

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	www.troyny.gov
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	www.troyny.gov
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	www.troyny.gov
6. Are any Authority staff also employed by another government agency?	No	
7. Has the Authority posted their mission statement to their website?	Yes	www.troyny.gov
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.		www.troyny.gov

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):		www.troyny.gov
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		www.troyny.gov
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	www.troyny.gov
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	www.troyny.gov
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?	Yes	N/A
16. Has the board adopted a conditional/additional compensation policy governing all employees?	Yes	www.troyny.gov

Board of Directors Listing

Name	Ross, Andrew	Name	Zalewski, Kenneth J
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	02/06/2013	Term Start Date	05/15/2008
Term Expiration Date	02/05/2014	Term Expiration Date	Ex-Officio
Title		Title	City Council Member
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	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?	Yes	Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes	Complied with training requirement of Section 2824?	Yes
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	Yes
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	Altes, Wally	Name	Ryan, Peter
Chair of Board	Yes	Chair of Board	No
If yes, Chair designated By.	By Virtue of Position	If yes, Chair designated By.	
Term Start Date	04/09/2012	Term Start Date	02/06/2013
Term Expiration Date	04/08/2015	Term Expiration Date	02/05/2014
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?	Yes	Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes	Complied with training requirement of Section 2824?	Yes
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	Dunne, William S
Chair of Board	No
If yes, Chair designated By.	
Term Start Date	04/09/2012
Term Expiration Date	Ex-Officio
Title	Commissioner of Planning
Has the Board member appointed a designee?	No
Designee Name	
Ex-officio	Yes
Nominated By	Local
Appointed By	Local
Confirmed by Senate?	No
Has the Board member/designee signed the acknowledgement of fiduciary duty?	Yes
Complied with training requirement of Section 2824?	Yes
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

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
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This authority has indicated that it has no staff during the reporting period.

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 Allow-ance	Spousal / Dependent Life Insurance	Tuition Assist-ance	Multi-Year Employ-ment	None of These Benefits	Other
Altes, Wally	Board of Directors												X	
Dunne, William S	Board of Directors												X	
Ross, Andrew	Board of Directors												X	
Zalewski, Kenneth J	Board of Directors												X	
Ryan, Peter	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 Allow-ance	Spousal / Dependent Life Insurance	Tuition Assist-ance	Multi-Year Employ-ment	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
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Subsidiary/Component Unit Creation

Name of Subsidiary/Component Unit	Establishment Date	Entity Purpose
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Subsidiary/Component Unit Termination

Name of Subsidiary/Component Unit	Termination Date	Termination Reason	Proof of Termination
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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	\$2,106,118
Investments	\$0
Receivables, net	\$32,485
Other assets	\$43,555
Total Current Assets	\$2,182,158
Noncurrent Assets	
Restricted cash and investments	\$257,598
Long-term receivables, net	\$368,097
Other assets	\$0
Capital Assets	
Land and other nondepreciable property	\$2,498,067
Buildings and equipment	\$386,079
Infrastructure	\$0
Accumulated depreciation	\$29,468
Net Capital Assets	\$2,854,678
Total Noncurrent Assets	\$3,480,373
Total Assets	\$5,662,531

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

Current Liabilities

Accounts payable	\$44,444
Pension contribution payable	\$0
Other post-employment benefits	\$0
Accrued liabilities	\$86,749
Deferred revenues	\$163,295
Bonds and notes payable	\$167,000
Other long-term obligations due within one year	\$0
Total Current Liabilities	\$461,488

Noncurrent Liabilities

Pension contribution payable	\$0
Other post-employment benefits	\$0
Bonds and notes payable	\$0
Long Term Leases	\$1,998,000
Other long-term obligations	\$0
Total Noncurrent Liabilities	\$1,998,000

Total Liabilities **\$2,459,488**

Net Asset (Deficit)

Net Asset

Invested in capital assets, net of related debt	\$0
Restricted	\$437,176
Unrestricted	\$2,765,867
Total Net Assets	\$3,203,043

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Operating Revenues

Charges for services	\$0
Rental & financing income	\$169,311
Other operating revenues	\$111,575
Total Operating Revenue	\$280,886

Operating Expenses

Salaries and wages	\$0
Other employee benefits	\$0
Professional services contracts	\$130,578
Supplies and materials	\$2,131
Depreciation & amortization	\$8,563
Other operating expenses	\$328,645
Total Operating Expenses	\$469,917

Operating Income (Loss) **(\$189,031)**

Nonoperating Revenues

Investment earnings	\$21,315
State subsidies/grants	\$34,875
Federal subsidies/grants	\$0
Municipal subsidies/grants	\$0
Public authority subsidies	\$0
Other nonoperating revenues	\$3,510
Total Nonoperating Revenue	\$59,700

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

Interest and other financing charges	\$109,306
Subsidies to other public authorities	\$0
Grants and donations	\$34,875
Other nonoperating expenses	\$0
Total Nonoperating Expenses	\$144,181
Income (Loss) Before Contributions	(\$273,512)
Capital Contributions	\$0
Change in net assets	(\$273,512)
Net assets (deficit) beginning of year	\$3,476,554
Other net assets changes	\$1
Net assets (deficit) at end of year	\$3,203,043

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?	No

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	0.00	2,332,000.00	0.00	167,000.00	2,165,000.00
Conduit					
Conduit Debt					
Conduit Debt - Pilot Increment Financing					

Real Property Acquisition/Disposal List

1. Address Line1: 20 King Street

Address Line2:

City: TROY

State: NY

Postal Code: 12180

Plus4:

Province/Region:

Country: USA

Property Description: Vacant Lot/Undeveloped Land

Estimated Fair Market Value: \$5,300

How was the Fair Market Other

Value Determined?:

Transaction Type: ACQUISITION

If Other, Explain:

Transaction Date: 04/12/2013

Purchase Sale Price: \$1.00

Lease Data (If applicable)

Market Rate(\$/square foot):

Lease Rate(\$/square foot):

Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization: City of Troy

Last Name:

First Name:

Address Line1: 433 River Street

Address Line2:

City: TROY

State: NY

Postal Code: 12180

Plus4:

Province/Region:

Country: USA

Relation With Board

member/senior authority

management? Yes

Personal Property

1. Property Description: Vacant Land

Estimated Fair Market Value: \$5,300.00

How was Fair Market Value

Determined?: Other

Transaction Date: 08/06/2013

Sale Price: \$3,000.00

Organization: King Street Properties LLC

Last Name:

First Name:

Address Line1: 75 Columbia Street

Address Line2:

City: ALBANY

State: NY

Postal Code: 12210

Plus4: 2708

Province/Region:

Country: USA

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	www.troyny.gov
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	ww.troyny.gov
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: Other
Name of Grant Recipient: 328-330 Congress St
Address Line1: 328-330 Congress St
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$5,000
Date Grant Awarded: 10/11/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

2. Source of Grant Funds: Other
Name of Grant Recipient: 332 Congress St
Address Line1: 332 Congress St
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$5,000
Date Grant Awarded: 10/11/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

Grant Information

3. Source of Grant Funds: Other
Name of Grant Recipient: Cookie Factory
Address Line1: 4 River Street
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$10,000
Date Grant Awarded: 12/13/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

4. Source of Grant Funds: Other
Name of Grant Recipient: Dublins
Address Line1: 121 Fourth Street
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$4,700
Date Grant Awarded: 10/11/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

Grant Information

5. Source of Grant Funds: Other
Name of Grant Recipient: Hot Spot Jamaican American Cuisine
Address Line1: 3301 Sixth Ave
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$5,000
Date Grant Awarded: 05/10/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

6. Source of Grant Funds: Other
Name of Grant Recipient: Kenneth L. Stulmaker
Address Line1: Deli Brew
Address Line2: 4 Lita Lane
City: LOUDONVILLE
State: NY
Zip - Plus4: 12211
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$5,000
Date Grant Awarded: 10/11/2013
Purpose of Grant: Commercial Property
Construction/Acquisition/Revitalization/Im
provement
Was the grant 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?

Grant Information

7. Source of Grant Funds: State
 Name of Grant Recipient: Kevin Blogett
 Address Line1: 137 Fourth Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Amount of Grant Award Provided
 During Reporting Year: \$10,850.35
 Date Grant Awarded: 03/14/2013
 Purpose of Grant: Commercial Property
 Construction/Acquisition/Revitalization/Im
 provement
 Was the grant 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?

8. Source of Grant Funds: State
 Name of Grant Recipient: Realex LLC
 Address Line1: 2 King Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Amount of Grant Award Provided
 During Reporting Year: \$14,826.1
 Date Grant Awarded: 03/04/2013
 Purpose of Grant: Commercial Property
 Construction/Acquisition/Revitalization/Im
 provement
 Was the grant 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?

Grant Information

9. Source of Grant Funds: State
 Name of Grant Recipient: Spirts of Troy
 Address Line1: 75 Ferry street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Amount of Grant Award Provided
 During Reporting Year: \$6,199
 Date Grant Awarded: 03/07/2013
 Purpose of Grant: Commercial Property
 Construction/Acquisition/Revitalization/Im
 provement
 Was the grant 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?

10. Source of Grant Funds: Other
 Name of Grant Recipient: Tech Vallety Center of Gravity Inc
 Address Line1: 35 Fourth Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Amount of Grant Award Provided
 During Reporting Year: \$47,000
 Date Grant Awarded: 05/10/2013
 Purpose of Grant: Education/Training (Business Development)
 Was the grant 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?

Grant Information

11. Source of Grant Funds: Other
Name of Grant Recipient: Tech Valley Center of Gravity
Address Line1: 35 Fourth Street
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$3,000
Date Grant Awarded: 01/01/2013
Purpose of Grant: Education/Training (Business Development)

Was the grant 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?

12. Source of Grant Funds: State
Name of Grant Recipient: Tech Valley Center of Gravity Inc
Address Line1: 35 Fourth Street
Address Line2:
City: TROY
State: NY
Zip - Plus4: 12180
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$3,000
Date Grant Awarded: 01/01/2013
Purpose of Grant: Education/Training (Business Development)

Was the grant 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?

Grant Information

13. Source of Grant Funds: Other
Name of Grant Recipient: Troy Downtown Marina, LLC
Address Line1: 25 Blue Heron Drive
Address Line2:
City: AVERILL PARK
State: NY
Zip - Plus4: 12018
Province/Region:
Country: USA
Amount of Grant Award Provided
During Reporting Year: \$61,630
Date Grant Awarded: 06/14/2013
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? 3

If yes, how many jobs have been
created to date? 3

Loan Information

1. Source of Loan Funds: Other
 Name of Loan Recipient: Clark House. LLC
 Address Line1: 207 Broadway
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$10,000
 Date Loan Awarded: 06/20/2013
 Interest Rate(%): 4.25
 Length of Loan(# of years
 to repay): 2
 Amount of Loan Principal Repaid
 to Date: \$0.00
 Purpose of Loan: Commercial Property
 Construction/Acquisition/Revitalization/I
 mprovement
 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

2. Source of Loan Funds: Other
 Name of Loan Recipient: Essence Hair Studio
 Address Line1: 469 Fulton Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$9,495
 Date Loan Awarded: 05/30/2013
 Interest Rate(%): 4.25
 Length of Loan(# of years
 to repay): 5
 Amount of Loan Principal Repaid
 to Date: \$0.00
 Purpose of Loan: Equipment and Fixed Asset Acquisition
 Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 5
 If yes, how many jobs have been
 created to date? 0
 Have the terms of the loan been
 completed? No

Loan Information

3. Source of Loan Funds: Other
 Name of Loan Recipient: Indigo Hair, LLC
 Address Line1: 60 2nd Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$25,000
 Date Loan Awarded: 05/17/2013
 Interest Rate(%): 4.25
 Length of Loan(# of years
 to repay): 5
 Amount of Loan Principal Repaid
 to Date: \$2,268.00
 Purpose of Loan: Equipment and Fixed Asset Acquisition

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 5
 If yes, how many jobs have been
 created to date? 5
 Have the terms of the loan been
 completed? No

4. Source of Loan Funds: Federal
 Name of Loan Recipient: Old World Provisions
 Address Line1: 10 Industrial Park Road
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$250,000
 Date Loan Awarded: 12/09/2008
 Interest Rate(%): 6.75
 Length of Loan(# of years
 to repay): 20
 Amount of Loan Principal Repaid
 to Date: \$27,669.00
 Purpose of Loan: Commercial Property
 Construction/Acquisition/Revitalization/I
 mprovement

Was the Loan expected to result
 in new jobs being created? Yes
 If yes, how many jobs were planned
 to be created? 25
 If yes, how many jobs have been
 created to date? 25
 Have the terms of the loan been
 completed? No

Loan Information

5. Source of Loan Funds: Other
 Name of Loan Recipient: Realex, LLC
 Address Line1: 2 King Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$50,000
 Date Loan Awarded: 05/14/2013
 Interest Rate(%): 0
 Length of Loan(# of years
 to repay): 1
 Amount of Loan Principal Repaid
 to Date: \$50,000.00
 Purpose of Loan: Equipment and Fixed Asset Acquisition

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? Yes

6. Source of Loan Funds: Other
 Name of Loan Recipient: Relalex LLC
 Address Line1: 2 King Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$200,000
 Date Loan Awarded: 06/28/2012
 Interest Rate(%): 5
 Length of Loan(# of years
 to repay): 2
 Amount of Loan Principal Repaid
 to Date: \$200,000.00
 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? 71
 If yes, how many jobs have been
 created to date? 20
 Have the terms of the loan been
 completed? Yes

Loan Information

7. Source of Loan Funds: Other
 Name of Loan Recipient: To Do Development
 Address Line1: 43 3rd Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$8,200
 Date Loan Awarded: 12/20/2013
 Interest Rate(%): 4.25
 Length of Loan(# of years
 to repay): 1
 Amount of Loan Principal Repaid
 to Date: \$0.00
 Purpose of Loan: Commercial Property
 Construction/Acquisition/Revitalization/I
 mprovement
 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

8. Source of Loan Funds: Other
 Name of Loan Recipient: To Do Development LLC
 Address Line1: 43 3rd Street
 Address Line2:
 City: TROY
 State: NY
 Zip - Plus4: 12180
 Province/Region:
 Country: USA
 Original Amount of Loan: \$75,000
 Date Loan Awarded: 10/11/2013
 Interest Rate(%): 4.25
 Length of Loan(# of years
 to repay): 2
 Amount of Loan Principal Repaid
 to Date: \$0.00
 Purpose of Loan: Commercial Property
 Construction/Acquisition/Revitalization/I
 mprovement
 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

Bond Information

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

Additional Comments: