

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.niagarafallsusa.org/NFCDevCorp.cfm |
| 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? | Yes | N/A |
| 5. Does the Authority have an organization chart? | No | |
| 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.niagarafallsusa.org/NFCDevCorp.cfm |
| 8. Has the Authority's mission statement been revised and adopted during the reporting period? | Yes | N/A |
| 9. Attach the Authority's measurement report, as required by section 2824-a of PAL and provide the URL. | | http://www.niagarafallsusa.org/NFCDevCorp.cfm |

Governance Information (Board-Related)

| Question | Response | URL |
|---|----------|---|
| 1. Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL? | No | N/A |
| 2. Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL? | No | N/A |
| 3. Has the Board established Finance Committee in accordance with Section 2824(8) of PAL? | No | 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): | | No such committees have been formed at this time. |
| 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.niagarafallsusa.org/NFCDevCorp.cfm |
| 7. Has the Board adopted bylaws and made them available to Board members and staff? | Yes | http://www.egovlink.com/public_documents300/niagarafalls/published_documents/PDFs/NFC_Bylaws.pdf |
| 8. Has the Board adopted a code of ethics for Board members and staff? | Yes | http://www.egovlink.com/public_documents300/niagarafalls/published_documents/PDFs/NFC_Code_of_Ethics |
| 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? | 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? | No | 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? | No | |
| | | |

Board of Directors Listing

| | | | |
|---|-----------------------|---|-----------------------|
| Name | Roma, Frank | Name | Whittaker, Lee |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 03/02/2011 | Term Start Date | 03/02/2011 |
| 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? | No | Confirmed by Senate? | No |
| 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 |

Board of Directors Listing

| | | | |
|---|-----------------------|---|----------------------|
| Name | Henwood, Jacqueline | Name | Touma, Andrew |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 03/02/2011 | Term Start Date | 01/01/2014 |
| Term Expiration Date | Pleasure of Authority | Term Expiration Date | Ex-Officio |
| Title | | Title | City Council Memeber |
| Has the Board member appointed a designee? | | Has the Board member appointed a designee? | No |
| Designee Name | | Designee Name | |
| Ex-officio | No | Ex-officio | Yes |
| Nominated By | Local | Nominated By | Ex-Officio |
| Appointed By | Local | Appointed By | Ex-Officio |
| Confirmed by Senate? | No | Confirmed by Senate? | No |
| 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? | Yes |

Board of Directors Listing

| | | | |
|---|---------------------|---|---------------------|
| Name | Robins, Christopher | Name | Choolokian, Glenn |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 05/28/2013 | Term Start Date | 01/01/2012 |
| Term Expiration Date | Ex-Officio | Term Expiration Date | Ex-Officio |
| Title | NFURA Director | Title | City Council member |
| Has the Board member appointed a designee? | No | Has the Board member appointed a designee? | No |
| Designee Name | | Designee Name | |
| Ex-officio | Yes | Ex-officio | Yes |
| Nominated By | Ex-Officio | Nominated By | Ex-Officio |
| Appointed By | Ex-Officio | Appointed By | Ex-Officio |
| Confirmed by Senate? | | Confirmed by Senate? | |
| Has the Board member/designee signed the acknowledgement of fiduciary duty? | Yes | 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? | Yes |

Board of Directors Listing

| | | | |
|---|------------------|---|------------------|
| Name | O'Connor, Doreen | Name | Dyster, Paul |
| Chair of Board | No | Chair of Board | Yes |
| If yes, Chair designated By. | | If yes, Chair designated By. | Elected by Board |
| Term Start Date | 03/01/1996 | Term Start Date | 01/01/2008 |
| Term Expiration Date | Ex-Officio | Term Expiration Date | Ex-Officio |
| Title | Director | Title | Mayor |
| Has the Board member appointed a designee? | No | Has the Board member appointed a designee? | No |
| Designee Name | | Designee Name | |
| Ex-officio | Yes | Ex-officio | Yes |
| Nominated By | Ex-Officio | Nominated By | Ex-Officio |
| Appointed By | Ex-Officio | Appointed By | Ex-Officio |
| Confirmed by Senate? | No | 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? | Yes |

Board of Directors Listing

| | | | |
|---|-----------------------|---|-----------------|
| Name | Anderson, Jr., Robert | Name | Hooper, Michael |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 01/01/2004 | Term Start Date | 03/01/2005 |
| Term Expiration Date | Ex-Officio | Term Expiration Date | Ex-Officio |
| Title | City Council Member | Title | Director |
| Has the Board member appointed a designee? | No | Has the Board member appointed a designee? | No |
| Designee Name | | Designee Name | |
| Ex-officio | Yes | Ex-officio | Yes |
| Nominated By | Ex-Officio | Nominated By | Ex-Officio |
| Appointed By | Ex-Officio | Appointed By | Ex-Officio |
| Confirmed by Senate? | | Confirmed by Senate? | No |
| 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? | Yes | Does the Board member/designee also hold an elected or appointed municipal government position? | No |

Board of Directors Listing

| | | | |
|---|---------------------|---|-----------------------|
| Name | Walker, Charles | Name | Smith , Jacob |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 01/01/1999 | Term Start Date | 03/02/2011 |
| Term Expiration Date | Ex-Officio | Term Expiration Date | Pleasure of Authority |
| Title | City Council Member | Title | |
| Has the Board member appointed a designee? | No | Has the Board member appointed a designee? | |
| Designee Name | | Designee Name | |
| Ex-officio | Yes | Ex-officio | No |
| Nominated By | Ex-Officio | Nominated By | Local |
| Appointed By | Ex-Officio | Appointed By | Local |
| Confirmed by Senate? | No | Confirmed by Senate? | No |
| 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? | Yes | Does the Board member/designee also hold an elected or appointed municipal government position? | No |

Board of Directors Listing

| | | | |
|---|-----------------------|---|-----------------------|
| Name | Parise, Paul | Name | Muto , Lucy |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 03/02/2011 | Term Start Date | 03/02/2011 |
| 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? | No | Confirmed by Senate? | No |
| 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 |

Board of Directors Listing

| | | | |
|---|-----------------------|---|-------------------|
| Name | Sawicki, Anne | Name | Paterson, Jeffrey |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 03/02/2011 | Term Start Date | 06/01/2002 |
| Term Expiration Date | Pleasure of Authority | Term Expiration Date | 05/01/2013 |
| 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 | Ex-Officio |
| Appointed By | Local | Appointed By | Ex-Officio |
| Confirmed by Senate? | No | Confirmed by Senate? | No |
| 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 |

Board of Directors Listing

| | | | |
|---|------------------|---|----------------------|
| Name | Markarian, Janet | Name | Grandinetti, Kristen |
| Chair of Board | No | Chair of Board | No |
| If yes, Chair designated By. | | If yes, Chair designated By. | |
| Term Start Date | 09/01/2002 | Term Start Date | 01/01/2010 |
| Term Expiration Date | Ex-Officio | Term Expiration Date | Ex-Officio |
| Title | Director | Title | City Council Member |
| Has the Board member appointed a designee? | No | Has the Board member appointed a designee? | No |
| Designee Name | | Designee Name | |
| Ex-officio | Yes | Ex-officio | Yes |
| Nominated By | Ex-Officio | Nominated By | Ex-Officio |
| Appointed By | Ex-Officio | Appointed By | Ex-Officio |
| Confirmed by Senate? | No | Confirmed by Senate? | No |
| 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? | Yes |

Board of Directors Listing

| | |
|---|-----------------------|
| Name | Johnson, Jamie |
| Chair of Board | No |
| If yes, Chair designated By. | |
| Term Start Date | 03/02/2011 |
| Term Expiration Date | Pleasure of Authority |
| Title | |
| Has the Board member appointed a designee? | |
| Designee Name | |
| Ex-officio | No |
| Nominated By | Local |
| Appointed By | Local |
| Confirmed by Senate? | No |
| Has the Board member/designee signed the acknowledgement of fiduciary duty? | 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 municipal government position? | No |

Staff Listing

| Name | Title | Group | Department / Subsidiary | Union Name | Bargaining Unit | Full Time/ Part Time | Exempt | Base Annualized Salary | Actual salary paid to the Individual | Over time paid by Authority | Performance Bonus | Extra Pay | Other Compensation/Allowances/Adjustments | Total Compensation | 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 |
|-----------------|----------------------------|-----------------------------|-------------------------|------------|-----------------|----------------------|--------|------------------------|--------------------------------------|-----------------------------|-------------------|-----------|---|--------------------|---|--|
| Bimont, Gail | Secretary | Administrative and Clerical | | | | PT | Yes | 2,000.00 | 0 | 0 | 0 | 0 | 0 | 0 | No | |
| Brown, Maria | Comptroller | Professional | | | | PT | Yes | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | Yes | Yes |
| Collura, Joe | Economic Development Staff | Operational | | | | PT | Yes | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | Yes | Yes |
| Dunn, Clara | Economic Development Staff | Operational | | | | PT | Yes | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | Yes | Yes |
| Mayes, Tammy | Bookkeeping | Professional | | | | PT | Yes | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | Yes | Yes |
| Tedesco, Thomas | Economic Development Staff | Operational | | | | PT | Yes | 0.00 | 0 | 0 | 0 | 0 | 0 | 0 | Yes | Yes |
| Zucco, Richard | Counsel | Professional | | | | PT | Yes | 3,000.00 | 0 | 0 | 0 | 0 | 0 | 0 | No | |

Benefit Information

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

No

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 |
|-----------------------|--------------------|-------------------|--------------------------|-------------------|-------------------------------|----------------|------|----------------|-------------------|------------------------------------|--------------------|-----------------------|------------------------|-------|
| Robins, Christophe | Board of Directors | | | | | | | | | | | | X | |
| Anderson, Jr., Robert | Board of Directors | | | | | | | | | | | | X | |
| Dyster, Paul | Board of Directors | | | | | | | | | | | | X | |
| Choolokian, Glenn | Board of Directors | | | | | | | | | | | | X | |
| Walker, Charles | Board of Directors | | | | | | | | | | | | X | |
| Touma, Andrew | Board of Directors | | | | | | | | | | | | X | |
| Grandinetti, Kristen | Board of Directors | | | | | | | | | | | | X | |
| Hooper, Michael | Board of Directors | | | | | | | | | | | | X | |
| Markarian, Janet | Board of Directors | | | | | | | | | | | | X | |
| O'Connor, Doreen | Board of Directors | | | | | | | | | | | | X | |
| Paterson, Jeffrey | Board of Directors | | | | | | | | | | | | X | |
| Henwood, Jacqueline | Board of Directors | | | | | | | | | | | | X | |
| Johnson, Jamie | Board of Directors | | | | | | | | | | | | X | |
| Muto, Lucy | Board of Directors | | | | | | | | | | | | X | |
| Parise, Paul | Board of Directors | | | | | | | | | | | | X | |
| Roma, Frank | Board of Directors | | | | | | | | | | | | X | |
| Sawicki, | Board of | | | | | | | | | | | | X | |

| 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 |
|-----------------------|---------------------------------|-------------------|--------------------------|-------------------|-------------------------------|----------------|------|----------------|-------------------|------------------------------------|--------------------|-----------------------|------------------------|-------|
| Anne Smith , Jacob | Directors Board of Directors | | | | | | | | | | | | X | |
| Whittaker, Lee | Board of Directors | | | | | | | | | | | | X | |

Staff

| 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 |
|---|-------|-------------------|--------------------------|-------------------|-------------------------------|----------------|------|----------------|-------------------|------------------------------------|--------------------|-----------------------|------------------------|-------|
| No Data has been entered by the Authority for this section in PARIS | | | | | | | | | | | | | | |

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 included in the PARIS reports submitted by this Aut No

| Name of Subsidiary/Component Unit | Status | Requested Changes |
|-----------------------------------|--------|-------------------|
|-----------------------------------|--------|-------------------|

Subsidiary/Component Unit Creation

| Name of Subsidiary/Component Unit | Establishment Date | Entity Purpose |
|-----------------------------------|--------------------|----------------|
|-----------------------------------|--------------------|----------------|

Subsidiary/Component Unit Termination

| Name of Subsidiary/Component Unit | Termination Date | Termination Reason | Proof of Termination |
|-----------------------------------|------------------|--------------------|----------------------|
|-----------------------------------|------------------|--------------------|----------------------|

No Data has been entered by the Authority for this section in PARIS

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

| <u>Assets</u> | |
|--|--------------------|
| Current Assets | |
| Cash and cash equivalents | \$1,449,525 |
| Investments | \$0 |
| Receivables, net | \$53,521 |
| Other assets | \$0 |
| Total Current Assets | \$1,503,046 |
| Noncurrent Assets | |
| Restricted cash and investments | \$0 |
| Long-term receivables, net | \$329,549 |
| Other assets | \$0 |
| Capital Assets | |
| Land and other nondepreciable property | \$0 |
| Buildings and equipment | \$65,830 |
| Infrastructure | \$0 |
| Accumulated depreciation | \$65,830 |
| Net Capital Assets | \$0 |
| Total Noncurrent Assets | \$329,549 |
| Total Assets | \$1,832,595 |

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

Current Liabilities

| | |
|---|-----------------|
| Accounts payable | \$14,321 |
| Pension contribution payable | \$0 |
| Other post-employment benefits | \$0 |
| Accrued liabilities | \$0 |
| Deferred revenues | \$0 |
| Bonds and notes payable | \$0 |
| Other long-term obligations due within one year | \$0 |
| Total Current Liabilities | \$14,321 |

Noncurrent Liabilities

| | |
|-------------------------------------|------------|
| Pension contribution payable | \$0 |
| Other post-employment benefits | \$0 |
| Bonds and notes payable | \$0 |
| Long Term Leases | \$0 |
| Other long-term obligations | \$0 |
| Total Noncurrent Liabilities | \$0 |

Total Liabilities **\$14,321**

Net Asset (Deficit)

Net Asset

| | |
|---|--------------------|
| Invested in capital assets, net of related debt | \$0 |
| Restricted | \$0 |
| Unrestricted | \$1,818,274 |
| Total Net Assets | \$1,818,274 |

Summary Financial InformationSUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETSOperating Revenues

| | |
|--------------------------------|-----------------|
| Charges for services | \$1,483 |
| Rental & financing income | \$0 |
| Other operating revenues | \$21,163 |
| Total Operating Revenue | \$22,646 |

Operating Expenses

| | |
|---------------------------------|-----------------|
| Salaries and wages | \$0 |
| Other employee benefits | \$0 |
| Professional services contracts | \$79,910 |
| Supplies and materials | \$785 |
| Depreciation & amortization | \$0 |
| Other operating expenses | \$18,890 |
| Total Operating Expenses | \$99,585 |

Operating Income (Loss) **(\$76,939)**

Nonoperating Revenues

| | |
|-----------------------------------|-----------------|
| Investment earnings | \$2,866 |
| State subsidies/grants | \$0 |
| Federal subsidies/grants | \$0 |
| Municipal subsidies/grants | \$93,531 |
| Public authority subsidies | \$0 |
| Other nonoperating revenues | \$1,942 |
| Total Nonoperating Revenue | \$98,339 |

Summary Financial InformationSUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETSNonoperating Expenses

| | |
|---|--------------------|
| Interest and other financing charges | \$0 |
| Subsidies to other public authorities | \$0 |
| Grants and donations | \$66,803 |
| Other nonoperating expenses | \$19,009 |
| Total Nonoperating Expenses | \$85,812 |
| Income (Loss) Before Contributions | (\$64,412) |
| Capital Contributions | \$0 |
| Change in net assets | (\$64,412) |
| Net assets (deficit) beginning of year | \$1,882,686 |
| Other net assets changes | \$0 |
| Net assets (deficit) at end of year | \$1,818,274 |

Current Debt

| Question | Response |
|---|----------|
| 1. Did the Authority have any outstanding debt, including conduit debt, at any point during the reporting period? | No |
| 2. If yes, has the Authority issued any debt during the reporting period? | |

New Debt Issuances List by Type of Debt and Program

No Data has been entered by the Authority for this section in PARIS

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 Supported | | | | | |
| State Contingent Obligation | | | | | |
| State Moral Obligation | | | | | |
| Other State Funded | | | | | |
| Authority Obligation | | | | | |
| General Obligation | | | | | |
| Revenue | | | | | |
| Other Non-State Funded | | | | | |
| Conduit | | | | | |
| Conduit Debt | | | | | |
| Conduit Debt - Pilot Increment Financing | | | | | |

Real Property Acquisition/Disposal List

This Authority has indicated that it had no real property acquisitions or disposals during the reporting period.

Personal Property

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

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 of all real property of the Authority. Has this report been prepared? | Yes | http://www.niagarafallsusa.org/NFCDevCorp.cfm |
| 2. Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring, and reporting of contracts for the acquisition and disposal of property? | Yes | http://www.egovlink.com/public_documents300/niagarafalls/published_documents/PDFs/NFC_Disposition_Po |
| 3. In accordance with Section 2896(1) of PAL, has the Authority named a contracting officer who shall be responsible for the Authority's compliance with and enforcement of such guidelines? | Yes | |

Grant Information

1. Source of Grant Funds: Municipal
Name of Grant Recipient: Dijah's Natural Hair Creations
Address Line1: 2502 Pine Avenue
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14301
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 04/29/2013
Purpose of Grant: Business Expansion/Startup

2. Source of Grant Funds: Municipal
Name of Grant Recipient: Frank's Vacuum Truck Service
Address Line1: 4500 Royal Ave
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14303
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 01/14/2013
Purpose of Grant: Business Expansion/Startup

Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 1
If yes, how many jobs have been
created to date? 1

Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 12
If yes, how many jobs have been
created to date? 12

Grant Information

3. Source of Grant Funds: Municipal
Name of Grant Recipient: Hampton Inn
Address Line1: 501 Rainbow Blvd
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14303
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 01/14/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 8
If yes, how many jobs have been
created to date? 0

4. Source of Grant Funds: Municipal
Name of Grant Recipient: Mario's Pizza
Address Line1: 307 Prospect St
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14303
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$15,000
Date Grant Awarded: 08/13/2013
Purpose of Grant: Business Expansion/Startup
Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 1
If yes, how many jobs have been
created to date? 1

Grant Information

5. Source of Grant Funds: Municipal
Name of Grant Recipient: Niagara's Honeymoon Suites
Address Line1: 2433 Cleveland Avenue
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14305
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$1,803
Date Grant Awarded: 05/21/2013
Purpose of Grant: Equipment and Fixed Asset Acquisition

6. Source of Grant Funds: Municipal
Name of Grant Recipient: Ventry's Pizza & Subs
Address Line1: 6926 Buffalo Ave
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14304
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 08/13/2013
Purpose of Grant: Business Expansion/Startup

Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 1
If yes, how many jobs have been
created to date? 1

Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 3
If yes, how many jobs have been
created to date? 3

Grant Information

7. Source of Grant Funds: Municipal
Name of Grant Recipient: WNY Tents & Awnings
Address Line1: 1318 Hyde Park Blvd
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14301
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 07/23/2013
Purpose of Grant: Business Expansion/Startup

Was the grant expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 2
If yes, how many jobs have been
created to date? 2

Loan Information

1. Source of Loan Funds: Municipal
 Name of Loan Recipient: Cafe Lola
 Address Line1: 507 3rd Street
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$55,000
 Date Loan Awarded: 01/01/2009
 Interest Rate(%): 3
 Length of Loan(# of years
 to repay): 10
 Amount of Loan Prinicipal Repaid
 to Date: \$0.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 6
 If yes, how many jobs have been
 created to date? 0
 Have the terms of the loan been
 completed? No

2. Source of Loan Funds: Municipal
 Name of Loan Recipient: Como Restaurant
 Address Line1: 2220 Pine Ave
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$100,000
 Date Loan Awarded: 12/01/2008
 Interest Rate(%): 3
 Length of Loan(# of years
 to repay): 15
 Amount of Loan Prinicipal Repaid
 to Date: \$26,448.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 2
 If yes, how many jobs have been
 created to date? 2
 Have the terms of the loan been
 completed? No

Loan Information

3. Source of Loan Funds: Municipal
 Name of Loan Recipient: Frank's Vacuum Truck Services, Inc
 Address Line1: 4500 Royal Ave
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14303
 Province/Region:
 Country: USA
 Original Amount of Loan: \$192,660
 Date Loan Awarded: 05/24/2011
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 10
 Amount of Loan Principal Repaid
 to Date: \$3,080.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? No
 If yes, how many jobs were planned
 to be created?
 If yes, how many jobs have been
 created to date?
 Have the terms of the loan been
 completed? No

4. Source of Loan Funds: Municipal
 Name of Loan Recipient: Frank's Vacuum Truck Services, Inc.
 Address Line1: 4500 Royal Avenue
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14303
 Province/Region:
 Country: USA
 Original Amount of Loan: \$7,340
 Date Loan Awarded: 12/01/2011
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 10
 Amount of Loan Principal Repaid
 to Date: \$7,340.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 12
 If yes, how many jobs have been
 created to date? 12
 Have the terms of the loan been
 completed? Yes

Loan Information

5. Source of Loan Funds: Municipal
 Name of Loan Recipient: Jimbo's Fish House , Inc
 Address Line1: 745 East Market Street
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$35,000
 Date Loan Awarded: 10/12/2012
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 8
 Amount of Loan Prinicipal Repaid
 to Date: \$4,650.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 2
 If yes, how many jobs have been
 created to date? 2
 Have the terms of the loan been
 completed? No

6. Source of Loan Funds: Municipal
 Name of Loan Recipient: Kandola Group, Inc.
 Address Line1: 436 8th Street
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$35,000
 Date Loan Awarded: 05/01/2011
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 5
 Amount of Loan Prinicipal Repaid
 to Date: \$16,424.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 2
 If yes, how many jobs have been
 created to date? 2
 Have the terms of the loan been
 completed? No

Loan Information

7. Source of Loan Funds: Municipal
 Name of Loan Recipient: Nazim, Inc.
 Address Line1: 925 Pine Ave
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$25,000
 Date Loan Awarded: 01/10/2012
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 6
 Amount of Loan Principal Repaid
 to Date: \$5,246.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 3
 If yes, how many jobs have been
 created to date? 3
 Have the terms of the loan been
 completed? No

8. Source of Loan Funds: Municipal
 Name of Loan Recipient: PEMCO, Inc.
 Address Line1: 150 Portage Road
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14303
 Province/Region:
 Country: USA
 Original Amount of Loan: \$30,000
 Date Loan Awarded: 06/01/2011
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 6
 Amount of Loan Principal Repaid
 to Date: \$10,613.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 8
 If yes, how many jobs have been
 created to date? 8
 Have the terms of the loan been
 completed? No

Loan Information

9. Source of Loan Funds: Municipal
 Name of Loan Recipient: T-Krowe, Inc.
 Address Line1: 8735 Niagara Falls Boulevard
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14304 1947
 Province/Region:
 Country: USA
 Original Amount of Loan: \$30,000
 Date Loan Awarded: 12/01/2009
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 6
 Amount of Loan Prinicipal Repaid
 to Date: \$0.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 2
 If yes, how many jobs have been
 created to date? 0
 Have the terms of the loan been
 completed? No

10. Source of Loan Funds: Municipal
 Name of Loan Recipient: WNY Tents & Awnings
 Address Line1: 1318 Hyde Park Blvd
 Address Line2:
 City: NIAGARA FALLS
 State: NY
 Zip - Plus4: 14301
 Province/Region:
 Country: USA
 Original Amount of Loan: \$9,960
 Date Loan Awarded: 07/23/2013
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 7
 Amount of Loan Prinicipal Repaid
 to Date: \$361.00
 Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 2
 If yes, how many jobs have been
 created to date? 2
 Have the terms of the loan been
 completed? No

Loan Information

11. Source of Loan Funds: Municipal
Name of Loan Recipient: Wine on 3rd, LLC
Address Line1: 501 3rd Street
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14301
Province/Region:
Country: USA
Original Amount of Loan: \$45,000
Date Loan Awarded: 12/01/2009
Interest Rate(%): 5
Length of Loan(# of years
to repay): 7
Amount of Loan Principal Repaid
to Date: \$22,727.00
Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 2
If yes, how many jobs have been
created to date? 2
Have the terms of the loan been
completed? No

12. Source of Loan Funds: Municipal
Name of Loan Recipient: Yvonne's Bakery
Address Line1: 449 3rd St
Address Line2:
City: NIAGARA FALLS
State: NY
Zip - Plus4: 14301
Province/Region:
Country: USA
Original Amount of Loan: \$20,000
Date Loan Awarded: 08/31/2012
Interest Rate(%): 5
Length of Loan(# of years
to repay): 8
Amount of Loan Principal Repaid
to Date: \$991.00
Purpose of Loan: Business Expansion/Startup

Was the Loan expected to result
in new jobs being created? Yes
If yes, how many jobs were planned
to be created? 3
If yes, how many jobs have been
created to date? 0
Have the terms of the loan been
completed? No

Bond Information

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

Additional Comments: