( ) Form I & E-Commercial (MC4AB) - Applicable to all income producing properties other than apartments

(X) Form I & E-Apartment (MC4C) - Applicable to apartment properties only

ANNUAL STATEMENT OF INCOME AND EXPENSES FOR APARTMENT PROPERTIES (Request made pursuant to N.J.S.A. 54:4-34) PERIOD TO BE REFLECTED IN COMPLETION OF STATEMENT Annual period beginning January 1, 2020 and ending on December 31, 2020

PART 1 - PROPERTY IDENTIFICATION

MUNICIPALITY: 1312-Eatontown Boro

(1.1) Block: 2303 (1.2) Lot: 2

(1.4) Property Class: 4C

(1.5) Property Address: 124 WYCKOFF ROAD

(1.6) Property Name (Building Name, Store Name, Complex Name, or Other Property Identifier): Sunnybrook Apartments

PART 2 - OWNER INFORMATION

(2.1) Owner Name: ZIV ASSOCIATES L.L.C.

(2.2) Owner Phone #: [redacted] Extension:

(2.3) Owner Email: [redacted]

PART 3 - PROPERTY INFORMATION

(3.1) Total Number of Apartment Units: 36

Breakdown of Units (amount per category):

(3.2) Studio: 1
(3.3) 1 Bed: 19
(3.4) 2 Bed: 16
(3.5) 3 Bed:
(3.6) 4 Bed:
(3.7a) Other (amount of units): (3.7b) Specify type of unit:

(3.8) Number of elevators in the building(If none, use 0):0

(3.9) Are the Apartments Furnished?: No

(3.10) Are the Apartments air-conditioned? Other
Apartments Air Conditioned Other: they are in the wall of the building

(3.11) Annual vacancy percentage: 10 %

(3.12) Other Comments(If you are submitting any attachments, please list the name(s) of the documents here):

PART 4 - STATEMENT OF ITEMIZED INCOME (Schedule A)

Section A- POTENTIAL INCOME

1 (4.1) Type of Apartment Unit (number of bedrooms)	2 (4.2) Number of Units (if there are multiple of same type of unit with the same rent)	3 (4.3) POSSIBLE Gross Monthly Rent (assume unit is occupied)	4 (4.4) POSSIBLE Annual Rent (Column 2 X Column 3 X 12)	5 (4.5) Occupancy Status for requested period	6 (4.6) Who pays Gas?	7 (4.7) Who pays Electric?	8 (4.8) Who pays Water?	9 (4.9) Who pays Sewer?
Studio	1	710	8,520	Other 9 months	Owner	Tenant	Owner	Owner
2 Bed	4	950	45,600	Occupied	Owner	Tenant	Owner	Owner
2 Bed	7	960	80,640	Other apt #11 vacant 4 months	Owner	Tenant	Owner	Owner
2 Bed	2	965	23,160	Other vacant for month of July then rent went to 970 a month	Owner	Tenant	Owner	Owner
2 Bed	1	895	10,740	Occupied	Owner	Tenant	Owner	Owner
2 Bed	1	970	11,640	Occupied	Owner	Tenant	Owner	Owner
1 Bed	7	840	70,560	Other Apt # 22 Vacant in Sept only and #23 did not pay for Nov & Dec	Owner	Tenant	Owner	Owner
1 Bed	2	835	20,040	Occupied	Owner	Tenant	Owner	Owner
1 Bed	3	850	30,600	Other apt # 28 paid only 4 months last year - she is in court	Owner	Tenant	Owner	Owner
1 Bed	3	815	29,340	Other Apt # 31 did not pay Aug & Sept	Owner	Tenant	Owner	Owner
1 Bed	4	845	40,560	Other Apt #36 vacant Nov & Dec, #30Vacant for Jan &n Feb	Owner	Tenant	Owner	Owner

Total annual possible rent from apartments ($): 371,400

(4.10) OTHER INCOME (Laundry, Parking, Cell Antenna, etc.)

SOURCE OF INCOME	ANNUAL AMOUNT ($)
86.58	103,900

Section B- ACTUAL INCOME

ACTUAL INCOME Collected During Requested Period from Apartments (Gross potential income minus vacancy): 341,394

ACTUAL OTHER INCOME Collected During Requested Period (Laundry, Parking, Cell Antenna, etc.) : 1,039

PART 5- STATEMENT OF GROSS EXPENSES

Guidelines for Completion of Statement of Expenses

*Expenses - refer to periodic expenditures that are necessary to maintain the production of income. Insert the expense item as an annual dollar amount that is applicable to the operation of the entire property.

**If an expense item is not listed, space is provided under "Other Expense Items" to insert the type and amount of the expense.

***DO NOT include total expense amount if the expense does not coincide with the same annual period specified for gross income. (For example, if the building insurance premium is paid on a 3 year basis, the expense reported must be an allocation for a single year.)

OPERATING EXPENSES (expenses paid by owner of building)

Item	Annual Expense ($)
(5.1) Insurance	12,004
(5.2) Management	5,500
(5.3) Payroll (not included in other categories)	10,000
(5.4) Heat (if paid by ower)	0
(5.5) Gas (excluding 5.4) (if paid by ower)	25,245
(5.6) Electric (excluding 5.4) (if paid by ower)	5,200
(5.7) Water (if paid by ower)	20,800
(5.8) Sewer (if paid by ower)	15,200
(5.9) Building Repairs and Maintenance (DO NOT include capital expenditures)	39,540
(5.10) Grounds Repairs and Maintenance (DO NOT include capital expenditures)	3,600
(5.11) Roof repairs (if not included in 5.9)	17,280
(5.12) Snow removal (if not included in 5.10)	900
(5.13) Window washing (if not included in 5.10)	0
(5.14) Exterminating	2,839
(5.15) Security	0
(5.16) Advertising	0
(5.17) Administrative	1,200
(5.18) Office Supplies	500
(5.19) Leasing Fee	0
Total Operating Expenses	159,808

Other Operating Expenses Items

*DO NOT list expenses such as taxes, mortgage interest and amortization, depreciation charges, income or corporation taxes, special corporation costs or salaries that are not attributable to the operation of the real estate

**Capital Expense Items can be itemized in this section as an annualized expense (For example, if painting occurs every 7 years, the cost for this expense should be divided by 7 and properly itemized in its own category)

Type of Expense (if capital expense- MUST annualize)	ANNUAL EXPENSE ($)
paint, carpet, floors,appliances	35,000

COMPLETE PART 4 (SCHEDULE A) BEFORE SIGNING THIS STATEMENT

PART 6 - SIGNATURE AND VERIFICATION

The undersigned declares under the penalties provided by law, that this return (including any accompanying schedules and statements) has been examined by him and to the best of his knowledge and belief is a true, correct and complete return. If the return is prepared by a person other than the taxpayer, his declaration is based on all the information relating to the matters required to be reported in the return of which he has knowledge.

Signature of Taxpayer or Officer of Taxpayer (Please enter name)	Title
Zvezda Eftoski	Owner

Signature of Individual or Firm Preparing Return (Please enter name)	Address