## Item 5.a.vii.

# Cashflow Projection/Where to Invest Incoming City & State Contributions

#### **DISCUSSION OF VALUATION RESULTS**

#### **Comparison of Required Employer Contributions**

The required employer contribution this year compared with the preceding year is as follows:

	r FYE 9/30/2025 ed on 10/1/2023 Valuation	For FYE 9/30/2024 Based on 10/1/2022 Valuation		Increase (Decrease)	
Required Contribution As % of Contr. Year Payroll	\$ 9,403,359 63.01 %	\$	9,059,658 66.14 %	\$	343,701 (3.13) %
Estimated State Contribution As % of Contr. Year Payroll	606,595 4.06 %		606,595 4.43 %		0 (0.37) %
Net Employer Contribution As % of Contr. Year Payroll	8,796,764 58.95 %		8,453,063 61.71 %		343,701 (2.76) %

#### **Payment of Required Contribution**

The contribution developed in this valuation has been calculated as though payments are made at the end of each biweekly pay period. If the full contribution for the fiscal year ending September 30, 2025 is paid on October 1, 2024, the net required employer contribution is \$8,487,846 or 56.88% of covered payroll.

Further, the required Employer contribution has been computed with the assumption that the amount to be received from the State in FYE 2024 and 2025 will be at least equal to the base amount of \$606,595. If the actual payment from the State falls below this amount, then the Employer must increase its contribution by the difference.

Actual contributions for the fiscal year ending September 30, 2023 were \$7,882,933 from the City plus \$606,595 of Chapter 185 money, for a total of \$8,489,528. The total annual required contribution was \$8,489,528 based on the payment schedule. The excess Chapter 185 revenue of \$430,204 was applied to the Unfunded Actuarial Accrued Liability.

#### **Revisions in Benefits**

There were no changes in benefits since the prior valuation.

#### **Revisions in Actuarial Assumptions and Methods**

There were no changes in assumptions or methods since the prior valuation.

Please note that this valuation reflects the benefit provision which limits the annual benefit to \$108,000 without any assumption for future increases to this amount. We recommend that consideration be given to assuming future increases in this benefit limit when determining the liabilities of the Retirement System.





## **CITY OF DELRAY BEACH**

### FINANCE DEPARTMENT - PENSION





August 21, 2024

Salem Trust 1715 N. Westshore Blvd Suite 750 Tampa, FL 33607

SUBJECT: City of Delray Beach Police Officers' Retirement System 2023 Premium Tax Distribution

Please deposit enclosed check 4-38-620 920 for \$1,114,422.27 in the City of Delray Beach Police Officers' Retirement System's Salem Trust account 0740001193. Instructions regarding distribution are forthcoming.

Time is of the essence. Therefore, please deposit this check into the Police Officers' R&D account (0740001193) as soon as possible and under no circumstances more than five days after receipt as provided in Florida Statutes 185.11. Further, please sign and return the enclosed Acknowledge Receipt to the Pension Office as soon as possible.

Thank you for your prompt attention to this matter. You may contact me at (561) 243-7289 / castronovol@mydelraybeach.com with any questions.

Sincerely,

City of Delray Beach Police Officers' Retirement System

Lisa Castronovo, CEBS, CPPT

Pension Administrator

Paul Weber

Chair, Board of Trustees

**Enclosure** 

cc:

Brendon Vavrica, Mariner Institutional

## STATE OF FLORIDA

#### DEPARTMENT OF FINANCIAL SERVICES REMITTANCE ADVICE

FLAIR ACCOUNT CODE	OLO	SITE	DOCUMENT NUMBER	OBJECT	DATE	PAYMENT NO
72-202532002-72750300-00-31009500	720000	00	D5000066645	7100	08/13/24	0118299

PAYMENT AMOUNT 1,114,422.27

DELRAY BEACH, CITY OF POLICE PENSION FUND 100 NW 1ST AVE DELRAY BEACH FL 33444 AGENCY DOCUMENT NO V000761

PLEASE DIRECT QUESTIONS TO: (850) 488-3053, DEPARTMENT OF MANAGEMENT SERVICES

VENDORS NOW CAN VIEW PAYMENT INFORMATION AT HTTP://FLAIR.DBF.STATE.FL.US

INVOICE NUMBER

AMOUNT

POLICE \$ 1,114,422.27

DETACH CAREFULLY AND RETAIN FOR YOUR RECORDS BEFORE CASHING OR DEPOSITING THE WARRANT

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND. CAPITOL BUILDING MUST APPEAR BELOW TO BE AUTHENTIC



FLAIR ACCOUNT CODE 72-202532002-72750300-00-31009500 D5000066645 V000761 7100 08/13/24

SWDN

ADN

**OBJECT** DATE WARRANT NO 56-1544 54-0118299-0 441

VOID AFTER 12 MONTHS

OLO 720000 SITE 00

CONTACT (850) 488-3053 FOR PAYMENT QUESTIONS

**4-38-**620 920

## STATE OF FLORIDA

DEPARTMENT OF FINANCIAL SERVICES

**AMOUNT** 

\$\*1,114,422.27

ONE-MILLION-ONE-HUNDRED-FOURTEEN-THOUSAND-FOUR-HUNDRED-TWENTY-TWO & 27/100 DOLLARS

**EXPENSE WARRANT** 

TO: DIVISION OF TREASURY

TALLAHASSEE

JIMMY PATRONIS, CHIEF FINANCIAL OFFICER

PAY TO THE

DELRAY BEACH, CITY OF POLICE PENSION FUND 100 NW 1ST AVE DELRAY BEACH FL 33444