Run Date: 07/11/2016
Status: CERTIFIED

Governance Information (Authority-Related)

Question	Response	URL (if applicable)
1. Has the Authority prepared its annual report on operations and accomplishments for the reporting period as required by section 2800 of PAL?	No	
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	No	
3. Has the lead audit partner for the independent audit firm changed in the last five years in accordance with section 2802(4) of PAL?	No	N/A
4. Does the independent auditor provide non-audit services to the Authority?	No	N/A
5. Does the Authority have an organization chart?	Yes	http://brooklynnavyyard.org/media/uploads/Org%20Chart_mgmt_102014.pdf
6. Are any Authority staff also employed by another government agency?	No	
7. Has the Authority posted their mission statement to their website?	No	
8. Has the Authority's mission statement been revised and adopted during the reporting period?	No	N/A
9. Attach the Authority's measurement report, as required by section 2824-a of PAL and provide the URL.		http://brooklynnavyyard.org/about-bnydc/corporate-documents/

Run Date: 07/11/2016

Status: CERTIFIED

Governance Information (Board-Related)

Question	Response	URL
1. Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL?	Yes	N/A
2. Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL?	Yes	N/A
3. Has the Board established Finance Committee in accordance with Section 2824(8) of PAL?	Yes	N/A
4. Provide a URL link where a list of Board committees can be found (including the name of the committee and the date established):		http://brooklynnavyyard.org/about-bnydc/corporate-documents/
5. Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?	Yes	N/A
6. Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year		http://brooklynnavyyard.org/about-bnydc/corporate-documents/
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	http://brooklynnavyyard.org/about-bnydc/corporate-documents/
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	http://brooklynnavyyard.org/about-bnydc/corporate-documents/
9. Does the Board review and monitor the Authority's implementation of financial and management controls?	Yes	N/A
10. Does the Board execute direct oversight of the CEO and management in accordance with Section 2824(1) of PAL?	Yes	N/A
11. Has the Board adopted policies for the following in accordance with Section 2824(1) of PAL?		
Salary and Compensation	No	N/A
Time and Attendance	No	N/A
Whistleblower Protection	Yes	N/A
Defense and Indemnification of Board Members	Yes	N/A
12. Has the Board adopted a policy prohibiting the extension of credit to Board members and staff in accordance with Section 2824(5) of PAL?	No	N/A
13. Are the Authority's Board members, officers, and staff required to submit financial disclosure forms in accordance with Section 2825(3) of PAL?	Yes	N/A
14. Was a performance evaluation of the board completed?	No	N/A
15. Was compensation paid by the Authority made in accordance with employee or union contracts?	Yes	N/A
16. Has the board adopted a conditional/additional compensation policy governing all employees?	No	

Name	Kramer, David	Name	Kreizman, Fred
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2006	Term Start Date	01/01/2005
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Cruz, William	Name	Nojovits, Alexander
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/1975	Term Start Date	01/01/1975
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

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Status: CERTIFIED

Name	Marshall, Jane	Name	McCain, Ronald
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2002	Term Start Date	01/01/2002
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

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Status: CERTIFIED

Jame	Metal, Rami	Name	Friedman, Adam
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2014	Term Start Date	01/01/2002
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Martin, Amani	Name	Markman, Glenn
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2007	Term Start Date	01/01/2006
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Turner, William	Name	Gutman, Henry B
Chair of Board	No	Chair of Board	Yes
If yes, Chair designated By.		If yes, Chair designated By.	Elected by Board
Term Start Date	01/01/2001	Term Start Date	06/02/2014
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Other
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

ame	Niederman, Rabbi David	Name	Haft, Steven
hair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/1994	Term Start Date	01/01/2007
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Tame	Sinacori, Steven	Name	Wiltshire, Albert
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2008	Term Start Date	01/01/2007
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Bobb-Semple, Crystal	Name	Yuille-Williams, Antonia
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2002	Term Start Date	01/01/2002
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Fitle		Title	
Tas the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Freund, Hugh	Name	Montvel-Cohen, Thomas
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2006	Term Start Date	01/01/2002
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

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Name	Deutsch, Eric	Name	Hastick, Roy, Sr.
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2002	Term Start Date	01/01/1995
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

Name	Davidson, Peter	Name	Lamas, Paul
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/01/2013	Term Start Date	01/01/1982
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		Confirmed by Senate?	
Has the Board member/designee signed the acknowledgement of fiduciary duty?	No	Has the Board member/designee signed the acknowledgement of fiduciary duty?	No
Complied with training requirement of Section 2824?	No	Complied with training requirement of Section 2824?	No
Does the Board member/designee also hold an elected or appointed State gove	No	Does the Board member/designee also hold an elected or appointed State gove	No
Does the Board member/designee also hold an elected or appointed municipal government position?	No	Does the Board member/designee also hold an elected or appointed municipal government position?	No

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Status: CERTIFIED

Staff Lis	sting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time		Base Annualized Salary	Actual salary paid to the Individua 1	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
ACEVEDO, EDWARD	Director of Utilities	Managerial				FT	No	91,680.84	123,229.35	31,548.51	0	0	0	154,777.86	No	
ALCIDAS, JEAN	Security Officer	Operational		Local 553		FT	No	40,476.80	47,826.52	5,949.72	0	0	1,400	55,176.24	No	
ALEXIS, DANIEL		Administrative and Clerical				PT	No	15,828.54	14,135.23	0	0	0	0	14,135.23	No	
AMADIZ, DIANA	Bus. Developer Coordinato	Administrative and Clerical				FT	No	51,000.00	51,534.15	534.15	0	0	0	52,068.3	No	
ARNOLD, AARON	Supervisin g Mechanic	Operational		local 3		FT	No	71,487.60	72,130.85	15,019.89	0	0	600	87,750.74	No	
ARNOLD,	Security Officer	Operational		Local 553		FT	No	38,750.40	40,579.25	828.85	0	0	1,000	42,408.1	No	
Angieri, Anthony	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
BAKSH, MAZEN	Security Officer	Operational		Local 553		FT	No	38,750.40	45,602.26	6,151.86	0	0	700	52,454.12	No	
BANKER, MARTIN	VP Deputy Genral Counsel	Executive				FT	Yes	120,384.90	120,250.08	0	0	0	0	120,250.08	No	
BASCOMBE, ROLAND	Director of Maintenanc e	Managerial				FT	No	75,798.75	93,349.47	17,550.72	0	0	0	110,900.19	No	
BELACHEW , FREHIWOT	Assistant	Professional				FT	Yes	91,613.97	91,511.23	0	0	0	0	91,511.23	No	
BEST, TONIA	Legal Assistant	Administrative and Clerical				FT	No	47,618.50	47,564.86	0	0	0	0	47,564.86	No	
BOWENS, RECARDO	Sergeant	Operational		Local 553		FT	No	47,278.40	57,335.65	8,959.25	0	0	1,100	67,394.9	No	

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Staff Lis																
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus		Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
BRACKET, MARION	Security Officer	Operational		Local 553		FT	No	30,097.60	28,364.01	0	0	0	300	28,664.01	No	
BRANFORD, LOUIS	Dir. Security Mngnt.	Administrative and Clerical				FT	Yes	69,832.97	69,742.42	0	0	0	0	69,742.42	No	
BRANHAM, TINA	Employment Services specialist	Administrative and Clerical				FT	No	50,000.00	50,969.88	969.88	0	0	0	51,939.76	No	
BROUGHTON , RICHARD	Laborer	Operational		local 3		FT	No	39,166.40	43,868.61	3,502.21	0	0	1,200	48,570.82	No	
BROWN, JONATHAN	Senior Mechanic	Operational		local 3		FT	No	67,059.20	73,942.32	6,683.12	0	0	200	80,825.44	No	
BRUNO, DEVINCI	AP Accountant Assistant	Administrative and Clerical				FT	No	30,030.00	30,388.75	358.75	0	0	0	30,747.5	No	
BURGESS III, LEON	Security Officer	Operational		Local 553		FT	No	38,750.40	41,042.92	2,292.52	0	0	0	43,335.44	No	
BUSSEY, VIRDELL	Helper	Operational		local 3		FT	No	44,574.40	57,613.81	11,039.41	0	0	2,000	70,653.22	No	
BUTLER, CHRISTOPH ER	Sergeant	Operational		Local 553		FT	No	47,278.40	49,865.63	2,387.23	0	0	200	52,452.86	No	
Bell, Angel	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
CADET, ROCHARD	Security Officer	Operational		Local 553		FT	No	38,750.40	43,422.84	3,272.44	0	0	1,400	48,095.28	No	
CAMILLE, ALBAN	Senior Mechanic	Operational		local 3		FT	No	67,059.20	75,640.08	7,580.88	0	0	1,000	84,220.96	No	
CAMPBELL, CHRISTOPO HER	Security Officer	Operational		Local 553		FT	No	30,097.60	32,773.91	2,676.31	0	0	0	35,450.22	No	
CANN, BERTRAM	Shuttle Bus Operator (PT)	Operational				FT	No	27,081.60	27,696.73	615.13	0	0	0	28,311.86	No	

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Staff List																
Name	Title	Group	Department	Union	Barga-	Full	Exempt		Actual	Over	Performance	Extra Pay	Other	Total	Individual	If yes, Is
			/	Name	ining	Time/		Annualized	salary	time	Bonus		Compensa	Compens	also paid by	the payment
			Subsidiary		Unit	Part		Salary	paid to	paid by			tion/Allo	-ation	another	made by a
						Time			the	Authority			wances/Ad		entity to	State or
									Individua				justments		perform the	local
									1						work of the	government
															Authority	
CASTILLO,	Security	Operational		Local 553		FT	No	30,097.60	32,729.19	2,431.59	0	0	200	35,360.78	No	
QUINN	Officer					<u> </u>	<u> </u>			<u> </u>						
CHERRY,	Security	Operational		Local 553		FT	No	40,476.80	43,901.26	3,224.46	0	0	200	47,325.72	No	
	Officer					<u> </u>	<u> </u>		<u> </u>	<u> </u>			<u> </u>		<u> </u>	
	Mechanic A	Operational		local 3		FT	No	61,609.60	71,794.88	8,985.28	0	0	1,200	81,980.16	No	
ER,				I		ı	I		I	1						
EVENTON	1				ı		1	1			I					
	V.P , Lead	Technical and				FT	Yes	104,854.00	104,736.64	0	0	0	0	104,736.64	No	
	Architect	Engineering		1		<u> </u>	1	<u> </u>	1	<u> </u>						I
		Professional				FT	No	51,242.74	51,185.22	0	0	0	0	51,185.22	No	
N, AYESHA	Agent			1			1	<u> </u>	1	<u> </u>						l
	Sergeant	Operational		Local 553		FT	No	47,278.40	50,299.36	2,420.96	0	0	600	53,320.32	No	
MARK				1		<u> </u>	1	<u> </u>	1	<u> </u>						l
1	Security	Operational		Local 553		FT	No	21,840.00	19,012.14	0	0	0	0	19,012.14	No	
BRYAN	Officer			1		<u> </u>	1	<u> </u>	1	<u> </u>						l
CORLEY,	VP	Executive				FT	Yes	134,984.85	134,833.76	0	0	0	0	134,833.76	No	
JAMES	Constructi			1			1		I	I.						
	on Mngnt.				I		1	1			T					
	Security	Operational		Local 553		FT	No	33,051.20	30,843.03	0	0	0	0	30,843.03	No	
	Officer	<u> </u>		1	<u> </u>		1	1	1	1	1					
cox,	Laborer	Operational		local 3		FT	No	40,206.40	42,204.38	1,997.98	0	0	200	44,402.36	No	
LATARSHA		<u> </u>		1	1		1	1	1	1	1		1			
CRIDER,	Security	Operational		Local 553		PT	No	24,219.00	19,797.58	0	0	0	0	19,797.58	No	
	Officer	<u> </u>		1			1		I	1						
	Security	Operational		Local 553		FT	No	38,750.40	38,760.87	0	0	0	500	39,260.87	No	
	Officer			1			1		I	1						
CUNNINGHA	_	Operational		Local 553		FT	No	30,097.60	32,636.08	2,338.48	0	0	200	35,174.56	No	
'	Officer			I		I	1		I	1						
FRANKIE	ı			1			1	1			1					
		Operational				FT	No	0.00	0	0	0	0	0	0	No	
Chantelle		1	1	1	1	1	1	1	1	1	1	1	1		I	1
	Maintenanc	Operational				FT	No	0.00	0	0	0	0	0	0	No	
	le	1		[1	1	1	1	1	1	1		1			
1	Vice	Technical and				FT	Yes	0.00	0	0	0	0	0	0	No	
pasquale	President	Engineering	l	1	<u> </u>	I	ļ	1	1	1	1	1	1	1	1	l

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Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time		Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
Coe, Sarah	Programs	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Conrad, Saul	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Cornett, Robin	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
DANIELS, KATHRYN	LEGAL	Administrative and Clerical				PT	No	0.00	0	0	0	0	0	0	No	
DAVILA, JOSEPH	Laborer	Operational		local 3		FT	No	39,166.40	38,475.42	0	0	0	0	38,475.42	No	
DE LEON, WALTER	Director of Maintenanc	Managerial				FT	No	79,000.00	49,369.79	0	0	0	0	49,369.79	No	
	e															
DRUCKER, RICHARD	Sr. VP External	Executive				FT	Yes	139,239.12	139,083.12	0	0	0	0	139,083.12	No	
Deleaney, Ewie	Affairs Maintenanc	Operational				FT	No	0.00	0	0	0	0	0	0	No	
EADY,	Mechanic B	Operational		local 3		FT	No	54,329.60	60,145.52	5,215.92	0	0	600	65,961.44	No	
EHRENBERG , DAVID	President & CEO	Executive				FT	Yes	220,000.00	161,346.18	0	0	0	0	161,346.18	No	
ELLIS, ALLAN	Mechanic A	Operational		local 3		FT	No	62,649.60	71,063.71	6,414.11	0	0	2,000	79,477.82	No	
FELICIANO , MIGUEL	Shuttle Bus Operator	Operational				FT	No	32,085.00	33,827.6	1,742.6	0	0	0	35,570.2	No	
FIELDS, JERROD	Security Officer	Operational		Local 553		FT	No	38,750.40	40,298.9	1,548.5	0	0	0	41,847.4	No	
FIGARO, JAMES	Laborer	Operational		local 3		FT	No	39,166.40	46,794.2	5,627.8	0	0	2,000	54,422	No	
FINNEY, TANYA	Sergeant	Operational		Local 553		FT	No	47,278.40	52,654.79	3,976.39	0	0	1,400	58,031.18	No	

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Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
FRANCOIS, CARL	Sergeant	Operational		Local 553		FT	No	47,278.40	54,062.17	5,583.77	0	0	1,200	60,845.94	No	
FRASER, MELISSA	Sergeant	Operational		Local 553		FT	No	47,278.40	57,000.99	8,322.59	0	0	1,400	66,723.58	No	
FUCHS, AILEEN	Dupty. Dir Exhibits & Pgm.	Managerial				FT	Yes	70,000.00	60,765.92	0	0	0	0	60,765.92	No	
Fields, Dwayne	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
GLOVER, AISHA	V P External Affairs	Executive				FT	Yes	101,125.00	100,894.15	0	0	0	0	100,894.15	No	
GRAHAM, LASHAWNDA	Office Assistant	Administrative and Clerical				FT	No	30,883.07	31,359.72	476.65	0	0	0	31,836.37	No	
GREENIDGE , HILARY	Security Officer	Operational		Local 553		FT	No	40,476.80	40,942.88	266.08	0	0	200	41,408.96	No	
Garnett, Marcia	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Gibbs, Kezia	Human Resources	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
HABIB, RAYMOND	Sr. Property Manager	Professional				PT	No	72,290.40	76,387.78	4,097.38	0	0	0	80,485.16	No	
HAILE, ERMIAS	Project Manager	Professional				FT	Yes	69,629.22	69,532.5	0	0	0	0	69,532.5	No	
HAMILTON, DENZIL	Security Officer	Operational		Local 553		FT	No	40,476.80	44,807.96	3,331.16	0	0	1,000	49,139.12	No	
HANNA, TORYL	_	Administrative and Clerical				FT	No	50,000.00	49,748.96	0	0	0	0	49,748.96	No	
HARRIS, CHERRY- ANN		Administrative and Clerical				FT	No	36,371.07	36,350.07	0	0	0	0	36,350.07	No	
HARRIS, KEVIN	Security Officer	Operational		Local 553		FT	No	30,097.60	32,689.92	11,892.32	0	0	700	45,282.24	No	

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Name	Title	Group	Department	Union	Barga-	Full	Exempt	Base	Actual	Over	Performan	ce Extra Pay	Other	Total	Individual	If yes, Is
			/	Name	ining	Time/		Annualized	salary	time	Bonus		Compensa	Compens	also paid by	the paymen
			Subsidiary		Unit	Part		Salary	paid to	paid by			tion/Allo	-ation	another	made by a
						Time			the	Authority			wances/Ad		entity to	State or
									Individua				justments		perform the	local
									1						work of the	government
															Authority	
HARRISON,	Supervisin	Operational		local 3		FT	No	71,489.60	85,463.37	13,573.77	0	0	400	99,437.14	No	
DONALD	g Mechanic															
HAYNES,	Security	Operational		Local 553		FT	No	40,476.80	36,986.34	0	0	0	0	36,986.34	No	
JOHN	Officer															
HERNANDEZ	Dir.	Administrative				FT	No	58,655.81	71,305.58	12,649.77	0	0	0	83,955.35	No	
, MAXIMO	Fleet/Tool	and Clerical														
	Room															
HIDALGO,	Administra	Administrative				FT	No	32,770.67	35,570.04	799.35	0	0	0	36,369.39	No	
CARMEN	tive Asst.	and Clerical														
HODGE,	Mechanic A	Operational		local 3		FT	No	62,649.60	78,699.7	15,250.1	0	0	800	94,749.8	No	
GEORGE																
HOPKINS,	VP of	Professional				FT	Yes	80,000.00	78,506.02	0	0	0	0	78,506.02	No	
MATTHEW	Developmen															
	t and															
	Planning															
HOWARD,	Helper	Operational		local 3		FT	No	40,206.40	45,948.14	3,741.74	0	0	2,000	51,689.88	No	
ORASARIE			1													
Harris,	Programs	Administrative				FT	No	0.00	0	0	0	0	0	0	No	
Stephon		and Clerical														
IDAME,	Security	Operational		Local 553		FT	No	30,097.60	37,312.48	6,014.88	0	0	1,200	44,527.36	No	
WILSON	Officer															
JACKSON,	Security	Operational		Local 553		FT	No	33,051.20	36,436.1	2,684.9	0	0	700	39,821	No	
JOSEPH	Officer															
JAMES,	Security	Operational		Local 553		FT	No	33,051.20	36,968.03	3,616.83	0	0	300	40,884.86	No	
SAMUEL	Officer															
JEAN,	Security	Operational		Local 553		FT	No	29,224.00	32,629.15	3,405.15	0	0	0	36,034.3	No	
ESAIE	Officer															
JOLLIFFE-	Business	Administrative				FT	No	51,500.00	55,388.07	3,377.68	0	0	0	58,765.75	No	
ESPEUT,	Developer	and Clerical								[
RONAME	Coordinato															
	r															
JONATHAN,	Security	Operational		Local 553		FT	No	40,476.80	40,071.3	0	0	0	0	40,071.3	No	
MONTERO	Officer															

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Staff Lis	ting															
Name JONES,	Title Shuttle	Group Operational	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time		Base Annualized Salary	Actual salary paid to the Individua 1	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
	Bus Operator (PT)															
JOSEPH, FRIDAY	Mechanic A	Operational		local 3	I	FT	No	61,609.60	77,533.23	15,723.63	0	0	2,000	95,256.86	No	
Jackson, Jasinya	Employment Center	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Shawndara	ion	Operational				PT	No	0.00	0	0	0	0	0	0	No	
KARALEWIC Z-ROBLES, LISA	Security Officer	Operational		Local 553		PT	No	18,811.00	18,722.16	0	0	0	0	18,722.16	No	
	Sr. VP Design & Const.	Executive			ı	FT	Yes	144,513.20	144,299.42	0	0	0	0	144,299.42	No	
KING , THOMAS	Sergeant	Operational		Local 553		FT	No	47,278.40	52,460.7	3,782.38	0	0	1,400	57,643.08	No	
1	Accounts Payable Accountant	Administrative and Clerical				FT	No	40,314.20	30,034.69	0	0	0	0	30,034.69	No	
	General Counsel	Executive				FT	Yes	0.00	0	0	0	0	0	0	No	
, ,	Vice President	Executive				FT	Yes	0.00	0	0	0	0	0	0	No	
LAMBERT, PETERSON	Security Officer	Operational		Local 553		FT	No	38,750.40	46,068.99	6,518.59	0	0	800	53,387.58	No	
	Accounts Receivable Accountant	Administrative and Clerical			1	FT	No	46,635.50	46,442.12	0	0	0	0	46,442.12	No	
LEIBOWITZ , SHANI	Sr. VP Developmen t & Planning	Executive				FT	Yes	113,660.87	121,225.79	0	0	0	0	121,225.79	No	

Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus	e Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
LEMONS, EDWARD	Security Officer	Operational		Local 553	3	FT	No	38,750.40	36,171.55	0	0	0	0	36,171.55	No	
LEWIS,	Systems Engineer	Professional				FT	No	57,000.00	57,000.06	0	0	0	0	57,000.06	No	
LOPEZ,	Security Officer	Operational		Local 553	3	FT	No	30,097.60	34,869.72	4,072.12	0	0	700	39,641.84	No	
LOSHAKOV, SEMEN	Helper	Operational		local 3		FT	No	45,614.40	49,834.57	14,424.27	0	0	2,000	66,258.84	No	
LOWE, CYRIL	Shuttle Bus Operator (PT)	Operational				PT	No	18,499.00	20,499.2	2,000.2	0	0	0	22,499.4	No	
Lamonte, Robert	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Liang, Yuanyuan	Finance	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Lopez, Anthony	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
MADONIA, JOHN	Dir. Capital Bgting & Special Projects	Executive				FT	Yes	117,685.06	136,270.83	0	0	0	0	136,270.83	No	
MAIORANO, THOMAS	VP Leasing	Executive				FT	Yes	124,755.11	124,615.27	0	0	0	0	124,615.27	No	
MANGUEL, HERNAN	Shuttle Bus Operator (PT)	Operational				PT	No	17,966.00	16,860.4	0	0	0	0	16,860.4	No	
MARTIN, EILEEN	Administra tive Asst.	Administrative and Clerical				FT	No	50,551.58	50,515.05	0	0	0	0	50,515.05	No	
MATZ, ELLIOT	Executive VP & COO	Executive				FT	Yes	198,125.54	197,903.52	0	0	0	0	197,903.52	No	
MCGHEE, JOHN	Program Guard	Operational		Local 553		FT	No	39,520.00	44,519.72	4,999.72	0	0	0	49,519.44	No	

Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performanc Bonus	e Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
MELENDEZ, ALBA	Exec. Admin.	Administrative and Clerical				FT	No	56,078.77	56,266.29	187.58	0	0	0	56,453.87	No	
MENARDY, KERBY	Sr. Project Manager	Technical and Engineering				FT	No	103,909.15	103,792.86	0	0	0	0	103,792.86	No	
MERCED,	Security Officer	Operational		Local 553		PT	No	25,298.00	26,251.54	553.54	0	0	400	27,205.08	No	
MILAN JR.,, FELIX	Sr. Property Manager	Professional				FT	No	78,334.79	78,246.6	0	0	0	0	78,246.6	No	
MILLER- GRANT, JACQUELIN	Program Guard	Operational		Local 553		FT	No	39,520.00	46,470.53	6,939.53	0	0	11	53,421.06	No	
MILLS, SHAUN	Shuttle Bus	Operational				FT	No	17,966.00	691	0	0	0	0	691	No	
MIRANDA, ANTHONY	Operator Laborer	Operational		local 3		FT	No	40,996.80	44,099.03	3,102.23	0	0	0	47,201.26	No	
MIRANDA, JULIO	Mechanic A	Operational		local 3		FT	No	62,649.60	71,403.91	8,554.31	0	0	2,000	81,958.22	No	
MOFFATT,	Security Officer	Operational		Local 553		FT	No	30,097.60	35,790.69	5,493.09	0	0	200	41,483.78	No	
MOHAMED, GAFFAR	Senior VP	Executive				FT	Yes	139,898.49	139,741.74	0	0	0	0	139,741.74	No	
MONDESIR,	Controller Security Officer	Operational		Local 553		FT	No	30,097.60	35,704.66	4,407.06	0	0	1,200	41,311.72	No	
MONSANTO, FELICIA	Budget Analyst	Administrative and Clerical				FT	No	48,288.16	52,849.14	0	0	0	0	52,849.14	No	
MONTESDEO CA, LAURO	_	Operational		Local 553		FT	No	33,051.20	38,385.77	4,834.57	0	0	500	43,720.34	No	
MOODY, TIFFANE	HR Assistant	Administrative and Clerical				FT	No	28,665.00	28,675.5	10.5	0	0	0	28,686	No	

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Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performanc Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
MORRISON, PATRICK	Security Officer	Operational		Local 553		FT	No	38,750.40	44,521.33	4,370.93	0	0	1,400	50,292.26	No	
MOSLEY, SHIRENE	Program Guard	Operational		Local 553		FT	No	39,520.00	44,699.29	5,179.29	0	0	0	49,878.58	No	
MURRAY, ADRIENE	Visitors Service Manager	Administrative and Clerical				FT	No	35,000.00	33,350.55	0	0	0	0	33,350.55	No	
Magdich, David	Maintenanc e	Operational				FT	Yes	0.00	0	0	0	0	0	0	No	
McFadden, Danielle	Programs	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Melendez, Nestor	Transporta ion	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Miller, Steven	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Moccio, Robert	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Montgomer y, Monica	Programs	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Morales, Marcos	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
NEPTUNE, TYRA	Security Officer	Operational		Local 553		PT	No	13,650.00	11,435.63	0	0	0	0	11,435.63	No	
Nachsin, Marie	External Affairs	Executive				FT	Yes	0.00	0	0	0	0	0	0	No	
Newman, Clare	Chief of Staff	Executive				FT	Yes	0.00	0	0	0	0	0	0	No	
OLALOWO, AZEEZ	Engineerin g/Project Analyst	Administrative and Clerical				FT	No	43,198.10	43,151.02	0	0	0	0	43,151.02	No	
PADILLA, MELVIN	Shuttle Bus Operator	Operational				FT	No	17,966.00	1,764	0	0	0	0	1,764	No	
PLASKOTA, ZENON		Operational		local 3		FT	No	62,649.60	39,166	0	0	0	200	39,366	No	

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Staff Lis																
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
PLOWDEN, LATOYA	Laborer	Operational		local 3		FT	No	39,166.40	49,346.47	8,181.07	0	0	2,000	59,527.54	No	
POWERS, DEREK	V P Security Management	Executive				FT	Yes	123,974.36	123,835.36	0	0	0	0	123,835.36	No	
Park, Boris	Technology	Technical and Engineering				FT	No	0.00	0	0	0	0	0	0	No	
Patterson , Michael	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Payero, Juan Carlos	Employment Center	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Phillip, Raphael	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Plowden,	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Powell, Roniesha	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
RAINEY, JOCELYNNE	Sr. VP HR	Executive				FT	Yes	115,000.00	117,032.77	0	0	0	0	117,032.77	No	
	Workforce Developmen t															
RAMANATHA N, PRIYA		Professional				FT	No	90,000.00	33,230.68	0	0	0	0	33,230.68	No	
RAMIREZ, CARLOS	Security Officer	Operational		Local 553		FT	No	40,476.80	40,869.58	392.78	0	0	0	41,262.36	No	
RATLIFF,	Laborer	Operational		local 3		FT	No	33,820.80	38,126.76	3,705.96	0	0	600	42,432.72	No	
RAYMOND, JEAN	Security Officer	Operational		Local 553		FT	No	30,097.60	28,856.11	0	0	0	700	29,556.11	No	

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Staff Lis	ting															
Name	Title Sr.	Group Administrative	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time		Annualized Salary	Actual salary paid to the Individua 1	Over time paid by Authority	Performance Bonus		Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
RICHARD, VENETIA	Benefits Administra tor	and Clerical				FT	No	49,424.45	51,868.93	0	0	0	0	51,868.93	No	
RICHARDS, ENFORD	Mechanic A	Operational		local 3		FT	No	62,496.60	72,355.5	9,105.9	0	0	600	82,061.4	No	
RILEY, DENNIS	Asst. Dir. Of Archives & Records	Administrative and Clerical				FT	No	50,000.00	22,499.91	0	0	0	0	22,499.91	No	
RISOLO, PETER	Project Constructi on Manager	Professional				FT	Yes	125,351.85	125,211.55	0	0	0	0	125,211.55	No	
RIVERA, JOEL	Security Officer	Operational		Local 553		FT	No	40,476.80	44,484.84	2,608.04	0	0	1,400	48,492.88	No	
RIVERA, NANCY	Asst. Dir. Sec. Mngnt.	Administrative and Clerical				FT	Yes	59,983.23	59,916.1	0	0	0	0	59,916.1	No	
RIVERA, SONIA	Laborer	Operational		local 3		FT	No	40,206.40	43,266.87	1,660.47	0	0	1,400	46,327.34	No	
RODRIGUEZ , AURIA	Shuttle Bus Operator	Operational				FT	No	28,046.20	28,310.59	264.39	0	0	0	28,574.98	No	
ROMANO, DANIELLA	V P, BLDG 92 Exhibits & Programs	Executive				FT	Yes	79,567.50	79,478.36	0	0	0	0	79,478.36	No	
RYBAK, RAYMOND	Senior Project Manager	Technical and Engineering				FT	Yes	95,481.00	95,374.13	0	0	0	0	95,374.13	No	
Railsback , Kristel	Developmen t	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Rivera, Marta	Maintenanc e	Operational				FT	No	0.00	0	0	0	0	0	0	No	

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Status: CERTIFIED

Staff Lis	Title	Croun	Department	Union	Barga-	Full	Exempt	Baga	Actual	Over	Performano	e Extra Pay	Other	Total	Individual	T.E
Manne	11016	Group	/	Name	ining	Time/	nvembr	Annualized	salary	time	Bonus	Extra Pay	Compensa	Compens	also paid by	If yes, Is the paymen
			/ Subsidiary	Name	Unit	Part		Salary	paid to	paid by	Donas		tion/Allo	-ation	another	made by a
			Substataty		01120	Time		Barary	the	Authority			wances/Ad	402011	entity to	State or
						Time			Individua	Hachoricy					perform the	local
									1				justments		work of the	
									1						Authority	government
		1		1			1			1			1		<u>-</u>	
Rodriquez	Finance	Administrative				FT	No	0.00	0	0	0	0	0	0	No	
, John	1	and Clerical	1	1	1	1	1	1	<u> </u>	1	1	<u> </u>				1
Roy,		Operational				FT	No	0.00	0	0	0	0	0	0	No	
Michael	le		<u> </u>			1	1	1	<u> </u>					<u> </u>		<u> </u>
SAAVEDRA		Administrative				FT	No	28,419.15	30,917.77	498.62	0	0	0	31,416.39	No	
ALICEA,	tive Asst.	and Clerical				I			1					I		
JACQUELIN																
E																
SADHU,	Security	Operational		Local 553		FT	No	40,476.80	43,084.21	1,907.41	0	0	700	45,691.62	No	
LOKESHWAR	Officer					<u> </u>	<u> </u>	ļ								
SALGADO,	Laborer	Operational		local 3		FT	No	40,206.40	43,363.28	2,556.8	0	0	600	46,520.08	No	
JOSE								l								
SANDERS,	Laborer	Operational		local 3		FT	No	40,206.40	42,573.32	1,566.92	0	0	800	44,940.24	No	
BERTHA																
SANDERS,	Security	Operational		Local 553		FT	No	40,476.80	45,711.22	3,834.42	0	0	1,400	50,945.64	No	
MATTHEW	Officer															
SANTOS,	Security	Operational		Local 553		PT	No	13,650.00	13,712.5	62.5	0	0	0	13,775	No	
ANDRE	Officer															
SCHNEIDER	Risk	Professional				PT	No	42,860.35	42,812.46	0	0	0	0	42,812.46	No	
	Reduction															
	Officer															
SELFRIDGE	Director	Managerial				FT	No	85,000.00	100,381.54	15,381.54	0	0	0	115,763.08	No	1
, ROBERT	of									,						
	Maintenanc															
	е															
SHERRON,	Security	Operational		Local 553		FT	No	40,476.80	42,600.11	2,145.31	0	0	0	44,745.42	No	
MARK	Officer															
SIMMOMS,	Administra	Administrative				FT	No	45,400.28	50,560.2	5,155.95	0	0	0	55,716.15	No	
RENEE	tive Asst.	and Clerical												1		
SMITH,	Security	Operational		Local 553		FT	No	40,476.80	45,904.12	5,427.32	0	0	0	51,331.44	No	
WENDELL	Officer	_						<u> </u>		, -				,		
SOLIS,	Security	Operational		Local 553		FT	No	40,476.80	48,095.61	7,604.81	0	0	1,400	57,100.42	No	1
WILMAR	Officer	17 11 40 10 11 41				1		13, 5.55	10,000.01	,,00 1.01			1,,,,,,,	5.,100.12	1.5	

Run Date: 07/11/2016
Status: CERTIFIED

Staff Lis	ting															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time	Exempt	Annualized Salary	Actual salary paid to the Individua	Over time paid by Authority	Performance Bonus	e Extra Pay	Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
SOLOMON, KENYA	External Affairs Coordinato r	Administrative and Clerical				FT	No	51,500.00	54,268.6	768.6	0	0	0	55,037.2	No	
SOTO, JOSE	Laborer	Operational		local 3		FT	No	39,166.40	37,338.5	0	0	0	0	37,338.5	No	
STABILE, CARMINE	Sr.VP Util & Maintenanc e	Executive				FT	Yes	144,506.54	144,318.49	0	0	0	0	144,318.49	No	
SUMPTER, JEROME	Security Officer	Operational		Local 553		FT	No	33,051.20	39,642.71	6,591.51	0	0	0	46,234.22	No	
Sanders, Shameqa	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	
Shields, Robert	Employment Center	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
	Transporta ion	Operational				FT	No	0.00	0	0	0	0	0	0	No	
TASPOVTSK Y, DMITRY		Operational				FT	No	25,898.60	28,200.52	2,301.92	0	0	0	30,502.44	No	
TATE, SUNNY	Sergeant	Operational		Local 553		FT	No	47,278.40	50,644.22	2,965.82	0	0	400	54,010.04	No	
THOMAS, QUENTINA	Security Officer	Operational		Local 553		FT	No	40,476.80	38,507.26	0	0	0	0	38,507.26	No	
Tarpey, Nicole	Counsel	Professional				FT	Yes	0.00	0	0	0	0	0	0	No	
Taylor, Valine	Finance	Administrative and Clerical				FT	No	0.00	0	0	0	0	0	0	No	
Taylor, Vernon	Human Resources	Administrative and Clerical				FT	Yes	0.00	0	0	0	0	0	0	No	

Run Date: 07/11/2016
Status: CERTIFIED

Staff List	<u>ting</u>															
Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining Unit	Full Time/ Part Time		Annualized Salary	Actual salary paid to the Individua 1	Over time paid by Authority	Performance Bonus		Other Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
VALENTINE , CHRISTOPH ER	Security Officer	Operational		Local 553		FT	No	38,750.40	41,920.36	2,669.96	0	0	500	45,090.32	No	
		Administrative and Clerical				FT	No	50,000.00	25,666.21	0	0	0	0	25,666.21	No	
	Security Officer	Operational		Local 553		FT	No	40,476.80	49,776.6	7,899.8	0	0	1,400	59,076.4	No	
GEORGE A	Special Projects Coordinato	Administrative and Clerical				FT	No	45,100.00	46,043.6	9,436	0	0	0	55,479.6	No	
WASSERMAN , LEONARD		Professional				PT	No	30,000.00	30,000.1	0	0	0	0	30,000.1	No	
	Sr. Propery Manager	Professional				FT	No	93,981.41	93,876.98	0	0	0	0	93,876.98	No	
CHRISTOPH ER	Deputy Director of IT Operations	Professional				FT	Yes	90,000.00	89,230.8	0	0	0	0	89,230.8	No	
	Security Officer	Operational		Local 553		FT	No	18,058.56	19,024.33	965.77	0	0	0	19,990.1	No	
WILLIAMSO N, LEROY	Mechanic B	Operational		local 3		FT	No	54,329.60	62,376.45	6,046.45	0	0	2,000	70,422.9	No	
WRIGHT, CHEYENNE	Laborer	Operational		local 3		FT	No	39,166.40	12,239.5	0	0	0	0	12,239.5	No	
WRIGHT, KISHA	Mechanic B	Operational		local 3		FT	No	54,329.60	58,937.45	3,007.85	0	0	1,600	63,545.3	No	
Williams, Tabbar	Security	Operational				FT	No	0.00	0	0	0	0	0	0	No	

Run Date: 07/11/2016
Status: CERTIFIED

No

Benefit Information

During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for

Board Members

Name	Title	Severance Package	Payment for Unused Leave	Club Member- ships	Use of Corporate Credit Cards	Personal Loans	Auto	Transpo- rtation	Housing Allow- ance	Spousal / Dependent Life Insurance	Tuition Assist- ance	Multi- Year Employ- ment	None of These Benefits	Other
Gutman,	Board of												Х	
Henry B	Directors													
Bobb-	Board of												X	
Semple, Crystal	Directors													
Cruz,	Board of												Х	
William	Directors													
Davidson,	Board of												Х	
Peter	Directors													
Deutsch,	Board of												Х	
Eric	Directors													
Freund,	Board of												Х	
Hugh	Directors													
Friedman,	Board of												Х	
Adam	Directors													
Haft,	Board of												Х	
Steven	Directors													
Hastick,	Board of												Х	
Roy, Sr.	Directors													
Kramer,	Board of												Х	
David	Directors													
Kreizman,	Board of												Х	
Fred	Directors													
Lamas,	Board of												Х	
Paul	Directors													
Marshall,	Board of												Х	
Jane	Directors													
Markman,	Board of												Х	
Glenn	Directors													
Martin,	Board of												Х	
Amani	Directors													
McCain,	Board of												X	
Ronald	Directors													
Metal,	Board of												Х	
Rami	Directors													
Montvel-	Board of												Х	

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Status: CERTIFIED

Name	Title	Severance	Payment	Club	Use of	Personal	Auto	Transpo-	Housing	Spousal /	Tuition	Multi-	None	Other
		Package	for	Member-	Corporate	Loans		rtation	Allow-	Dependent	Assist-	Year	of	
			Unused	ships	Credit				ance	Life	ance	Employ-	These	
			Leave		Cards					Insurance		ment	Benefits	
Cohen,	Directors													
Thomas														
Niederman,	Board of												Х	
Rabbi	Directors													
David														
Nojovits,	Board of												Х	
Alexander	Directors													
Sinacori,	Board of												Х	
Steven	Directors													
Turner,	Board of												Х	
William	Directors													
Wiltshire,	Board of												Х	
Albert	Directors													
Yuille-	Board of												Х	
Williams,	Directors													
Antonia														

Staff

Name		Severance Package	Payment for Unused Leave	Club Member- ships	Use of Corporate Credit Cards	Personal Loans	Auto	Transpo- rtation	Housing Allow- ance	Spousal / Dependent Life Insurance	Tuition Assist- ance	Multi- Year Employ- ment	None of These Benefits	Other
BANKER,	VP Deputy												Х	
MARTIN	Genral													
	Counsel													
COBURN,	V.P , Lead												Х	
JOHN	Architect													
CORLEY,	VP												Х	
JAMES	Construction													
	n Mngnt.													
DRUCKER,	Sr. VP												Х	
RICHARD	External													
	Affairs													
EHRENBERG,	President 8	4											Х	
DAVID	CEO													
GLOVER,	V P												Х	
AISHA	External													
	Affairs													

Name	Title	Severance	Payment	Club	Use of	Personal	Auto	Transpo-	Housing	Spousal /	Tuition	Multi-	None	Other
		Package	for	Member-	Corporate	Loans		rtation	Allow-	Dependent	Assist-	Year	of	
			Unused	ships	Credit				ance	Life	ance	Employ-	These	
			Leave		Cards					Insurance		ment	Benefits	
KEEGAN,	Sr. VP												Х	
KERRY	Design &													
	Const.													
LEIBOWITZ,	Sr. VP												Х	
SHANI	Development													
	& Planning													
MADONIA,	Dir.												Х	
JOHN	Capital													
	Bgting &													
	Special													
	Projects													
MAIORANO,	VP Leasing												Х	
THOMAS														
MATZ,	Executive												Х	
ELLIOT	VP & COO													
MENARDY,	Sr. Project												Х	
KERBY	Manager													
MOHAMED,	Senior VP &												Х	
GAFFAR	Controller													
POWERS,	V P												Х	
DEREK	Security													
	Management													
RAINEY,	Sr. VP HR &												Х	
JOCELYNNE	Workforce													
	Development													
RISOLO,	Project												Х	
PETER	Construction													
	n Manager													
STABILE,	Sr.VP Util												Х	
CARMINE	&													
	Maintenance													

Annual Report for Brooklyn Navy Yard Development Corporation

Fiscal Year Ending:06/30/2015 Status: CERTIFIED

Subsidiary/Component Unit Verification

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct?

No
Are there other subsidiaries or component units of the Authority that are active, not included in the PARIS reports submitted by this Aut No

Subsidiary/Component Unit Creation

Name of Subsidiary/Component Unit	Establishment	Entity Purpose
	Date	
GMC Landlord, LLC	06/19/2012	to syndicate historic and new market tax credits for
		green manufacturing center building
GMC Brooklyn, Inc.	06/19/2012	to syndicate historic and new market tax credits for
		green manufacturing center building
GMC Master Tenant, LLC	06/19/2012	to syndicate historic and new market tax credits for
		green manufacturing center building
Building 77 QALICB, Inc.	12/10/2014	to syndicate new market tax credits for building 77

Subsidiary/Component Unit Termination

Name of Subsidiary/Component Unit	Termination Date	Termination Reason	Proof of Termination
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Run Date: 07/11/2016

Run Date: 07/11/2016
Status: CERTIFIED

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

<u>Assets</u>

Current	Accete
Current	ADDELD

Cash and cash equivalents	\$58,661,107
Investments	\$0
Receivables, net	\$6,336,627
Other assets	\$1,177,469
Total Current Assets	\$66,175,203
Noncurrent Assets	
Restricted cash and investments	\$0
Long-term receivables, net	\$28,025,361
Other assets	\$4,588,669
Capital Assets	
Land and other nondepreciable property	\$0
Buildings and equipment	\$494,138,058
Infrastructure	\$0
Accumulated depreciation	\$139,211,055
Net Capital Assets	\$354,927,003
Total Noncurrent Assets	\$387,541,033
Total Assets	\$453,716,236

Run Date: 07/11/2016
Status: CERTIFIED

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

<u>Liabilities</u>

Current Liabilities

Accounts payable	\$7,052,996
Pension contribution payable	\$0
Other post-employment benefits	\$0
Accrued liabilities	\$0
Deferred revenues	\$16,201,177
Bonds and notes payable	\$0
Other long-term obligations due within one year	\$0
Total Current Liabilities	\$23,254,173
Noncurrent Liabilities	
Pension contribution payable	\$0
Other post-employment benefits	\$0
Bonds and notes payable	\$39,020,000
Long Term Leases	\$4,852,539
Other long-term obligations	\$101,500,000
Total Noncurrent Liabilities	\$145,372,539
Total Liabilities	\$168,626,712
Net Asset (Deficit)	
Net Asset	
Invested in capital assets, net of related debt	\$261,418,750
Restricted	\$0
Unrestricted	\$23,670,774
Total Net Assets	\$285,089,524

Status: CERTIFIED

Run Date: 07/11/2016

il lear Ending:00/30/2015

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Operating	Revenues

Charges for services	\$0
Rental & financing income	\$28,545,835
Other operating revenues	\$6,722,901
Total Operating Revenue	\$35,268,736
Operating Expenses	
Salaries and wages	\$14,611,866
Other employee benefits	\$0
Professional services contracts	\$2,293,632
Supplies and materials	\$2,711,710
Depreciation & amortization	\$15,909,008
Other operating expenses	\$9,077,778
Total Operating Expenses	\$44,603,994
Operating Income (Loss)	(\$9,335,258)
Nonoperating Revenues	
Investment earnings	\$280,430
State subsidies/grants	\$0
Federal subsidies/grants	\$0
Municipal subsidies/grants	\$0
Public authority subsidies	\$0
Other nonoperating revenues	\$0
Total Nonoperating Revenue	\$280,430

Run Date: 07/11/2016
Status: CERTIFIED

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Nonoperating Expenses

Interest and other financing charges	\$758,043
Subsidies to other public authorities	\$0
Grants and donations	\$0
Other nonoperating expenses	\$0
Total Nonoperating Expenses	\$758,043
Income (Loss) Before Contributions	(\$9,812,871)
Capital Contributions	\$22,081,754
Change in net assets	\$12,268,883
Net assets (deficit) beginning of year	\$272,820,641
Other net assets changes	\$0
Net assets (deficit) at end of year	\$285,089,524

Run Date: 07/11/2016

Status: CERTIFIED

Current Debt

Question	Response
1. Did the Authority have any outstanding debt, including conduit debt, at any point during the reporting period?	Yes
2. If yes, has the Authority issued any debt during the reporting period?	Yes

New Debt Issuances List by Type of Debt and Program

Type Of Debt: Authority Debt - General Obligation

Program:

Project	Amount	s	CUSIP	Bond Closing	Taxable	Issue	True	Interest	Term	Cost of	PACB	URL
			Number	Date	Status	Process	Interest	Type		Issuance (\$)	Project	
							Cost					
Building	Refunding	0.00		12/22/2014		Negotiated	1	Fixed	35	0.00		
77	New	14,700,000.00										
	Total	14,700,000.00										
Inc												

Run Date: 07/11/2016
Status: CERTIFIED

Schedule of Authority Debt

Type of Debt	Statutory Authorization	Outstanding Start of Fiscal Year		Debt Retired	Outstanding
	Authorization (\$)	of fiscal Year (\$)	Issuances (\$)	(\$)	End of Fiscal Year (\$)
State Obligation					
State Guaranteed					
State Supported					
State Contingent Obligation					
State Moral Obligation					
Other State Funded					
Authority Obligation					
General Obligation	0.00	24,320,000.00	14,700,000.00	0.00	39,020,000.00
Revenue					
Other Non-State Funded	0.00	101,500,000.00	0.00	0.00	101,500,000.00
Conduit					
Conduit Debt					
Conduit Debt - Pilot Increment Financing					

Real Property Acquisition/Disposal List

1. Address Line1: 63 Flushing Avenue Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 07/01/2014 Transaction Date: 07/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: AIS Furniture Refinishing, Inc. Organization: BMB Sales Associates, LLC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

з. Address Line1: 63 Flushing Avenue 4. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 07/01/2014 Transaction Date: 07/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Bob & Sons Refinishing Organization: DeVore Fidelity, LTD Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

5. Address Line1: 63 Flushing Avenue 6. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 08/01/2014 Transaction Date: 08/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: DFORM, Inc. Organization: Sebastian Kim, Inc. Last Name: Last Name: First Name: First Name: Address Line1: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

7. Address Line1: 63 Flushing Avenue 8. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 08/01/2014 Transaction Date: 08/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Urban Homecraft Organization: TECRO, INC. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

9. Address Line1: 63 Flushing Avenue 10. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 08/01/2014 Transaction Date: 09/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Baquero Woodworking Organization: Israel Cohen & Sons International, Corp. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

11. Address Line1: 63 Flushing Avenue 12. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 09/01/2014 Transaction Date: 09/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Justin Paul, Inc. Organization: Circle Studio Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Real Property Acquisition/Disposal List

13. Address Line1: 63 Flushing Avenue 14. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 09/10/2014 Transaction Date: 10/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Duggal, Inc. Organization: Karline Von Heyl Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016
Status: CERTIFIED

Real Property Acquisition/Disposal List

15. Address Line1: 63 Flushing Avenue 16. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 10/01/2014 Transaction Date: 10/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Nine Stories Furniture Co. Organization: Swift Contracting & Maint. Corp. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

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Real Property Acquisition/Disposal List

17. Address Line1: 63 Flushing Avenue 18. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 10/01/2014 Transaction Date: 10/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: City View Blinds of New York Organization: Emerald Poly, Inc Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

19. Address Linel:	63 Flushing Avenue	20. Address Linel:	63 Flushing Avenue
Address Line2:		Address Line2:	
City:	BROOKLYN	City:	BROOKLYN
State:	NY	State:	NY
Postal Code:	11205	Postal Code:	11205
Plus4:		Plus4:	
Province/Region:		Province/Region:	
Country:	USA	Country:	USA
Property Description:		Property Description:	Commercial Building
Estimated Fair Market Value:	\$10	Estimated Fair Market Value:	\$10
How was the Fair Market	Other	How was the Fair Market	Other
Value Determined?:		Value Determined?:	
Transaction Type:	DISPOSITION LEASE	Transaction Type:	DISPOSITION LEASE
If Other, Explain:		If Other, Explain:	
Transaction Date:	10/01/2014	Transaction Date:	10/01/2014
Purchase Sale Price:		Purchase Sale Price:	10,01,2011
Lease Data (If applicable)		Lease Data (If applicable)	
Market Rate(\$/square foot):		Market Rate(\$/square foot):	
Lease Rate(\$/square foot):		Lease Rate(\$/square foot):	
Lease Period (months):		Lease Period (months):	
Seller/Purchaser/Tenant Data:		Seller/Purchaser/Tenant Data:	
	Precision Plumbing & Services, Inc.		IPB Associates Corp.
Last Name:		Last Name:	_
First Name:		First Name:	
	63 Flushing Avenue		63 Flushing Avenue
Address Line2:		Address Line2:	
City:	BROOKLYN	City:	BROOKLYN
State:		State:	
Postal Code:		Postal Code:	
Plus4:		Plus4:	
Province/Region:		Province/Region:	
Country:	USA	Country:	USA
Relation With Board		Relation With Board	
member/senior authority		member/senior authority	
management?	No	management?	No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

21.	Address Linel:	63 Flushing Avenue	22.	Address Linel:	63 Flushing Avenue
	Address Line2:			Address Line2:	
	City:	BROOKLYN		City:	BROOKLYN
	State:			State:	
	Postal Code:	11205		Postal Code:	11205
	Plus4:			Plus4:	
	Province/Region:			Province/Region:	
	Country:	USA		Country:	USA
	Property Description:	Commercial Building	Pro	perty Description:	Commercial Building
Estima	ted Fair Market Value:	\$10		Fair Market Value:	
How was	s the Fair Market	Other	How was th	e Fair Market	Other
	Value Determined?:			Value Determined?:	
	Transaction Type:	DISPOSITION LEASE		Transaction Type:	DISPOSITION LEASE
	If Other, Explain:			If Other, Explain:	
	Transaction Date:	11/01/2014		Transaction Date:	11/01/2014
	Purchase Sale Price:	,,	Pu	rchase Sale Price:	,,
Leas	e Data (If applicable)			ta (If applicable)	
· · · · · · · · · · · · · · · · · · ·	t Rate(\$/square foot):	10		te(\$/square foot):	10
	e Rate(\$/square foot):			te(\$/square foot):	
	Lease Period (months):			e Period (months):	
Seller/E	Purchaser/Tenant Data:		Seller/Purc	haser/Tenant Data:	
	Organization:	William Lipton Gallery, Corp.		Organization:	Crye American, LLC
	Last Name:			Last Name:	
	First Name:			First Name:	
	Address Linel:	63 Flushing Avenue		Address Linel:	63 Flushing Avenue
	Address Line2:			Address Line2:	
	_	BROOKLYN		-	BROOKLYN
	State:			State:	=:=
	Postal Code:	11205		Postal Code:	11205
	Plus4:			Plus4:	
	Province/Region:			Province/Region:	
	Country:	USA		Country:	USA
	Relation With Board			lation With Board	
mem	mber/senior authority	No	member	senior authority	No
	management?	110		management?	110

Real Property Acquisition/Disposal List

23. Address Line1: 63 Flushing Avenue 24. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 11/01/2014 Transaction Date: 11/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Tom Edmonds Organization: IceStone Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

25. Address Line1: 63 Flushing Avenue 26. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 11/01/2014 Transaction Date: 11/01/2014 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Michael H Berkowitz, LLC Organization: December Box Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Real Property Acquisition/Disposal List

Annual Report for Brooklyn Navy Yard Development Corporation Fiscal Year Ending:06/30/2015

Run Date: 07/11/2016
Status: CERTIFIED

27. Address Linel:	63 Flushing Avenue	28. Address Linel:	63 Flushing Avenue
Address Line2:		Address Line2:	
City:	BROOKLYN	City:	BROOKLYN
State:		State:	
Postal Code:	11205	Postal Code:	11205
Plus4:		Plus4:	
Province/Region:		Province/Region:	
Country:	USA	Country:	USA
Property Description:	Commercial Building	Property Description:	Commercial Building
Estimated Fair Market Value:	\$10	Estimated Fair Market Value:	\$10
How was the Fair Market	Other	How was the Fair Market	Other
Value Determined?:		Value Determined?:	
Transaction Type:	DISPOSITION LEASE	Transaction Type:	DISPOSITION LEASE
If Other, Explain:		If Other, Explain:	
Transaction Date: Purchase Sale Price: Lease Data (If applicable)		Transaction Date: Purchase Sale Price: Lease Data (If applicable)	
Market Rate(\$/square foot):	-	Market Rate(\$/square foot):	
Lease Rate(\$/square foot):		Lease Rate(\$/square foot):	
Lease Period (months):		Lease Period (months):	
Seller/Purchaser/Tenant Data:		Seller/Purchaser/Tenant Data:	
	Precision Flight Systems, LLC.		Pliant Energy Systems LLC
Last Name:		Last Name:	32 32
First Name:		First Name:	
Address Linel:	63 Flushing Avenue	Address Linel:	63 Flushing Avenue
Address Line2:		Address Line2:	
City:	BROOKLYN	City:	BROOKLYN
State:	NY	State:	NY
Postal Code:	11205	Postal Code:	11205
Plus4:		Plus4:	
Province/Region:		Province/Region:	
Country:	USA	Country:	USA
Relation With Board		Relation With Board	
member/senior authority	W.	member/senior authority	NT-
management?	NO	management?	No

Run Date: 07/11/2016 Status: CERTIFIED

Real Property Acquisition/Disposal List

29. Address Line1: 63 Flushing Avenue 30. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 12/01/2014 Transaction Date: 01/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Precision Gravel Company Organization: Robin Sacks Decorative Painting, LLC. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016 Status: CERTIFIED

Real Property Acquisition/Disposal List

31. Address Line1: 63 Flushing Avenue 32. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 01/01/2015 Transaction Date: 01/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Sartorous LLC Organization: Boland Studio Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

33. Address Line1: 63 Flushing Avenue 34. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 01/01/2015 Transaction Date: 01/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Ford Smith Organization: Duggal Visual Solutions, Inc. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

35. Address Linel:	63 Flushing Avenue	36.	Address Linel:	63 Flushing Avenue
Address Line2:			Address Line2:	
City:	BROOKLYN		City:	BROOKLYN
State:	NY		State:	NY
Postal Code:	11205		Postal Code:	11205
Plus4:			Plus4:	
Province/Region:			Province/Region:	
Country:	USA		Country:	USA
Property Description:	Commercial Building	Prope	erty Description:	Commercial Building
Estimated Fair Market Value:	\$10	Estimated Fa	air Market Value:	\$10
How was the Fair Market	Other	How was the	Fair Market	Other
Value Determined?:		Va	alue Determined?:	
Transaction Type:	DISPOSITION LEASE	5	Transaction Type:	DISPOSITION LEASE
If Other, Explain:			f Other, Explain:	
Transaction Date:	01/01/2015		Fransaction Date:	01/01/2015
Purchase Sale Price:	,,		chase Sale Price:	
Lease Data (If applicable)		Lease Data	a (If applicable)	
Market Rate(\$/square foot):	10		e(\$/square foot):	10
Lease Rate(\$/square foot):			e(\$/square foot):	
Lease Period (months):			Period (months):	
Seller/Purchaser/Tenant Data:		Seller/Purcha	ser/Tenant Data:	
Organization:	New Lab Beta, LLC		Organization:	Agger Fish Corp.
Last Name:			Last Name:	
First Name:			First Name:	
Address Linel:	63 Flushing Avenue		Address Linel:	63 Flushing Avenue
Address Line2:			Address Line2:	
City:	BROOKLYN		City:	BROOKLYN
State:	NY		State:	NY
Postal Code:	11205		Postal Code:	11205
Plus4:			Plus4:	
Province/Region:			Province/Region:	
Country:	USA		Country:	USA
Relation With Board		Rela	tion With Board	
member/senior authority	NT-	member/s	enior authority	NT-
management?	No		management?	No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

37. Address Linel:	63 Flushing Avenue	38.	Address Linel:	63 Flushing Avenue
Address Line2:			Address Line2:	
City:	BROOKLYN		City:	BROOKLYN
State:	NY		State:	NY
Postal Code:	11205		Postal Code:	11205
Plus4:	Plus4:			
Province/Region:		Province/Region:		
Country:	USA	Country:		USA
Property Description:	Commercial Building		Property Description:	Commercial Building
Estimated Fair Market Value:	\$10	Estima	ted Fair Market Value:	\$10
How was the Fair Market	Other	How wa	s the Fair Market	Other
Value Determined?:			Value Determined?:	
Transaction Type:	DISPOSITION LEASE		Transaction Type:	DISPOSITION LEASE
If Other, Explain:			If Other, Explain:	
Transaction Date: Purchase Sale Price: Lease Data (If applicable)			Transaction Date: Purchase Sale Price: se Data (If applicable)	
Market Rate(\$/square foot):	10	Marke	et Rate(\$/square foot):	10
Lease Rate(\$/square foot):			se Rate(\$/square foot):	
Lease Period (months):	60		Lease Period (months):	60
Seller/Purchaser/Tenant Data:		<u>Seller/</u>	Purchaser/Tenant Data:	
-	Engraved Sign Studio, Inc.		Organization:	Daddy-O Productions, Inc.
Last Name:			Last Name:	
First Name:			First Name:	
Address Linel:	63 Flushing Avenue		Address Linel:	63 Flushing Avenue
Address Line2:			Address Line2:	
City:	BROOKLYN		City:	BROOKLYN
State:	NY		State:	NY
Postal Code:	11205		Postal Code:	11205
Plus4:			Plus4:	
Province/Region:			Province/Region:	
Country:	USA		Country:	USA
Relation With Board			Relation With Board	
member/senior authority		men	mber/senior authority	
management?	No		management?	No

Run Date: 07/11/2016
Status: CERTIFIED

Real Property Acquisition/Disposal List

39. Address Line1: 63 Flushing Avenue 40. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 01/01/2015 Transaction Date: 01/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Capsys Corp. Organization: Kent Steiner, LLC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016 Status: CERTIFIED

Real Property Acquisition/Disposal List

41. Address Line1: 63 Flushing Avenue 42. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 01/01/2015 Transaction Date: 01/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Thyra Heder Organization: Capsys Corp. Last Name: Last Name: First Name: First Name: Address Line1: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

43. Address Line1: 63 Flushing Avenue 44. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 02/01/2015 Transaction Date: 01/15/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: The Living Organization: Israel Cohen & Sons International, Corp. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016 Status: CERTIFIED

Real Property Acquisition/Disposal List

45. Address Line1: 63 Flushing Avenue 46. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 02/01/2015 Transaction Date: 02/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: DCM Fabrication, Inc. Organization: Black Box MFG, LLC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

47. Address Linel:	63 Flushing Avenue	48. Address Li	nel: 63 Flushing Avenue
Address Line2:		Address Li	ne2:
City:	BROOKLYN		ity: BROOKLYN
State:	NY	St	ate: NY
Postal Code:	11205	Postal (!ode: 11205
Plus4:		Pl	.us4:
Province/Region:		Province/Red	gion:
Country:	USA	Cour	itry: USA
Property Description:		Property Descript	ion: Commercial Building
Estimated Fair Market Value:	\$10	Estimated Fair Market Va	llue: \$10
How was the Fair Market	Other	How was the Fair Market	Other
Value Determined?:		Value Determir	ned?:
Transaction Type:	DISPOSITION LEASE	Transaction T	'ype: DISPOSITION LEASE
If Other, Explain:		If Other, Expl	
Transaction Date:	02/01/2015	Transaction I	oate: 03/01/2015
Purchase Sale Price:		Purchase Sale Pr	rice:
Lease Data (If applicable)		Lease Data (If applica	able)
Market Rate(\$/square foot):	-	Market Rate(\$/square fo	
Lease Rate(\$/square foot):		Lease Rate(\$/square fo	oot): 10
Lease Period (months):	60	Lease Period (mont	hs): 60
Seller/Purchaser/Tenant Data:		Seller/Purchaser/Tenant D	ata:
Organization:	Barnett Spice of NY Inc.	Organizat	ion: Tamara Thomsen, Inc.
Last Name:		Last N	Jame:
First Name:		First M	Jame:
Address Linel:	63 Flushing Avenue	Address Li	nel: 63 Flushing Avenue
Address Line2:		Address Li	ne2:
City:	BROOKLYN		lity: BROOKLYN
State:	NY	St	ate: NY
Postal Code:	11205	Postal (dode: 11205
Plus4:		Pl	us4:
Province/Region:		Province/Reg	gion:
Country:	USA	Cour	try: USA
Relation With Board		Relation With Bo	
member/senior authority		member/senior author	ity
management?	No	managem	ent? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

49.	Address Linel:	63 Flushing Avenue	50.	Address Linel:	63 Flushing Avenue
	Address Line2:			Address Line2:	
	City:	BROOKLYN		City:	BROOKLYN
	State:	NY		State:	NY
	Postal Code:	11205		Postal Code:	11205
	Plus4:			Plus4:	
	Province/Region:			Province/Region:	
	Country:	USA		Country:	USA
	Property Description:	Commercial Building		Property Description:	Commercial Building
Estima	ated Fair Market Value:	\$10		Estimated Fair Market Value:	\$10
How wa	as the Fair Market	Other		How was the Fair Market	Other
	Value Determined?:			Value Determined?:	
	Transaction Type:	DISPOSITION LEASE		Transaction Type:	DISPOSITION LEASE
	If Other, Explain:			If Other, Explain:	
	Transaction Date:	03/01/2015		Transaction Date:	03/01/2015
	Purchase Sale Price:			Purchase Sale Price:	
Leas	se Data (If applicable)			Lease Data (If applicable)	
Marke	et Rate(\$/square foot):	10		Market Rate(\$/square foot):	10
Leas	se Rate(\$/square foot):	10		Lease Rate(\$/square foot):	10
	Lease Period (months):	60		Lease Period (months):	60
Seller/	Purchaser/Tenant Data:		<u>S</u>	eller/Purchaser/Tenant Data:	
	Organization:	Todd Bracher Studio,LLC		_	Madison Man Ltd.
	Last Name:			Last Name:	
	First Name:			First Name:	
	Address Linel:	63 Flushing Avenue		Address Linel:	63 Flushing Avenue
	Address Line2:			Address Line2:	
	City:	BROOKLYN		City:	BROOKLYN
	State:	NY		State:	NY
	Postal Code:	11205		Postal Code:	11205
	Plus4:			Plus4:	
	Province/Region:			Province/Region:	
	Country:	USA		Country:	USA
	Relation With Board			Relation With Board	
mer	mber/senior authority			member/senior authority	1-
	management?	No		management?	No

Real Property Acquisition/Disposal List 51. Address Line1: 63 Flushing Avenue 52. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data:

Organization: Sartorous LLC

Last Name: First Name:

Address Linel: 63 Flushing Avenue

Address Line2:

City: BROOKLYN

State: NY

Postal Code: 11205

Plus4:

Province/Region:

Country: USA

Relation With Board

member/senior authority management? No Seller/Purchaser/Tenant Data:

Organization: Matter Practice

Last Name: First Name:

Address Linel: 63 Flushing Avenue

Address Line2:

City: BROOKLYN

State: NY

Postal Code: 11205

Plus4:

Province/Region:

Country: IJSA

Relation With Board member/senior authority

management? No

Run Date: 07/11/2016

Status: CERTIFIED

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

53. Address Line1: 63 Flushing Avenue 54. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Jon Besch Organization: Bailey Humbert Heck Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

55. Address Line1: 63 Flushing Avenue 56. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Underground Signs NYC, LLC Organization: Rose Solomon Co. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Real Property Acquisition/Disposal List

57. Address Line1: 63 Flushing Avenue 58. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Rex Enterprise LLC Organization: R & L Heating & Refrigeration Corp Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

scal Year Ending:06/30/2015 Status: CERTIFIED

Real Property Acquisition/Disposal List

59. Address Line1: 63 Flushing Avenue 60. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Eastern Transport Inc. Organization: Mark Uriu Designs, Inc. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

61. Address Line1: 63 Flushing Avenue 62. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Atlantic Logistics, Inc. Organization: Puerto Rico U.S.A. Imports INC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

63. Address Line1: 63 Flushing Avenue 64. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 03/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Ecologic Solutions, Inc. Organization: Swift Contracting & Maint. Corp. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

5 Status: CERTIFIED

Real Property Acquisition/Disposal List

65. Address Line1: 63 Flushing Avenue 66. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 03/01/2015 Transaction Date: 04/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Monoco Design Organization: Noori Liquidation Center, Inc. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

67. Address Line1: 63 Flushing Avenue 68. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 04/01/2015 Transaction Date: 04/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Del Express, Inc. Organization: Mad Mad Judy Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

69. Address Line1: 63 Flushing Avenue 70. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 04/01/2015 Transaction Date: 04/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Robert Martin Design, Inc. Organization: Elizabeth Kennedy Landscape Architect, PLLC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

scal Year Ending:06/30/2015 Status: CERTIFIED

Real Property Acquisition/Disposal List

71. Address Line1: 63 Flushing Avenue 72. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 04/01/2015 Transaction Date: 04/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Ferra Designs, Inc. Organization: Adele Kaufman Co Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Run Date: 07/11/2016

Real Property Acquisition/Disposal List

73. Address Line1: 63 Flushing Avenue 74. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 05/01/2015 Transaction Date: 05/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Z.A.K. Kitnick, LLC Organization: Ryba General Merchandising, Inc. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Real Property Acquisition/Disposal List

75. Address Line1: 63 Flushing Avenue 76. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 05/01/2015 Transaction Date: 05/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Research Foundation of CUNY on behalf of NY Organization: Modern Plastic Bags Mfg. Corp. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

77. Address Line1: 63 Flushing Avenue 78. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 05/01/2015 Transaction Date: 06/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: DCM Fabrication, Inc. Organization: Richard Manufacturing Co., Inc. Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

iscal Year Ending:06/30/2015 Status: CERTIFIED

Real Property Acquisition/Disposal List

79. Address Line1: 63 Flushing Avenue 80. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 06/01/2015 Transaction Date: 06/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: BNY Campus Associates, LLC Organization: International Union of Operating Engineers Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Run Date: 07/11/2016 Status: CERTIFIED

Real Property Acquisition/Disposal List

81. Address Line1: 63 Flushing Avenue 82. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 06/01/2015 Transaction Date: 06/01/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: TH Partnership Organization: Scott Jordan Furniture Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Real Property Acquisition/Disposal List

83. Address Line1: 63 Flushing Avenue 84. Address Line1: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: USA Property Description: Commercial Building Property Description: Commercial Building Estimated Fair Market Value: \$10 Estimated Fair Market Value: \$10 How was the Fair Market How was the Fair Market Other Other Value Determined?: Value Determined?: Transaction Type: DISPOSITION LEASE Transaction Type: DISPOSITION LEASE If Other, Explain: If Other, Explain: Transaction Date: 06/01/2015 Transaction Date: 06/26/2015 Purchase Sale Price: Purchase Sale Price: Lease Data (If applicable) Lease Data (If applicable) Market Rate(\$/square foot): 10 Market Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Rate(\$/square foot): 10 Lease Period (months): 60 Lease Period (months): 60 Seller/Purchaser/Tenant Data: Seller/Purchaser/Tenant Data: Organization: Art-In Construction Ltd. Organization: BNY Tower Associates, LLC Last Name: Last Name: First Name: First Name: Address Linel: 63 Flushing Avenue Address Linel: 63 Flushing Avenue Address Line2: Address Line2: City: BROOKLYN City: BROOKLYN State: NY State: NY Postal Code: 11205 Postal Code: 11205 Plus4: Plus4: Province/Region: Province/Region: Country: USA Country: IJSA Relation With Board Relation With Board member/senior authority member/senior authority management? No management? No

Run Date: 07/11/2016

Status: CERTIFIED

Personal Property

This Authority has indicated that it had no personal property disposals during the reporting period.

Run Date: 07/11/2016

Status: CERTIFIED

Property Documents

Question	Response	URL (if applicable)
1. In accordance with Section 2896(3) of PAL, the Authority is required to prepare a	No	
report at least annually of all real property of the Authority. Has this report been		
prepared?		
2. Has the Authority prepared policies, procedures, or guidelines regarding the use,	No	
awarding, monitoring, and reporting of contracts for the acquisition and disposal of		
property?		
3. In accordance with Section 2896(1) of PAL, has the Authority named a contracting	No	
officer who shall be responsible for the Authority's compliance with and enforcement		
of such guidelines?		

Run Date: 07/11/2016

Status: CERTIFIED

Grant Information

This Authority has indicated that it did not award any grants during the reporting period.

Have the terms of the loan been

completed? No

Annual Report for Brooklyn Navy Yard Development Corporation Fiscal Year Ending:06/30/2015

Run Date: 07/11/2016

Status: CERTIFIED

Loan Information

1. Source of Loan Funds: Private Source of Loan Funds: Private Name of Loan Recipient: BNY Building 77 NMTC Investment Fund, LLC Name of Loan Recipient: NMTC Investment Fund, LLC Address Linel: c/o Goldman Sachs Bank USA Address Line1: c/o Goldman Sachs Bank USA Address Line2: 200 Wet Street Address Line2: 200 Wet Street City: NEW YORK City: NEW YORK State: NY State: NY Zip - Plus4: 10282 Zip - Plus4: 10282 Province/Region: Province/Region: Country: USA Country: USA Original Amount of Loan: \$10,337,861 Original Amount of Loan: \$17,687,500 Date Loan Awarded: 12/22/2014 Date Loan Awarded: 09/06/2012 Interest Rate(%): 1.23 Interest Rate(%): 1.26 Length of Loan(# of years Length of Loan(# of years to repay): 27 to repay): 30 Amount of Loan Prinicipal Repaid Amount of Loan Prinicipal Repaid to Date: \$0.00 to Date: \$0.00 Purpose of Loan: Commercial Property Purpose of Loan: Commercial Property Construction/Acquisition/Revitalization/I Construction/Acquisition/Revitalization/I mprovement mprovement Was the Loan expected to result Was the Loan expected to result in new jobs being created? No in new jobs being created? No If yes, how many jobs were planned If yes, how many jobs were planned to be created? 3000 to be created? If yes, how many jobs have been If yes, how many jobs have been created to date? 0 created to date? Have the terms of the loan been

completed? No

Run Date: 07/11/2016
Status: CERTIFIED

Bond Information

This Authority has indicated that it did not have any outstanding bonds during the reporting period.

Run Date: 07/11/2016
Status: CERTIFIED

Additional Comments: