Fiscal Year Ending: 12/31/2018

Run Date: 04/15/2019 Status: CERTIFIED Certified Date: 03/29/2019

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?	Yes	http://www.cmvh.org/documents/1975.pdf
2.	As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	http://www.cmvh.org/documents/2062.pdf
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?	Yes	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://www.cmvh.org/documents/176.pdf
6.	Are any Authority staff also employed by another government agency?	No	
7.	Has the Authority posted their mission statement to their website?	Yes	http://www.cmvh.org/documents/2022.pdf
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://www.cmvh.org/documents/2022.pdf

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#### **Governance Information (Board-Related)**

Question		Response	URL (If Applicable)
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 a 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://www.griffissldc.org/index.asp?type=MATERIALS,_POLICIES ,_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://www.griffissldc.org/index.asp?type=MEETING_MINUTES
7.	Has the Board adopted bylaws and made them available to Board members and staff?	Yes	http://www.cmvh.org/documents/160.pdf
8.	Has the Board adopted a code of ethics for Board members and staff?	Yes	http://www.cmvh.org/documents/136.pdf
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	Yes	N/A
	Time and Attendance	Yes	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?	Yes	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?	Yes	N/A
15.	Was compensation paid by the Authority made in accordance with employee or union contracts?	No	N/A
16.	Has the board adopted a conditional/additional compensation policy governing all employees?	Yes	http://www.cmvh.org/documents/179.pdf

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# **Board of Directors Listing**

Name	Armstrong, Franca	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/21/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2019	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	No

Name	Cusack, James	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	12/20/2012	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2019	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	No

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Name	DeLia, Elis	Nominated By	Other
Chair of the Board	Yes	Appointed By	Other
If yes, Chair Designated by	Elected by Board	Confirmed by Senate?	N/A
Term Start Date	11/1/2002	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	12/31/2021	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	No
a Designee?		also Hold an Elected or Appointed	
		Municipal Government Position?	
Designee Name		Ex-Officio	

Name	Grogan, Deborah	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/24/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2019	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Lawrence, Chad	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	2/15/2018	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2020	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Manuele, Michael	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/18/2018	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2021	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Martin, Kevin	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/1/2010	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2020	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Mazzaferro, John J	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	10/1/2005	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2019	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	Yes
Designee Name		Ex-Officio	

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Name	Pietrowski, Eric	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	2/15/2018	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2021	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Russell, David	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/27/2014	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2020	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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Name	Vetrone, Frank	Nominated By	Other
Chair of the Board	No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/1/2000	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	12/31/2021	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Weiman, Erin	Nominated By	Other
Chair of the Board	No No	Appointed By	Other
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	12/1/2010	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	03/31/2020	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

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#### Staff Listing

Name	Title	Group	Department/ Subsidiary	Union Name	Bargaining Unit	Full Time/ Part Time	Exempt	Annualized	salary paid		Performance Bonus	Extra Pay	Other Compensati on/Allowanc es/Adjustme nts	ion paid by	also paid by another entity to perform the work of the	payment made by a
Brodfuehrer, Paul	Facilities Maintenance	Operational				FT	No	\$57,131.53	\$57,131.53	\$2,865.81	\$750.00	\$0.00	\$999.96	\$61,747.30	) No	
Brood, Lewis	Grounds	Operational				FT	No	\$39,656.02	\$39,656.02	\$5,866.56	\$750.00	\$0.00	\$0.00	\$46,272.58	No.	D
Easton, Dalton	Temp Help	Operational				PT	No	\$1,104.00	\$1,104.00	\$0.00	\$0.00			\$1,104.00		
Ellis, Walter B	Temp Help	Operational				PT	No	\$1,600.00	\$1,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,600.00		
Endres, Michael	Grounds	Operational				FT	No	\$25,014.00	\$25,014.00	\$742.51	\$750.00	\$0.00	\$0.00	\$26,506.51	No	
Hetherington, Owen C	Temp Help	Operational				PT	No	\$7,454.50	\$7,454.50	\$0.00	\$0.00	\$0.00	\$0.00	\$7,454.50	) No	D
Hnelosub, Jr, Peter G	Grounds	Operational				FT	No	\$35,671.50	\$35,671.50	\$2,001.75	\$750.00	\$0.00	\$0.00	\$38,423.25	S No	D
Hynes, Zachary D	Temp Help	Operational				PT	No	\$4,000.00	\$4,000.00	\$262.50	\$0.00	\$0.00	\$0.00	\$4,262.50	) No	D
Johnson, Terri L	Temp Help	Operational				PT	No	\$1,600.00	\$1,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,600.00	) No	)
Lojba, Theodore J	Facilities Maintenance	Operational				FT	No	\$56,004.70	\$56,004.70	\$523.24	\$750.00	\$0.00	\$0.00	\$57,277.94	No	)
Runion Jr., Dean	Grounds	Operational				FT	No	\$36,572.44	\$36,572.44	\$1,573.61	\$750.00	\$0.00	\$0.00	\$38,896.05	No.	)
Sanzone, Frank	Facilities Maintenance	Managerial				FT	Yes	\$81,427.99	\$81,427.99	\$0.00	\$2,500.00	\$0.00	\$0.00	\$83,927.99	) No	)
Sanzone, Zakary A	Temp Help	Operational				PT	No	\$4,320.00	\$4,320.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,320.00	) No	)
Starczewski, Aaron J	Temp Help	Operational				PT	No	\$1,600.00	\$1,600.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,600.00	) No	D
Swalgin, Jordan M	Grounds	Operational				FT	No	\$34,275.80	\$34,275.80	\$635.70	\$750.00	\$0.00	\$0.00	\$35,661.50	) No	D
Tallarino, III, Francisco D	Temp Help	Operational				PT	No	\$4,224.00	\$4,224.00	\$0.00	\$0.00	\$0.00	\$0.00	\$4,224.00	) No	D
Washburn,	Facilities Maintenance	Operational				FT	No	\$55,762.97	\$55,762.97	\$1,102.62	\$750.00	\$0.00	\$0.00	\$57,615.59	) No	)

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# Staff Listing

Name	Title	Group	Department/		Bargaining				Actual		Performance	,				If yes, Is
			Subsidiary	Name	Unit	Part Time		Annualized	salary paid	paid by	Bonus		Compensati	Compensat	also paid by	the
								Salary	to the	Authority			on/Allowanc	ion paid	another	payment
									Individual				es/Adjustme	by	entity to	made by a
													nts	Authority	perform the	State or
														_	work of the	local
															Authority	governme
															_	nt
Wuthrich,	Grounds	Operational				PT	No	\$9,622.00	\$9,622.00	\$1,160.25	\$0.00	\$0.00	\$0.00	\$10,782.25	No	
Yonko																'

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#### **Benefit Information**

During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for former staff or individuals affiliated	l No
During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for former staff or individuals affiliated	INO
With the Authority after those individuals left the Authority?	
with the Authority after those individuals left the Authority?	

#### **Board Members**

Name	Title	Severance Package	Payment for Unused Leave	Club Member- ships	Use of Corporate Credit Cards	Personal Loans	Auto	Transportation	Housing Allowance	Spousal / Dependent Life Insurance	Tuition Assistance	Multi-Year Employment	None of these Benefits	Other
Armstrong,	Board of												Х	
Franca	Directors													
Cusack,	Board of												X	
James	Directors													
DeLia, Elis	Board of Directors												X	
Grogan,	Board of												X	
Deborah	Directors													
Lawrence,	Board of												X	
Chad	Directors													
Manuele,	Board of												X	
Michael	Directors													
Martin,	Board of												X	
Kevin	Directors													
Mazzaferro,	Board of												X	
John J	Directors													
Pietrowski,	Board of												X	
Eric	Directors													
Russell,	Board of												X	
David	Directors													
Vetrone,	Board of												X	
Frank	Directors													
Weiman,	Board of												X	
Erin	Directors													

<u>Staff</u>

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Name	Title	Severance Package	Payment	Club Member-	Use of Corporate	Personal	Auto	Transportation	Housing Allowance	Spousal /	Tuition	Multi-Year	None of	Other
		rackage	for Unused	ships	Credit	Loans			Allowalice	Dependent Life	Assistance	Employment	these Benefits	
			Leave	-	Cards					Insurance				

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# **Subsidiary/Component Unit Verification**

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct	Yes					
Are there other subsidiaries or component units of the Authority that are active, not in Authority and not independently filing reports in PARIS?	mitted by this	No				
Name of Subsidiary/Component Unit	Sta	tus				
Request Subsidiary/Component Unit Change						
Name of Subsidiary/Component Unit	Sta	tus	Requested	Changes		
Request Add Subsidiaries/Component Units						
Name of Subsidiary/Component Unit		Establishment Dat	е		Purpose of Sub	sidiary/Component Unit
Request Delete Subsidiaries/Component Units						
Name of Subsidiary/Component Unit	Termination	Date	Reason for Terr	mination		Proof of Termination Document Name

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# Summary Financial Information SUMMARY STATEMENT OF NET ASSETS

			Amount
Assets			
Current Assets			
	Cash and cash equivalents		\$2,767,403.00
	Investments		\$227,303.00
	Receivables, net		\$656,150.00
	Other assets		\$224,212.00
	Total Current Assets		\$3,875,068.00
Noncurrent Assets			
	Restricted cash and investments		\$0.00
	Long-term receivables, net		\$0.00
	Other assets		\$2,641,962.00
	Capital Assets		
		Land and other nondepreciable property	\$4,866,264.00
		Buildings and equipment	\$35,857,307.00
		Infrastructure	\$7,473,038.00
		Accumulated depreciation	\$25,119,576.00
		Net Capital Assets	\$23,077,033.00
	Total Noncurrent Assets		\$25,718,995.00
Total Assets			\$29,594,063.00
Liabilities			
Current Liabilities			
	Accounts payable		\$708,188.00
	Pension contribution payable		\$0.00
	Other post-employment benefits		\$0.00
	Accrued liabilities		\$276,961.00
	Deferred revenues		\$122,134.00
	Bonds and notes payable		\$555,996.00
	Other long-term obligations due within one year		\$840,000.00
	Total Current Liabilities		\$2,503,279.00
Noncurrent Liabilities			

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	Pension contribution payable	\$0.00
	Other post-employment benefits	\$0.00
	Bonds and notes payable	\$7,012,071.00
	Long Term Leases	\$0.00
	Other long-term obligations	\$346,970.00
	Total Noncurrent Liabilities	\$7,359,041.00
Total Liabilities		\$9,862,320.00
Net Asset (Deficit)		
Net Assets		
	Invested in capital assets, net of related debt	\$0.00
	Restricted	\$0.00
	Unrestricted	\$19,731,743.00
	Total Net Assets	\$19,731,743.00

#### SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETS

	OL, LATENOLO AND GHANGES IN NET AGGETO	Amount
Operating Revenues		
	Charges for services	\$400,778.00
	Rental & financing income	\$3,203,953.0
	Other operating revenues	\$52,523.00
	Total Operating Revenue	\$3,657,254.0
Operating Expenses		
	Salaries and wages	\$483,153.00
	Other employee benefits	\$198,667.0
	Professional services contracts	\$1,398,574.0
	Supplies and materials	\$84,300.00
	Depreciation & amortization	\$1,289,104.00
	Other operating expenses	\$1,345,338.00
	Total Operating Expenses	\$4,799,136.00
Operating Income (Loss)		(\$1,141,882.00
Nonoperating Revenues		
	Investment earnings	\$3,849.00
	State subsidies/grants	\$257,602.00
	Federal subsidies/grants	\$0.00
	Municipal subsidies/grants	\$0.00
	Public authority subsidies	\$0.00

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	Other nonoperating revenues	\$451,205.00
	Total Nonoperating Revenue	\$712,656.00
Nonoperating Expenses		
	Interest and other financing charges	\$290,233.00
	Subsidies to other public authorities	\$0.00
	Grants and donations	\$0.00
	Other nonoperating expenses	\$1,166,764.00
	Total Nonoperating Expenses	\$1,456,997.00
	Income (Loss) Before Contributions	(\$1,886,223.00)
Capital Contributions		\$1,210,000.00
Change in net assets		(\$676,223.00)
Net assets (deficit) beginning of		\$20,407,966.00
year		
Other net assets changes		\$0.00
Net assets (deficit) at end of year		\$19,731,743.00

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#### **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

Type of Debt: Authority Debt - Other

#### Program:

Project	Amounts	Bond Closing Date	Issue Process	True Interest Cost	Interest type	Term (Yrs)	Cost Of Issuance
Construction Loan 1	Refunding \$0.00	11/20/2018	Negotiated	0%	Fixed	16	\$0.00
	New \$512,379.00						
	Total \$512,379.00						
Construction Loan 2	Refunding \$0.00	11/20/2018	Negotiated	0%	Fixed	16	\$0.00
	New \$367,170.00						
	Total \$367,170.00						

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#### **Schedule of Authority Debt**

Type of Debt			Statutory Authorization(\$)	Outstanding Start of Fiscal Year(\$)	New Debt Issuances(\$)	Debt Retired (\$)	Outstanding End of Fiscal Year(\$)
State Obligation	State Guaranteed						
State Obligation	State Supported						
State Obligation	State Contingent Obligation						
State Obligation	State Moral Obligation						
Other State-Funded	Other State-Funded						
Authority Debt - General Obligation	Authority Debt - General Obligation		0.0	0 1,267,127.20	0.00	183,246.35	1,083,880.85
Authority Debt - Revenue	Authority Debt - Revenue						
Authority Debt - Other	Authority Debt - Other		0.0	0 4,166,775.20	879,549.00	400,696.95	4,645,627.25
Conduit		Conduit Debt					
Conduit		Conduit Debt - Pilot Increment Financing	0.0	0 990,381.03	0.00	65,227.11	925,153.92
TOTALS			0.0	0 6,424,283.43	879,549.00	649,170.41	6,654,662.02

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Address Lines	474 Dhaaniy Drive
Address Line1	474 Phoenix Drive
Address Line2	DOME
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/18/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	13.16
Lease Period (months)	60
Organization	Peraton, Inc.
Last Name	
First Name	
Address Line1	12975 Worldgate Drive
Address Line2	•
City	HERNDON
State	VA
Postal Code	20170
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
, , , , , , , , , , , , , , , , , , , ,	

Fiscal Year Ending: 12/31/2018

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Address Line1	775 Daedalian Drive
Address Line2	Building 778
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$18.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	5/23/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18
Lease Rate(\$/square foot)	18
Lease Period (months)	60
Organization	Alion Science and Technology Corporation
Last Name	
First Name	
Address Line1	1750 Tysons Boulevard
Address Line2	Suite 1300
City	MCLEAN
State	VA
Postal Code	22102
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Address Hone	FOA Disease District
Address Line1	584 Phoenix Drive
Address Line2	DOME
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	5/24/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	18
Lease Period (months)	12
Organization	KB Engineering P.C.
Last Name	
First Name	
Address Line1	7 S. Church St.
Address Line2	Suite 103
City	SCHENECTADY
State	NY
Postal Code	12305
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

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Address Line2   Suite 102   City   ROME   State   NY   Postal Code   Plus4   Province/Region   Country   How was the Fair Market Value   Determined?   Transaction Type   If Other, Explain   Transaction Date   Purchase Sale Price   Lease Data (If Applicable)   Market Rate(\$/square foot)   Lease Rate(\$/square foot)   Lease Period (months)   Last Name   First Name   Address Line2   Address Line2   City   Country   Relation With Board member/senior authority management?   Relation With Board member/senior authority management?		
City   ROME   NY   NY   NY   NY   NY   NY   NY   N	Address Line1	584 Phoenix Drive
State   NY   13441   13441   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444   1444	Address Line2	
Postal Code	City	
Plus4 Province/Region Country Office Building Estimated Fair Market Value Determined? Transaction Type If Other, Explain Transaction Date Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) Lease Period (months) Corganization Last Name First Name Address Line1 Address Line2 City Postal Code Plus4 Province/Region Country Relation With Board member/senior  Country Coffice Building USA Office Building USA USA USA  State Property Description Office Building USA Office Building USA Office Building State Postal Appraisal  OISA OISA OISA OISA OISA OISA OISA OIS	State	NY
Province/Region Country USA Property Description Office Building Estimated Fair Market Value \$20.00 How was the Fair Market Value Determined? Transaction Type DISPOSITION LEASE If Other, Explain Transaction Date 6/1/2018 Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) 18 Lease Period (months) 12 Organization Technergetics Last Name First Name First Name Address Line1 114 Genesee Street Address Line2 City UTICA State NY Postal Code 13502 Plus4 Province/Region Country United States Relation With Board member/senior Vapraisal Office Building Appraisal Appra	Postal Code	13441
Country   USA	1 1 3 1 2	
Property Description Estimated Fair Market Value How was the Fair Market Value Determined?  Transaction Type If Other, Explain Transaction Date Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) Lease Rate(\$/square foot) Lease Period (months) Cognalization Last Name First Name Address Line1 Address Line2 City State Postal Code Plus4 Province/Region Country Relation With Board member/senior  Itansaction Defe S20.00 Appraisal Appra	Province/Region	
Estimated Fair Market Value How was the Fair Market Value Determined?  Transaction Type If Other, Explain Transaction Date Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) Lease Rate(\$/square foot) Lease Period (months)  Corganization Last Name First Name Address Line2 City UTICA State Province/Region Country Relation With Board member/senior  Appraisal Appra		USA
How was the Fair Market Value Determined?  Transaction Type If Other, Explain Transaction Date O/1/2018  Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) Lease Rate(\$/square foot) Lease Period (months) Organization Last Name First Name Address Line1 Address Line2 City UTICA State NY Postal Code Plus4 Province/Region Country United States  No	Property Description	Office Building
Determined? Transaction Type DISPOSITION LEASE  If Other, Explain Transaction Date 6/1/2018  Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) 20 Lease Rate(\$/square foot) 18 Lease Period (months) 12 Organization Technergetics Last Name First Name Address Line1 114 Genesee Street Address Line2 City UTICA State NY Postal Code 13502 Plus4 Province/Region Country Relation With Board member/senior No	Estimated Fair Market Value	\$20.00
Transaction Type If Other, Explain Transaction Date Of/1/2018  Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) Lease Rate(\$/square foot) Is Lease Period (months) Corganization Last Name First Name Address Line1 Address Line1 Address Line2 City UTICA State NY Postal Code Plus4 Province/Region Country Relation With Board member/senior No Of/1/2018 Of	How was the Fair Market Value	Appraisal
If Other, Explain Transaction Date 6/1/2018  Purchase Sale Price Lease Data (If Applicable) Market Rate(\$/square foot) 20 Lease Rate(\$/square foot) 18 Lease Period (months) 12 Organization Technergetics Last Name First Name Address Line1 114 Genesee Street Address Line2 City UTICA State NY Postal Code 13502 Plus4 Province/Region Country United States Relation With Board member/senior No	Determined?	
Transaction Date 6/1/2018  Purchase Sale Price Lease Data (If Applicable)  Market Rate(\$/square foot) 20  Lease Rate(\$/square foot) 18  Lease Period (months) 12  Organization Technergetics  Last Name First Name  Address Line1 114 Genesee Street  Address Line2 City UTICA  State NY  Postal Code 13502  Plus4  Province/Region Country United States  Relation With Board member/senior	Transaction Type	DISPOSITION LEASE
Purchase Sale Price Lease Data (If Applicable)  Market Rate(\$/square foot) 20  Lease Rate(\$/square foot) 18  Lease Period (months) 12  Organization Technergetics  Last Name First Name Address Line1 114 Genesee Street  Address Line2  City UTICA State NY  Postal Code 13502  Plus4  Province/Region Country United States  Relation With Board member/senior No	If Other, Explain	
Lease Data (If Applicable)  Market Rate(\$/square foot) 20  Lease Rate(\$/square foot) 18  Lease Period (months) 12  Organization Technergetics  Last Name First Name Address Line1 114 Genesee Street  Address Line2  City UTICA  State NY  Postal Code 13502  Plus4  Province/Region  Country United States  Relation With Board member/senior	Transaction Date	6/1/2018
Market Rate(\$/square foot) 20 Lease Rate(\$/square foot) 18 Lease Period (months) 12 Organization Technergetics  Last Name First Name Address Line1 114 Genesee Street Address Line2 City UTICA State NY Postal Code 13502 Plus4 Province/Region Country United States Relation With Board member/senior No	Purchase Sale Price	
Lease Rate(\$/square foot) 18  Lease Period (months) 12  Organization Technergetics  Last Name  First Name  Address Line1 114 Genesee Street  Address Line2  City UTICA  State NY  Postal Code 13502  Plus4  Province/Region  Country United States  Relation With Board member/senior No	Lease Data (If Applicable)	
Lease Period (months) 12  Organization Technergetics  Last Name  First Name  Address Line1 114 Genesee Street  Address Line2  City UTICA  State NY  Postal Code 13502  Plus4  Province/Region  Country United States  Relation With Board member/senior No	Market Rate(\$/square foot)	20
Organization Technergetics  Last Name  First Name  Address Line1 114 Genesee Street  Address Line2  City UTICA  State NY  Postal Code 13502  Plus4  Province/Region  Country United States  Relation With Board member/senior	Lease Rate(\$/square foot)	
Last Name           First Name           Address Line1         114 Genesee Street           Address Line2         UTICA           State         NY           Postal Code         13502           Plus4         Province/Region           Country         United States           Relation With Board member/senior         No	Lease Period (months)	12
First Name         Address Line1         114 Genesee Street           Address Line2         UTICA           State         NY           Postal Code         13502           Plus4         Province/Region           Country         United States           Relation With Board member/senior         No	Organization	Technergetics
Address Line1         114 Genesee Street           Address Line2         UTICA           City         UTICA           State         NY           Postal Code         13502           Plus4         Province/Region           Country         United States           Relation With Board member/senior         No	Last Name	
Address Line 2   City   UTICA	First Name	
City         UTICA           State         NY           Postal Code         13502           Plus4         Province/Region           Country         United States           Relation With Board member/senior         No	Address Line1	114 Genesee Street
State   NY	Address Line2	
Postal Code 13502 Plus4 Province/Region Country United States Relation With Board member/senior No	City	UTICA
Plus4 Province/Region Country United States Relation With Board member/senior No	State	NY
Province/Region Country United States Relation With Board member/senior No	Postal Code	13502
Country United States Relation With Board member/senior No	Plus4	
Relation With Board member/senior No	Province/Region	
	Country	United States
authority management?	Relation With Board member/senior	
	authority management?	

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<b>_</b>	
Address Line1	454 Phoenix Drive
Address Line2	Building 774
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$18.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	6/20/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18
Lease Rate(\$/square foot)	16.45
Lease Period (months)	36
Organization	BAE Systems Information Solutons, Inc. and BAE Systems National Security Solutons,
_	Inc.
Last Name	
First Name	
Address Line1	130 Daniel Webster Highway
Address Line2	
City	MERRIMACK
State	NH
Postal Code	03054
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Address Line1	581 Phoenix Drive
Address Line2	Floor 2
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	6/20/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20.4
Lease Period (months)	36
Organization	BAE Systems Information Solutons, Inc. and BAE Systems National Security Solutons,
	Inc.
Last Name	
First Name	
Address Line1	130 Daniel Webster Highway
Address Line2	
City	MERRIMACK
State	NH
Postal Code	03054
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Address Line1	584 Phoenix Drive
Address Line2	Suite 103
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/17/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	18.9
Lease Period (months)	12
Organization	CACI International, Inc.
Last Name	
First Name	
Address Line1	100 Glebe Road
Address Line2	
City	ARLINGTON
State	VA
Postal Code	22201
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Address Line1	581 Phoenix Drive
	Floor 1
Address Line2	
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/23/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20.4
Lease Period (months)	36
Organization	BAE Systems Information Solutons, Inc. and BAE Systems National Security Solutons,
_	Inc.
Last Name	
First Name	
Address Line1	130 Daniel Webster Highway
Address Line2	
City	MERRIMACK
State	NH
Postal Code	03054
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
,	

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Address Line1	584 Phoenix Drive
Address Line2	Suite 103
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Office Building
Estimated Fair Market Value	\$18.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	9/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18
Lease Rate(\$/square foot)	18
Lease Period (months)	12
Organization	Adirondack Analytics
Last Name	
First Name	
Address Line1	7010 Stokes-Westernville Road
Address Line2	
City	AVA
State	NY
Postal Code	13303
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Adding Live - 4	404 MaDilla Dand
Address Line1	164 McPike Road
Address Line2	DOME
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Industrial Facility/Plant
Estimated Fair Market Value	\$169,000.00
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION SALE
If Other, Explain	
Transaction Date	11/7/2018
Purchase Sale Price	\$217,480.00
Lease Data (If Applicable)	
Market Rate(\$/square foot)	
Lease Rate(\$/square foot)	
Lease Period (months)	
Organization	Deployed Resources, LLC
Last Name	
First Name	
Address Line1	164 McPike Road
Address Line2	
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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Address Line1	99 Otis Street
Address Line2	
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	USA
Property Description	Vacant Lot/Undeveloped Land
Estimated Fair Market Value	\$1,221,861.98
How was the Fair Market Value	Appraisal
Determined?	
Transaction Type	DISPOSITION SALE
If Other, Explain	
Transaction Date	11/20/2018
Purchase Sale Price	\$125,000.00
Lease Data (If Applicable)	
Market Rate(\$/square foot)	
Lease Rate(\$/square foot)	
Lease Period (months)	
Organization	99 Otis Street LLC
Last Name	
First Name	
Address Line1	584 Phoenix Drive
Address Line2	
City	ROME
State	NY
Postal Code	13441
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

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#### Personal Property

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

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#### **Property Documents**

Question		Response	URL (If Applicable)
1.	In accordance with Section 2896(3) of PAL, the Authority is required to prepare a report at least annually	Yes	http://www.cmvh.org/documents/2018.pdf
	of all real property of the Authority. Has this report been prepared?		
2.	Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring,	Yes	http://www.cmvh.org/documents/134.pdf
	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 officer who shall be	Yes	N/A
	responsible for the Authority's compliance with and enforcement of such guidelines?		

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#### **Grant Information**

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

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#### **Loan Information**

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

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#### **Bond Information**

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

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**Additional Comments**