State of New Jersey
Department of the Treasury
Integrity Oversight Monitoring Reporting Model

Thacher Associates LLC Work Authorization NO. 3 Integrity Oversight Monitoring Services for HNTB Program and Project Management Support

| Firm Name: | Contract No. 14-033-D |
|---------------------|---|
| Engagement: | New Jersey Transit P.O. No. B-51391-003 |
| For Quarter Ending: | 03/31/2021 |

Reports required under A-60 will be submitted by Integrity Monitors on the first business day of each calendar quarter to the State Treasurer and will contain detailed information on the projects/contracts/programs funded by the Disaster Relief Appropriations Act.

| | Recipient Data Elements | Response | Comments |
|----------|--|---|--|
| | General Info | | |
| , | | | |
| <u> </u> | | | |
| 1. | Recipient of funding | New Jersey Transit Corporation | |
| 2. | Federal Funding Agency? (e.g. HUD, FEMA) | Federal Transit Administration | |
| 3. | State Funding (if applicable) | N/A | |
| 4. | Award Type | FTA - Public Transportation Emergency Relief Program | |
| 5. | Award Amount | \$40,500,000.00 | Represents total funds authorized under HNTB Contract 13-007B. |
| 6. | Contract/Program Person/Title | Jignasa Desai-McCleary, Chief, Procurement & Support Services | |
| 7. | Brief Description, Purpose and Rationale of Project/Program | This project consists of providing program management support, project | |
| | | management support and related activities over Superstorm Sandy | |
| | | Recovery and NJ TRANSIT Resiliency Program. | |
| 8. | Contract/Program Location | Management of Programs and Projects in various locations | |
| 9. | Amount Expended to Date | \$37,656,433.69 | |
| 10. | Amount Provided to other State or Local Entities | None | |
| 11. | Completion Status of Contract or Program | Completed | |
| 12. | Expected Contract End Date/Time Period | March 31, 2018 | |
| В. | Monitoring Activities | | |
| 13. | If FEMA funded, brief description of the status of the project worksheet | N/A | |
| | and its support. | | |
| 14. | Quarterly Activities/Project Description (include number of visits to meet | Thacher Associates ("TA") reviewed HNTB invoice ledger distribution for | |
| | with recipient and sub recipient, including who you met with, and any site | proper grant coding. | |
| | visits warranted to where work was completed) | | |
| | · · | TA performed reviews of subconsultant charges in HNTB Invoices 16, 35 | |
| | | and subconsultant onboarding documentation. TA also reviewed | |
| | | additional documentation of deliverables rendered by HNTB and | |
| | | completed its review of insurance maintained by HNTB. | |
| | | sompleted to letter of modification maintained by mitter. | |
| | | TA began compiling its interim test results by risk category. | |
| | | The began companies its interim test results by risk category. | |
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| No | Recipient Data Elements | Response | Comments |
|----------|--|---|----------|
| 15 | Brief Description to confirm appropriate data/information has been | TA received clarifications from NJT regarding umbrella and excess liability | |
| | provided by recipient and what activities have been taken to review in | insurance requirements. | |
| | relation to the project/contract/program. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 16 | Description of quarterly auditing activities that have been conducted to | TA reviewed subconsultant onboarding documentation. TA also | |
| | ensure procurement compliance with terms and conditions of the | completed its review of insurance maintained by HNTB. | |
| | contracts and agreements. | | |
| | | | |
| <u> </u> | | | |
| 17 | Have payment requisitions in connection with the contract/program been | TA reviewed subconsultant charges in HNTB Invoices 16, 35. | |
| | reviewed? Please describe | | |
| 18 | Description of quarterly activity to prevent and detect waste, fraud and | Please see Item 14 for description of IOM activities. | |
| 40 | abuse. | N | |
| | Provide details of any integrity issues/findings | None. | |
| 20 | 4, | None. | |
| 24 | preservation issue(s). | Niekensellselde | |
| 21 | , | Not applicable. | |
| 22 | quarter Provide details of any actions taken to remediate waste, fraud and abuse | Not applicable | |
| 22 | | Not applicable. | |
| C | noted in past quarters Miscellaneous | | |
| C. | | | |
| 23 | Attach a list of hours and expenses incurred to perform your quarterly | | |
| | integrity monitoring review | Please see attachment. | |
| 24 | Add any item, issue or comment not covered in previous sections but | <u>.</u> | |
| | deemed pertinent to monitoring program. | None. | |

| Name of Integrity Monitor: Thacher Associates LLC | |
|---|-------------------------------------|
| Name of Report Preparer: M Signature: War Manual Date: July 1, 2021 | lartin Aronchick, Managing Director |

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Attachment for Question #23

| Hours |
|--------|
| - |
| - |
| 3.00 |
| - |
| - |
| - |
| 1.25 |
| 4.00 |
| 168.50 |
| - |
| - |
| - |
| - |
| - |
| - |
| - |
| 176.75 |
| |