for	or the return that this application is for (file	a separa	te application for each return)	<u></u>			0 1
Application	on		Return	Application				Return
	or Form 990-E	7	Code 01	Is For Form 1041-A				Code 08
	0 (individual)		03	Form 4720 (other than individual)				09
Form 990			04	Form 5227				10
Form 990	-T (sec. 401(a)	or 408(a) trust)	05	Form 6069				11
Form 990	-T (trust other t	than above)	06	Form 8870				12
Form 990	-T (corporation		07	ELM STREET WEST				
Teleph	one No. 2 organization do s for a Group F	care of ► WEST HAVEN, CT 03-934-5221 es not have an office or place of business Return, enter the organization's four digit 0 part of the group, check this box ►	Group Exe	Fax No. >	f this is fo	r the whole	group, ch	
the ▶[organization n	natic 6-month extension of time until amed above. The extension is for the orga /ear or eginningJUL_1, 2022	nization's		e the exem	pt organiz	ation retur	n for
2 If th		ered in line 1 is for less than 12 months, ch ccounting period	neck reaso	on: Initial return	Final retur	n		
		s for Forms 990-PF, 990-T, 4720, or 6069,	enter the	tentative tax, less				
		credits. See instructions.			3a	\$		0.
		s for Forms 990-PF, 990-T, 4720, or 6069,						^
		ments made. Include any prior year overpa			3b	\$		0.
		otract line 3b from line 3a, Include your pay stronic Federal Tax Payment System). See				*		0.
	If you are going	g to make an electronic funds withdrawal				Form 887	79-TE for p	
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Form **8868** (Rev. 1-2022)

** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Open to Public Inspection

Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

<u>A F</u>	or the	2022 calendar year, or tax year beginning JUL 1, 2022 and ending	JUN 30, 2	023	
	heck if	THE WEST HAVEN COMMUNITY HOUSE	D Employer ic	lentifi	cation number
	change		D Employer identification number		
	_ change □Initial				
	_ Final return∕	227 ELM STREET	(203)	934	-5221
_	ated	City or town, state or province, country, and ZIP or foreign postal code			
\vdash	return	WEST HAVEN, CT 00510			
_	_ tion	Finame and address of principal officer: AMI GOAI -MACFARLANE	į.		
		SAME AS C ABOVE			
			ear of formation: 19	4 1 N	A State of legal domicile; C'T'
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8 8					
itie					
ctiv	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			
4					0.
					Current Year
	8	Contributions and grants (Part VIII, line 1h)		0.	
Ž	9	Program service revenue (Part VIII, line 2g)		0.	1,206,333.
ě.	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	-46,605.
α.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	
					8,531,366.
S	15				
ens	16a	<u> </u>		0.	0.
Ä	b	D Name of organization The WEST HAVEN COMMUNITY HOUSE ASSOCIATION INC Coling business as Coling business Co			
I Taxee J Webs K Form Part I 1 2 3 4 5 5 6 7 8 9 10 11 1 2 3 4 5 5 6 7 1 10 12 1 1 1 2 13 1 1 1 1 1 2 13 1 1 1 2 1 3 1 1 1 1 1 2 1 3 1 1 1 1 1 2 1 3 1 1 1 1 1 1 2 1 3 1 1 1 1 1 1 2 1 3 1 1 1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1	''		<u>. </u>		
	Number of control training Number and street (of Y-0, bot in mail is not delivered to street address) Number 27 ELM STREET City or town, state or province, country, and ZIP or foreign postal code Q				
_ 0	19	Revenue less expenses. Subtract line 18 from line 12	Basianias of Cussons		
its o	20	Total accepts (Part V. line 16)			
Asse	21				
E E	22	1			
Pa	ert II		0,000,2		1,011,5001
Unde	er pena	ties of perjury, 1 declare that I have examined this return, including accompanying schedules and sta	tements, and to the bes	t of my	knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge).	•
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May	tne IF	Sidiscuss this return with the preparer shown above? See instructions			X Yes No

Form	990 (2022) ASSOCIATION INC	<u>06-0646957</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:	***************************************	[22]
•		MITTE	
	THE WEST HAVEN COMMUNITY HOUSE EXISTS TO FACILITATE HEAL		
	PRODUCTIVE, INDEPENDENT AND MEANINGFUL LIVES FOR CHILDRE		
	ADOLESCENTS, FAMILIES AND INDIVIDUALS WITH DISABILITIES.	THE SERVIC	ES
	PROVIDED ENCOURAGE INDIVIDUAL DEVELOPMENT AND HEALTHY GR	OUP	-
2	Did the organization undertake any significant program services during the year which were not listed on the		
_	- in Face 200 - 200 F70		♥
		Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as	measured by eynenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		1
		s, the total expenses, al	na
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1, 904, 640. including grants of \$) (Reven		<u> </u>
	HEAD START PROGRAM - SERVED A TOTAL OF 177 CHILDREN AND		•
	PROVIDED A FULL RANGE OF HEAD START SERVICES INCLUDING E	DUCATION,	
	NUTRITION, SOCIAL SERVICES, HEALTH, AND PARENT INVOLVEMENT		
	ADDITION, EXTENDED DAY CHILD-CARE SERVICES WERE ALSO PRO	משעיים חשמדע	
	ACCOMPLISHMENTS INCLUDE A LITERACY PROGRAM AND INCREASED	VIDED: OILLER	
		PARENT	
	ENGAGEMENT ACTIVITIES.		
		•	
	2 020 250		~==
4b	(Code:) (Expenses \$3,838,369. including grants of \$) (Reven		<u>277.</u>)
	INTELLECTUAL DISABILITIES - PROVIDED DAY SERVICES TO XX		
	SERVICES. IN ADDITION, RESIDENTIAL SERVICES WERE PROVIDE		
	WITH INTELLECTUAL DISABILITIES: 9 ADULTS RESIDED IN GROU	P HOMES AND	9
	ADULTS WERE PROVIDED CONTINUOUS RESIDENTIAL SUPPORT IN T		
	OWNAPARTMENTS. 5 ADULTS WERE PROVIDED WITH IN HOME SUPPO		
	ALSO PROVIDED SERVICES FOR 11 YOUNG ADULTS WITH INTELLECT		
		TUAL	
	DISABILITIES IN A TRANSITIONAL ACADEMY		
4c	(Code:) (Expenses \$ 880,540 • including grants of \$) (Reven	657	190.)
	CHILDREN AND YOUTH SERVICES - PROVIDED BEFORE AND AFTER	CCHOOL VID	 ,
	ENGAGEMENT ACTIVITIES. SUMMER CHILDCARE TO 192 CHILDREN		
	THROUGH ELEVEN AT 7 NEIGHBORHOOD SCHOOLS: PAGELS, MOLLOY	<u>, WASHINGTON</u>	,
	SETH HALEY, SAVIN ROCK, MACKRILLE AND CARRIGAN.		
			
4d	Other program services (Describe on Schedule O.)		
•	(Expenses \$ including grants of \$) (Revenue \$	ì	
46	Total program service expenses 6,623,549.		
	- Tanalaga	C	90 (2022)

ASSOCIATION INC Form 990 (2022) Part IV Checklist of Required Schedules

06-0646957 Page 3

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	N
•	If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	-		
_		3		2
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			-
•		١		١,
_	during the tax year? If "Yes," complete Schedule C, Part II	4		2
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			١.
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
•	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
•	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		, ,
;	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		3
)	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		ا ا		
,	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		_
			37	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	_
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11</u> a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	 		_
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	110	х	
4	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11c	- 77	
u		l l		١.
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Ë
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	L
a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Ι.
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		H
-				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			١.
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Ľ
•	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		•	١.
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		L
•	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Ľ
•	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes."	10	47	\vdash
•	· · · · · · · · · · · · · · · · ·			
	complete Schedule G, Part III	19		
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
Ь				ı
Ь	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II]		

Form 990 (2022)

ASSOCIATION INC 06-0646957 Part IV Checklist of Required Schedules (continued)

Page 4

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), tine 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		;	v
24 2	Schedule J	23		_ <u>X</u> _
244	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
		04-		X
h	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		l	
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	İ	х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II			
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			
	"Yes," complete Schedule L, Part IV	28a		<u> </u>
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	l		37
31	contributions? If "Yes," complete Schedule M	30		$\frac{x}{x}$
32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31_		
3 <u>2</u>				X
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If *Yes, " complete Schedule R, Part VI	_37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
A -	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			
_	-		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	4		
þ	Enter the number of Forms W-2G included on line 1a, Enter -0- if not applicable 1b 0	-		
C	Did the organization compty with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		. .	
22200	gambing) winnings to prize winners?	1c	990	0000

orm 990	(2022)	ASSOCIATION IN	iC	06-0646957	Page \$
Dort V	Ctatamanta	Boggedine Other IDC Fil	lines and Tou Compliance		

					Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	I			165	NO				
	filed for the calendar year ending with or within the year covered by this return	2a	147							
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return		·	2b	x					
3a	Did the eventiration have varieted business made increase 4.04.000			3a		X				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		,	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a									
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a		Х				
ь	If "Yes," enter the name of the foreign country		*							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ar	ccour	ts (FBAR).							
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
b										
¢										
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization solicit							
	any contributions that were not tax deductible as charitable contributions?			6a		X				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons o	r gifts							
	were not tax deductible?			6b						
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	provided to the payor?	7a		X				
b				7b						
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was									
	to file Form 8282?	1	1	7c		<u> </u>				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				77				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		t?	7e		<u>X</u>				
f -	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f 7g		<u> </u>				
g										
8 8										
٠	sponsoring organization have excess business holdings at any time during the year?									
9										
a	Pid the appropriate exemplantian make any touching distribution and a section 40000									
b										
10	Section 501(c)(7) organizations. Enter:		***************************************	9b_						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	,							
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders	11a								
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a						
b	• • • • • • • • • • • • • • • • • • • •	12b								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?			13a						
_	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the	l	1							
	organization is licensed to issue qualified health plans	13b								
1/1a	Enter the amount of reserves on hand	13c		4.0		Х				
14a				14a						
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedules the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in regular			14b						
13	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner excess parachute payment(s) during the year?			45		х				
	If "Yes," see the instructions and file Form 4720, Schedule N.			15		-27				
16										
. •	If "Yes," complete Form 4720, Schedule O.	(00)	no:	16		X				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitie	s							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17						
	If "Yes," complete Form 6069.									
22000	10.10.00				990	(0000)				

232005 12-13-22

DocuSign Envelope ID: 9AC0A300-4E7C-4BC0-92A0-9B4122BD2A46 THE WEST HAVEN COMMUNITY HOUSE ASSOCIATION INC Form 990 (2022 06-0646957 Part VI | Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI \mathbf{x} Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 25 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 25 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? Х 8a b Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule Q 9 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? X 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X 120 Did the organization have a written whistleblower policy? X 13 Did the organization have a written document retention and destruction policy? 14 X 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's

Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CT

Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply,

___ Another's website X Upon request

Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records DEBORAH WRIGHT - 203-934-5221

WEST HAVEN, CT 227 ELM STREET 06516, WEST HAVEN 06516

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exempt status with respect to such arrangements?

Form 990 (2022)	ASSOCIATION INC	06-0646957	Page 7
Part VIII Company	sation of Officers Directors Trustoes Koy Employees L	lighoot Componented	

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

 See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	Average Position						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	(list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) AMY GUAY-MACFARLANE	40.00								_	
EXECUTIVE DIRECTOR	40.00	-		X	<u> </u>	_		112,398.	0.	0
(2) DEBORAH WRIGHT	40.00								_	_
ASSISTANT EXECUTIVE DIRECTOR	1 00			X		<u> </u>	_	98,798.	0.	0 .
(3) KATIE FARRELL	1.00	١		٠						•
PRESIDENT (4) RONALD M. QUAGLIANI	1.00	X		X	┝	┢		0.	0.	0 .
(4) RONALD M. QUAGLIANI FIRST VICE PRESIDENT	1.00	x		x					0	•
(5) PAMELA L. O'NEILL	1.00	^		Λ		┢		0.	0.	0
SECOND VICE PRESIDENT	1.00	x		x				0.	0.	
(6) JOHN F. ONOFRIO	1.00	^		^	-	 		 	0.	0 .
TREASURER	1.00	x		х				0.	0.	0.
(7) GENE SULLIVVAN	1.00					╁		- 0.	0.	
SECRETARY	2,00	\mathbf{x}		x				0.	0.	0.
(8) JAY BRENNAN	1.00	<u> </u>				┢	_			
ASSISTANT SECRRERTARY		x		x				0.	0.	0
(9) WILLIAM HEFFERNAN	1.00					<u>├</u> ┈				
IMMEDIATE PAST PRESIDENT		x		x				0.	0.	0.
(10) RICHARD S. BRUNO	1.00					T				
DIRECTOR		X						0.	0.	0 .
(11) MARK J. DEGENNARO	1.00								"	
DIRECTOR		X				L		0.	0.	0 .
(12) PATRICIA W. FUSCO	1.00								-	
DIRECTOR		X				<u></u>		0.	0.	0 .
(13) AUDREY L. JEFFERSON	1.00] _								
DIRECTOR		X		<u>L</u> _				0.	0.	0 .
(14) ELIZABETH K. JOHNSTON	1.00									
DIRECTOR		X		<u> </u>	ļ	$ldsymbol{ld}}}}}}$	L.	0.	0.	0 .
(15) WILLIAM C. LANG	1.00									
DIRECTOR		X				L		0.	0.	0.
(16) MICHAEL P. LAST	1.00									
DIRECTOR		X			_	╙		0.	0.	0
(17) JOHN LEWIS	1.00	<u>_</u> _						_ :		_
DIRECTOR		X						0.	0.	0

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Form **990** (2022)

THE WEST HAVEN COMMUNITY HOUSE ASSOCIATION INC Form 990 (2022) 06-0646957 Page 8 Part VII | Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an week officer and a director/trustee from from related other (list any the organizations compensation hours for organization (W-2/1099-MISC/ from the Highest compensated related institutional trustee (W-2/1099-MISC/ 1099-NEC) organization 1rustee organizations 1099-NEC) and related ey employee below organizations Officer line) (18) MARY JANE MORRISSEY 1.00 0. DIRECTOR X 0 0. (19) EDWARD M, O'BRIEN 1.00 DIRECTOR 0. 0. 0. (20) CAROLE PORTO 1.00 DIRECTOR 0. 0. 0. (21) KENNETH S. PRISCO 1.00 DIRECTOR X 0 0. 0. (22) NANCY ROSSI 1.00 DIRECTOR X 0. 0. 0. (23) MICHAEL TODD TAYLOR 1.00 DIRECTOR 0. X 0 0. (24) DOUGLAS J. TURCOTTE 1.00 DIRECTOR X 0. 0. 0. (25) DENYA MCGEE 1.00 DIRECTOR 0. 0. 0. (26) EDWARD ANYAFULU 1.00 ٥. DIRECTOR 0 0. 196. 1b Subtotal 211 0 0. c Total from continuation sheets to Part VII, Section A 0. 0. Ō. 211,196. 0. 0. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 1 compensation from the organization No Yes 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person X Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address NONE Description of services Compensation

SEE PART VII, SECTION A CONTINUATION SHEETS

Total number of independent contractors (including but not limited to those listed above) who received more than

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\$100,000 of compensation from the organization

ASSOCIATION INC 06-0646957 Form 990 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (C) (D) (F) Name and title Average Position Reportable Reportable Estimated (check all that apply) hours compensation compensation amount of from from related other per compensation week the organizations Highest compensated employee Individual trustee or director (W-2/1099-MISC) (list any organization from the (W-2/1099-MISC) hours for organization Institutional trustee related and related Key emplayee organizations organizations pelow line) (27) LINDA BORRAS 1.00 DIRECTOR 0. Х 0. 0.

Total to Part VII, Section A, line 1c

Form 990 (2022) ASSOCIATION INC 06-0646957

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (D) (C) Related or exempt Revenue excluded Total revenue Unrelated from tax under function revenue business revenue sections 512 - 514 1 a Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts. 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d 7,198,370. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 51,000. similar amounts not included above 1f g Noncash contributions included in lines 1a-1f 1g \$ 7,249,370. h Total, Add lines 1a-1f **Business Code** 660,130. 660,130. 2 a PROGRAM SERVICE FEES 900099 Program Service **b PROGRAM INCOME** 900099 476.296. 476,296. c RESIDENTIAL ROOM AND B 900099 69,907. 69,907. f All other program service revenue 1,206,333. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,777. other similar amounts) 3,777. Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents 29,400. 6a **b** Less: rental expenses ... 25,266. 6b 4,134. c Rental income or (loss) 4,134. 4,134. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis 50,382. Other Revenue and sales expenses -50,382 c Gain or (loss) 7c -50,382. -50,382. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 43,035. b Less: direct expenses 8,401. 34,634. 34,634. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9a b Less: direct expenses 9ь c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a MISCELLANEOUS REVENUE 900099 83,500. 83,500. d All other revenue 83,500. e Total. Add lines 11a-11d 8,531,366.1,210,467. 71,529. 12 Total revenue. See instructions

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Form 990 (2022) ASSOCIATION I Part IX Statement of Functional Expenses ASSOCIATION INC

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Do r	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic			1	
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	011 100	455 505	55 444	
	trustees, and key employees	211,196.	<u>175,785.</u>	35,411.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	4 070 071	4 054 101	016 600	
7	Other salaries and wages	4,870,871.	4,054,181.	816,690.	
8	Pension plan accruals and contributions (include	į			
_	section 401(k) and 403(b) employer contributions)	E07 200	E24 254	F2 055	
9	Other employee benefits	587,209. 510,958.	534,354.	52,855.	
10	Payroll taxes	510,958.	429,744.	81,214.	
11	Fees for services (nonemployees):				
а	Management	32,649.		22 640	
	Legal	91,121.	21,220.	32,649.	
	Accounting	91,121.	21,220.	69,901.	
	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9	Other. (If line 11g amount exceeds 10% of line 25,	351,679.	287,079.	64 600	
	column (A), amount, list line 11g expenses on Sch O.)	24,727.	21,063.	64,600. 3,664.	
12 13	Advertising and promotion	112,125.	37,789.	74,336.	
	Office expenses	114,123.	31,103.	74,330.	
14 15	Information technology				
15 16	Royalties	168,046.	103,639.	64,407.	
10 17	Occupancy	389.	259.	130.	
17 18	Payments of travel or entertainment expenses		233.		
10	•				
19	for any federal, state, or local public officials Conferences, conventions, and meetings	17,168.	16,568.	600.	
20		12,626.	11,906.	720.	
21	Payments to affiliates	12,020.	11,500.	720.	
21 22	Depreciation, depletion, and amortization	184,125.	142,625.	41,500.	
23	· [40,057.	17,025.	23,032.	
ಬ 24	Other expenses. Itemize expenses not covered	±0,03/•	11,020.	43,034.	
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	022.455	015 005		
a	FOOD	233,155.	217,021.	16,134.	
b	TRANSPORTATION	176,583.	176,583.	60.005	
	REPAIRS AND MAINTENANCE	167,728.	105,722.	62,006.	
d	PROGRAM SUPPLIES	144,987.	144,798.	189.	
	All other expenses	155,974.	126,188.	29,786.	
25	Total functional expenses. Add lines 1 through 24e	8,093,373.	6,623,549.	1,469,824.	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

06-0646957 Page 11 ASSOCIATION INC Form 990 (2022) Part X Balance Sheet

Pai	τX	Balance Sheet					
		Check if Schedule O contains a response or note to	any l	ine in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,011,593.	1	1,412,897
	2	Savings and temporary cash investments			196,440.	2	196,476
	3	Pledges and grants receivable, net			604,470.	3	539,705
	4	Accounts receivable, net		1	236,917.	4	324,600
	5	Loans and other receivables from any current or for	mer o	fficer, director,			
		trustee, key employee, creator or founder, substanti					
		controlled entity or family member of any of these p	erson	s <u>,,</u>		5	
	6	Loans and other receivables from other disqualified	perso	ns (as defined			
		under section 4958(f)(1)), and persons described in	sectio	n 4958(c)(3)(B)		6	
ន	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ä	9	Bound I and a second of the se			33,476.	9	397
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D 10					
	b	Less; accumulated depreciation 10	ОЬ	5,152,970.	1,835,850.	10c	1,832,169
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11			980,190.	13	1,067,896
	14	intangible assets			14		
	15	Other assets. See Part IV, line 11	0.	15	67,346		
	16	Total assets. Add lines 1 through 15 (must equal lin	ne 33)		4,898,936.	16	5,441,486
	17	Accounts payable and accrued expenses		315,428.	17	308,746	
	18	Grants payable		18			
	19	Deferred revenue			802,073.	19	787,003
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part	IV of	Schedule D		21	
9	22	Loans and other payables to any current or former of	officer	, director,			
Ė		trustee, key employee, creator or founder, substanti	ial cor	ntributor, or 35%			
Liabilities		controlled entity or family member of any of these p				22	
_	23	Secured mortgages and notes payable to unrelated	third	parties	278,032.	23	236,378
	24	Unsecured notes and loans payable to unrelated thi	rd pai	rties		24	
	25	Other liabilities (including federal income tax, payab					
		parties, and other liabilities not included on lines 17-	·24). C	Complete Part X			
		of Schedule D			0.	25	67,824.
	26				1,395,533.	26	1,399,951.
رب د	ļ	Organizations that follow FASB ASC 958, check I	here	X			
ĕ		and complete lines 27, 28, 32, and 33.					
alar	27				700,697.	27	700,697
B	28	Net assets with donor restrictions			2,802,706.	28	2,802,706
Ĕ		Organizations that do not follow FASB ASC 958,	chec	k here			
ř		and complete lines 29 through 33.					
ts (29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or equip				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated incom			2 502 402	31	4 044 505
ž	32	Total net assets or fund balances			3,503,403.	32	4,041,535.
	33	Total liabilities and net assets/fund balances			4,898,936.	33	5,441,486

Form **990** (2022)

	990 (2022) ASSOCIATION INC	06-06	46957	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	·····			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8,531	. 3	66.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,093		
3	Revenue less expenses. Subtract line 2 from line 1	3		_	93.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,503		
5	Net unrealized gains (losses) on investments	5			39.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,041	. , 5	35.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	**************			X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		[
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	**************	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	
			Form	990	(2022)



Municipality: City of West Haven

Form NAA-01

2025 Connecticut Neighborhood Assistance Act (NAA) Program Proposal

This form **must** be completed and submitted to your municipality for approval. All items **must** be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. **Do not submit this form directly to the Department of Revenue Services**.

Part I — General Information										
Name of tax exempt organization/municipal agency:										
Address: 201 Noble St West Haven, CT 06516										
Federal Employer Identification Number: _	0	6		0	9	7	8	7	3	8
Program title: Energy Efficient Air Filtration	Systen	ns for C	Classro	oms						
Name of contact person: Dr. Patrice Farqu	ıharsoı	n								
Telephone number: (203) 932-293	39									
Email address: farquharsonp6@gmail.co	om									
Total NAA funding requested (\$250 mini	mum,	\$150,0	000 m	ıaximu	m): \$	15,00	0.00			
Is your organization required to file fed- from Income Tax?	eral Fo	orm 99	90 or 9	990EZ	, Retu	rn of C)rganiz	zation	Exem	pt
X Yes No										
If Yes , attach a copy of the first page of If No , attach a copy of your determinating Revenue Service.						ry Dep	artme	nt, Int	ernal	

Part II — Program Information Check the appropriate description of your program: 100% credit percentage __X__ Energy conservation; or Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)). 60% credit percentage Job training/education for unemployed persons aged 50 or over: Job training/education for persons with physical disabilities: Program serving low-income persons: ___ Child care services: Establishment of a child day care facility; _____ Open space acquisition fund; or Other (specify): Description of program: The West Haven Child Development Center, Inc (WHCDC) is a center-based early childcare and education program in Connecticut serving over 150 children a year, ages 6 weeks to 5 years, accredited by the National Association for the Education of Young Children (NAEYC), Many children present with Asthma and respiratory illness, especially during the winter months so clean air is really essential for the population we serve. Need for program: To operate safely for parents, children, and staff, utilizing a comprehensive safety plan. Following the guidance of our local health department and the State of CT DPH we have developed a plan to have healthier building circulation. Although we had a very thorough safety plan for health screening, enhanced cleaning, and disinfecting, we did not have a clean air filtration system. This is one of the necessary items that the CDC has highly recommended, especially for multi-use buildings, like ours. We added screens to open windows, but that is not feasible in the winter months. Providing clean air all year is essential. Neighborhood area to be served: ___ City-Wide

Plan to implement the program: _____

Once funding is secured, we will purchase the necessary equipment and have it installed.

Program start date: 01-02-2026	
Program completion date: 06-30-20	26
Post-project audit due date:	
	more than two years prior to the program completion date. date must not extend beyond December 31, 2027.
Any program receiving \$25,000 or mo	ore in NAA funding is required to provide a post-project audit, iting firm, to the municipality overseeing the program, no later
Part III — Financial Information	
Program Budget:	
Complete in full. Expenditures must equal of	r exceed total funding.
Sources of Revenue:	
NAA funds requested	\$15,000.00
Other funding sources - itemized s	ources:
a) Fundraising	\$5,000.00
b)	
c)	
d)	
Total Funding:	\$20,000.00
Proposed Program Expenditures:	
Direct operating expenses - itemize	ed description:
a) CleanLeaf CL-1100-C18 3-Stage 2	2,550 each x 5 \$11,250.00
b) Commercial Air Filtration System	
c) System - 950 CFM CleanLeaf Mou	nted Silencer Series \$3,750.00
d) Installation	\$5,000.00
Administrative expenses - itemized	description:
a)	
b)	
c)	
d)	
Total Proposed Expenditures:	\$20,000.00

Timetable:

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program: City of West Haven
Mailing address:
355 Main Street, 2nd Floor, West Haven, CT. 06516
Name of municipal liaison: Ronald C Dumas Telephone number: (203) 937-3546
Fax number: (203) 937-4213
Email address: rdumas@westhaven-ct.gov

Post-Pr	oject	Audit
---------	-------	-------

Is a post-project audit required for this proposal?

Yes

X No

If Yes, date post-project audit due:

Date

990 orm

epartment of the Treasury

Return of Organization Exempt From Income Tax

2023

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

iter	nal Reven	ue Service	G	o to www.irs	.gov/Form	990 for in	structions a	nd the lat	est info	rmatic	on.			rspect	ion
<u>\</u>	For the	e 2023 ca	lendar year, or tax	year beginn	ning	10	/1/2023	, ar	nd endir	ng	9/	30/20	24		
3_	Check if	applicable:	C Name of organizat	tion WES	T HAVEN (HILD DE	VELOPMEN	T CENTER	, INC.	D	Employ	er iden	tification r	umber	
	Address	change	Doing business as												
$\bar{\neg}$		_	Number and street	t (or P.O. box if	mail is not de	livered to st	reet address)	Room/sui	te	- 100	5-09787	38			
٢	Name ch	ange	201 NOBLE ST							E	Telepho	ne num	ber		
٦	Initial retu	um	City or town			· · · · · · · · · · · · · · · · · · ·	State	ZIP code		٦,,					
$\overline{}$			WEST HAVEN				CT	06516		(2	932 (03)	-2939			
۲	Final return	n/terminated	Foreign country na	ame	Foreign pro	vince/state	/county	Foreign p	ostal code	•					
٦	Amended	d return			•		•	• /			Gross re	eceipts S	3	2	2,842,7
Ξ			E Name and address	1											
L	Application	on pending	F Name and address							-	a group retur			Y	es 💢 l
_			PATRICE FARQ	UHARSON 2	<u>201 NOBL</u>	E ST, W	<u>EST HAVEN</u>	N, CT 065	516 H(t) Are al	ll subordina	ates incl	uded?	Y	esi t
1	Tax-exe	mpt status:	X 501(c)(3)	501(c) ((ia	nsert no.)	4947(a)(1) or 5	27	If "No	,* attach a	list. See	instruction	าร	
_	Website	· \//\	W.WHCDC.ORG	 		·········				a) Crour	. ovomotio	o oumbe	ne .		
<u>'</u>					<u> </u>			Т	1 770) Group	exemptio				
<u>_</u>	Form of	organization	n: X Corporation	Trust	Association	n Ot	her	Į t	Year of 1	formatio	n: 197	7 M	State of le	gal domic	cile: C
P	art I	Su	mmary												
	1		lescribe the organ	ization's mis	sion or mo	st signifi	cant activitie	es: T	HE OR	GANI	ZATION	PRO	VIDES D	AY CA	₹F.
8	-		HOOL, SCHOOL												
Ë		111200	11001,0011001	NEADINEOU	3 AI10 IIL	YDOLYN	11110015		יוויייייייייייייייייייייייייייייייייייי	FINV			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	, L. L.
Activities & Governance															
š	2	Check to		the organiza								6 of its	net asse	ets.	
Ğ	3	Number	of voting member	rs of the gov	erning boo	ly (Part \	/I, line 1a) .					3			
95 40	4	Number	of independent vi	oting membe	ers of the g	governing	body (Part	VI, line 18	o)			4			
≝	5		mber of individual	_	-				•			5			
Ξ	6		mber of volunteer			-	•	-				6			-
ទ្វ	7a		related business r									7a	1		
•	Ь		elated business ta									7b	+		
-		Mercanic	cialed business la	Xable Incom	e ilonit Foi	111 990-1	, Fait I, line	11	- i - '			1 / 10		Current V	·
	1	0		(5)4 \ 2001 12	. 41.5						rior Year	04 400		Current Y	
ë	8		utions and grants (21,403		- 4	2,077,7
Revenue	9		n service revenue								6	73,825	5		764,2
ě	10		ent income (Part \)		
14.	11	Other re	evenue (Part VIII, d	column (A), I	ines 5, 6d.	, 8c, 9c, 1	10c, and 11c	e)	. L			821			7
	12	Total rev	enue—add lines 8	through 11 (n	nust equal	Part VIII,	column (A), li	ine 12)			3,19	96,049)	2	2,842,7
	13		and similar amoun									()		
	14		paid to or for mer									()		****
(A)	15		other compensation	•			,				2.5	88,884			2,331,0
Expenses	16a		ional fundraising fe								2,0	00,00			.,001,00
ē							i c)						' 		
×	l b		ndraising expense						0			47.000	+		
	17		xpenses (Part IX, o									17,669			580,2
	18		penses. Add lines									06,553		2	2,911,3
_	19	Revenu	e less expenses. S	Subtract line	18 from li	ne 12 .						10,504	1		-68,60
Net Assets of Fund Balances									Be	ginning	of Curre	nt Year		End of Ye	эаг
Sets	20	Total as	sets (Part X, line 1	16)							1,1	25,409			959,5
# P	21	Total lia	bilities (Part X, line	e 26)					. \square		53	31,159			433,9
울등	22	Net asse	ets or fund balance	es. Subtract	line 21 fro	m line 20)		. $ abla$		59	94,250)		525,6
	irt II		nature Block												
_			y, I declare that I have e	examined this re	turn includin	n accompa	nvina schedules	and statem	ents and	to the h	nest of my	knowled	lne		
			ect, and complete. Decla								•		.90		
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3iç	jn		-b												
łе	re		ature of officer					_			Date				
		PAT	TRICE FARQUHA	RSON				<u>. E</u>	XECUI	LIVE C	DIRECTO	OR			
_		Туре	or print name and title												
		Print	t/Type preparer's name		Pri	eparer's sig	nature			Date				PTIN	
a	id					A			ŀ			Check	if		
	parer	MIC	HAEL SOLAKIAN	1	M	CHAEL	SOLAKIAN			2/2/2	2025	self-em	ployed	XXXXX	XXXX
	e Only	I	i's пате SOLA	KIAN & CO	MPANY, L	LC				Fi	rm's EiN	_XX-	XXX669	5	
	,,,	7 I	's address 580 J	OHNS PASS	SAVENUE	. MADFI	RA BEACH	FL 3370	8	PI	hone no.	(203	3) 215-6	541	
												/=30			
ла	y the IF	ks discus	s this return with t	ne preparer	snown ab	ove? See	e instructions	S.,					L	X Yes	



Municipality: CITY OF WEST HAVEN

Form NAA-01

2025 Connecticut Neighborhood Assistance Act (NAA) **Program Proposal**

This form must be completed and submitted to your municipality for approval. All items must be completed with as much detail as possible. If additional space is needed, attach additional sheets. Please type or print clearly. See attached instructions before completing. Do not submit this form directly to the Department of Revenue Services.

Part I — General Information										
Name of tax exempt organization/municipa	-									
Address: 277 ELM ST WEST HAVEN, CT 06516										
Federal Employer Identification Number: _	0	6	-	1	4	5	0	0	1	4
Program title: _ENERGY CONSERVATION	HVAC	SYST	EM							
Name of contact person: PATRICE FARC	UHAF	RSON								
Telephone number: (203) 932-2939	9									
Email address: FARQUHARSONP6@G	MAIL	CON	1							_
Total NAA funding requested (\$250 min	imum,	\$150,	000 m	aximu	m): \$	24,50	0.00			
Is your organization required to file fed from Income Tax?	eral F	orm 9	90 or 9	90EZ	, Retu	rn of C)rganiz	zation	Exem	pt
Yes X No										
If Yes, attach a copy of the first page	of you	r most	recen	t retur	'n.					
If No , attach a copy of your determinat Revenue Service.	ion let	ter fro	m the	U.S. T	reasu	ry Dep	artme	nt, Int	ernal	

Part II — Program Information

Check the appropriate description of your program:
100% credit percentage
× Energy conservation; or
Comprehensive college access loan forgiveness (see Conn. Gen. Stat. § 12-635(3)).
60% credit percentage
Job training/education for unemployed persons aged 50 or over;
Job training/education for persons with physical disabilities;
Program serving low-income persons;
Child care services;
Establishment of a child day care facility;
Open space acquisition fund; or
Other (specify):
Description of program:
West Haven, CT, and maybe the oldest within the original boundaries of New Haven Colony. Written records indicate that a house belonging to Ebenezer Clark of New Haven was on the site in 1725, although the house may have been built as early as 1684. When British troops landed at Savin Rock in July 1779, the house was already 50 years old. It has never been moved and was a residence continually until 1995. Need for program: The house is finally going through renovations! We are requesting funds to replace the HVAC system. The house is fragile and maintaining the air quality and temperature is imperative for the structure of the house and itis' valuable historical contents. Failing to control environmental factors such as humidity, temperature, and mold can all lead to deterioration of collections. Sound energy improvement measures will also realize energy savings. We need to replace the current system according to the needs assessment conducted for the renovations.
Neighborhood area to be served: The house is located in the center of West Haven, but all surrounding communities benefit.
Plan to implement the program: The renovations started in June 2021, and we are excited that the foundation and drainage system has been completed! Once the roof is replaced, we will purchase the units then install in March of 2026.

Timetable:	
Program start date: 03-01-2026	
Program completion date: 06-30-2026	
Post-project audit due date:	
The program start date must not be more than two years prior Additionally, the program completion date must not extend beyon	. •
Any program receiving \$25,000 or more in NAA funding is require prepared by a certified public accounting firm, to the municipality than three months after the program completion date.	
Part III — Financial Information	
Program Budget:	
Complete in full. Expenditures must equal or exceed total funding.	
Sources of Revenue:	
NAA funds requested	\$24,500.00
Other funding sources - itemized sources:	
a)	
b)	
c)	
d)	1. 18.4.
Total Funding:	\$24,500.00
Proposed Program Expenditures:	
Direct operating expenses - itemized description: a) GAS FIRED W/DX COOLING 1ST FLOOR	\$6,500.00
b) GAS FIRED W/DX COOLING 2ND FLOOR	\$6,500.00
c) DX COOLING CONDENSERS	\$6,500.00
d) DX CONTROLS, RELOCATE CONDENSERS, ATTIC FAI	\$5,000.00
Administrative expenses - itemized description:	
a)	
b)	
c)	
d)	

Total Proposed Expenditures:

\$24,500.00

Part IV — Municipal Information

To be completed by the municipal agency overseeing implementation of the program

Name of municipal agency overseeing implementation of the program:
City of West Haven
Mailing address:
355 Main Street, 2nd Floor, West Haven, CT. 06516
Name of municipal liaison: Ronald C Dumas
Telephone number: (203) 937-3546
Fax number: (203) 937-4213
Email address: rdumas@westhaven-ct.gov

Post-Project Aud	it
Is a post-project audit required for	this proposal?
Yes X	No
If Yes , date post-project au	udit due:
Date	

Internal Revenue Service

Date: September 15, 2004

West Haven Child Development Center} Inc.
Grants Office City Hall
% Noble Community Center
201 Noble Sta
West Haven, CT 06516-6047

Department of the Treasury P. O. Box 2508
Cincinnati, OH 45201

Person to Contact: S. Katherine
Converse 31-07823 Customer
Service Specialist Toll Free
Tetephone Number:
8:00 a.m, to 6:30 p.m.
EST 877-829-5500 Fax
Number:
513-263-3756
Federal Identification Number:

06-0978738

Dear Sir or Madam:

This is in response to your request of September 15, 2004, regarding your organization's taxexempt status.

In July 1978 we issued a determination letter that recognized your organization as exempt from federal income tax, Our records indicate that your organization is currently exempt under section 501 (c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under sections 509(a)(1) and 170(b)(1)(A)(vi) of the Internal Revenue Code,

Our records indicate that contributions to your organization are deductible under section 1 70 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under • section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,

Janna K. Skufen

Janna K. Skufca, Director, TEIGE Customer Account Services

SSN: 061450014 Junission ID: 0653682024345ntrq7ju Status: Accepted Jurisdiction: Federal Type: 990-N Sub Type: Federal	Refund: 0 Status Date: 12/10/2024	Acceptance Code: Accepted Debt Code: PIN Indicator: Payment Ack: Birth Date Validity: Number of Errors: 0	Ack Status Date: 12/10/2024 Expected Refund:: 0 EIC Indicator: State-Only Code: State Packet:	Created Transmitted to EFC Accepted	12/10/202 12/10/202 12/10/202
irvice Center: Unknown		Error Rejected Codes:			

COMMUNICATION C



Dorinda Borer Mayor

Office of the Mayor

City of West Haven 355 Main Street West Haven, Connecticut 06516



City Hall 1896-1968

From: Dorinda Borer, Mayor

To: West Haven City Council, Attention Chairman Pascale

Date: 06/02/2025

RE: Community Investment Fund Application Request

Dear Chairman Pascale and City Council Members,

I am presenting the Council with two resolutions permitting the City to receive funds from the Department of Economic and Community Development for two projects totaling over \$4,000,000, if awarded. Below is a summary of the projects West Haven has developed for Round 9 of the Community Investment Fund.

The Wagner Pedestrian Bridge project proposes design and construction of a publicly accessible walkway extending from (former) Stiles School to Wagner Place. This will complement the recently approved 30-unit development at Stiles and improve pedestrian safety in the area. This request is for \$2,500,000

The School Streetscape and Safety project proposes comprehensive paving and pedestrian safety around both Savin Rock and Washington Schools. This request is for \$2,000,000.

There is no match requirement.

Thank you for your consideration.

Dorinda Borer

Mayor

City of West Haven

Telephone: 203-937-3510 • Facsimile: 203-937-3705

AUTHORIZING RESOLUTION OF THE

City of West Haven City Council

CERTIFICATION:

RESOLVED, that the City of West Haven may make an application to the Connecticut Department of Economic and Community Development for up to \$2,000,000 to undertake the School Streetscapes and Safety Project and to execute an Assistance Agreement;

FURTHER RESOLVED, that Dorinda Borer, as Mayor of the City of West Haven, is authorized and directed to execute and deliver any and all documents on behalf of the City of West Haven and to do and perform all acts which she deems to be necessary or appropriate to carry out the terms of such documents, including, but not limited to, executing and delivering all agreements and documents contemplated by such documents.

I, Stacy Riccio, the Clerk of the C	City of West Haven City Council, do hereby certify that the
following is a true and correct cop	by of a resolution adopted by City Council at its duly called an
held meeting on	, at which a quorum was present and acting throughout, an
that the resolution has not been m	odified, rescinded, or revoked and is at present in full force an
effect.	
The undersigned further certifies	that Dorinda Borer now holds the office of Mayor and that she
has held that office since Decemb	er 3 rd of 2023 and that said term will continue until December
2 nd of 2025	
IN WITNESS WHEREOF: The	undersigned has executed this certificate this day of
<u> </u>	

Stacy Riccio, Clerk of the Council

PLACE SEAL HERE (or "L.S." if no seal

COMMUNICATION D



Dorinda Borer Mayor

Office of the Mayor

City of West Haven 355 Main Street West Haven, Connecticut 06516



City Hall 1896-1968

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Mayor

City of West Haven

Telephone: 203-937-3510 • Facsimile: 203-937-3705

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City of West Haven City Council

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•

Stacy Riccio, Clerk of the Council





COMMUNICATION E. Office of the Finance Director

City of West Haven 355 Main Street West Haven, Connecticut 06516

Monday, June 02, 2025

Nicholas Pascale, Chairman City Council City of West Haven

RE: Authorization of LOCIP project name "Paving", utilizing LOCIP Grant funds, added to the Capital Improvement Plan within the FY 2024-2025 and FY 2025-2026 Capital Budgets and to add available LOCIP Grant funds to the project.

Dear Chairman Pascale

I am seeking approval to add the above-mentioned matter to the June 09, 2025, agenda.

The Finance Department and Public Works department are seeking to add the above project to the FY 2024-2025 and FY 2025-2026 capital improvement plans.

The City of West Haven is seeking to add the above project as part of the FY 2024-2025 and FY 2025-2026 Capital Improvement Plans and obligate any funds from the State of Connecticut LOCIP Grant funds. The funds would be used for paving of various City roads as per LOCIP Guidelines.

The available funds within the LOCIP grant for FY 2024-2025 is \$926,918.73 and for FY 2025-2026 \$341,411.40.

Per LOCIP Guidelines, the municipality's legislative body must approve the project, and such approval is documented in certified minutes of the required municipal meeting(s).

Please do not hesitate to contact us with any questions.

Sincerely,

Phil Sissick Commissioner of Public Works

Robert Sandella Deputy Commissioner Public Works

Michael Gormany Finance Director



COMMUNICATION F. Office of the Finance Director

City of West Haven 355 Main Street West Haven, Connecticut 06516

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Phil Sissick Commissioner of Public Works

Robert Sandella Deputy Commissioner Public Works

Michael Gormany Finance Director

COMMUNICATION &



Office of the Finance Director

City of West Haven 355 Main Street West Haven, Connecticut 06516

Monday, June 02, 2025

Nichols A. Pascale City Council Chairman 355 Main Street West Haven, CT 06516

RE: Bid Waiver for Fiscal year 2025-2026 Purchase of used vehicles

I am writing to request a bid waiver for the procurement of used automobiles valued \$35,000 and under for the City of West Haven. Currently, our standard process requires formal bidding and Council approval, which typically can take up to I month to complete. The extended timeline poses a challenge in securing quality used vehicles, as the market for sub automobiles in highly competitive and vehicles are often sold quickly.

To Ensure that the City Can take advantage of immediate purchasing opportunities and secure reliable and cost-effective transportation solutions, we are requesting a bid waiver that will allow us to expedite the acquisition process for used automobiles. By waiving the formal bid process for these purchases, the city can:

- 1. Respond Quickly to Market Opportunities: The ability to act swiftly will enable us to secure high-quality used vehicles at competitive prices before they are sold to other buyers.
- 2. Meet Immediate Needs: Some City departments have an urgent need to replace aging vehicles that are no longer reliable or cost-effective to maintain. Quick access to replacement vehicles will ensure the continued efficiency of City operations.
- 3. Cost Efficiency: Purchasing used vehicles \$35,000 and under will provide significant cost savings compared to purchasing new vehicles, allowing the city to allocate resources more effectively.

Public Works Fleet can assure the City Council that all purchases will comply with the existing procurement policies, conducting due diligence to ensure fair pricing and vehicle quality. Additionally, all transactions will be documented and rep01ted to maintain transparency and accountability.

Considering the above, Public Works is respectfully requesting that the City Council grant a waiver of the bid requirement for the purchase of used automobiles \$35,000 and under. This waiver will



Office of the Finance Director

City of West Haven
355 Main Street

West Haven, Connecticut 06516

facilitate timely and cost-effective procurement, ensuring that City operations are not disrupted due to vehicle shortages or delays.

Thank you for your consideration of this request. I am committed to maintaining the highest standards of fiscal responsibility and transparency in all procurement activities. Please feel free to contact me if you have any questions or require further information.

Please let me know if you have any additional questions.

Sincerely,

Philip J Sissick MSHRM, CLT, ENVSP

Commissioner of Public Works

Robert A. Orifice Sr.

Fleet Superintendent

Michael Gormany

Finance Director



Dorinda Borer Mayor

COMMUNICATION C from the April 28, agend

Office of the Mayor

City of West Haven 355 Main Street West Haven, Connecticut 06516



City Hall 1896-1968

April 22, 2025

Chairman Nicholas Pascale West Haven City Council 355 Main Street West Haven, CT 06516

Re: An Ordinance Amending Chapter 178 of the Code of the City of West Haven: Posting of Bills

Dear Chairman Pascale:

This communication is to formally request that the City Council approve the attached amendment to Chapter 178 of the West Haven City Code: Posting of Bills.

Chapter 178 currently prohibits the placing of advisements, notices, pictures, playbills or lettering on telephone poles, trees, structures or grounds within the city limits, and provides a fine of \$50 for each offense.

The proposed amendment will provide a fine of \$200 for each posting that is commercial in nature, while maintaining the fine for non-commercial postings at \$50.

Thank you for your consideration of this amendment to the existing ordinance that will further enhance the quality of life for the citizens of West Haven and those who visit our beautiful city.

Dorinda Borer

Mayor

Telephone: 203-937-3510 · Facsimile: 203-937-3705

Chapter 178

POSTING OF BILLS

§ 178-1 Regulations; penalties for offenses.

Any person who affixes or causes to be affixed to a telegraph, telephone or electric light pole or any other public structure or object or to a tree, shrub, rock or other natural or artificial object in any public way or grounds or visibly adjacent thereto, within the limits of the City of West Haven, a playbill, picture, notice, lettering, advertisement or similar thing, except for the purpose of protecting it or the public and under a written permit from the Building Official, Tree Warden or other appropriate state or local agency, shall be subject to arrest and a fine of not more than Fifty Dollars (\$50) for each offense of a non-commercial nature; and a fine of Two-Hundred Dollars (\$200) for each offense of a commercial nature.

§ 178-2 Enforcement.

The Police Department of the City of West Haven shall enforce the provisions of this chapter.