

**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	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
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?	Yes	N/A
5. Does the Authority have an organization chart?	Yes	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
6. Are any Authority staff also employed by another government agency?	Yes	Town of Brookhaven
7. Has the Authority posted their mission statement to their website?	Yes	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
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.		<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>

**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):		<a href="http://www.brookhavenldc.org">www/brookhavenldc.org</a>
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		<a href="http://www.brookhavenldc.org">www/brookhavenldc.org</a>
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	<a href="http://www.brookhavenldc.org">www/brookhavenldc.org</a>
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	<a href="http://www.brookhavenldc.org">www/brookhavenldc.org</a>
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?	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	KELLY, MICHAEL	Name	BRAUN, FREDERICK
Chair of Board	No	Chair of Board	Yes
If yes, Chair designated By.		If yes, Chair designated By.	By Virtue of Position
Term Start Date	04/08/2014	Term Start Date	03/16/2010
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	Other
Appointed By	Local	Appointed By	Local
Confirmed by Senate?	No	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?	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?	No

**Board of Directors Listing**

Name	MIDDLETON, SCOTT	Name	RUCCI, FELIX
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	01/07/2014	Term Start Date	05/07/2014
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	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?	No

**Board of Directors Listing**

Name	SCHIEDT, ANN-MARIE	Name	O'LOUGHLIN, JOHN
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	06/16/2010	Term Start Date	10/28/2014
Term Expiration Date	Pleasure of Authority	Term Expiration Date	Pleasure of Authority
Title		Title	
Has the Board member appointed a designee?		Has the Board member appointed a designee?	
Designee Name		Designee Name	
Ex-officio	No	Ex-officio	No
Nominated By	Local	Nominated By	Local
Appointed By	Local	Appointed By	Local
Confirmed by Senate?		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?	No	Complied with training requirement of Section 2824?	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 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	Callahan, Martin
Chair of Board	No
If yes, Chair designated By.	
Term Start Date	04/08/2014
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?	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?	No

**Staff Listing**

Name	Title	Group	Department / Subsidiary	Union Name	Barga- ining 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 Compensa tion/Allo wances/Ad justments	Total Compens -ation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
BRINKA, JOCELYN	CLERK	Administrative and Clerical	ECONOMIC DEVELOPMEN T	N/A	N/A	PT	No	0.00	0	0	0	0	0	0	No	
HALLOCK, ANNMARIE	CLERK	Administrative and Clerical	N/A			PT	No	0.00	0	0	0	0	0	0	No	
MULLIGAN, LISA	CEO	Executive	ECONOMIC DEVELOPMEN T	N/A	N/A	PT	No	0.00	0	0	0	0	0	0	No	
RYAN, JAMES	CFO	Executive	ASSESSOR	N/A	N/A	PT	No	0.00	0	0	0	0	0	0	No	
TULLO, JAMES	DEPUTY DIRECTOR	Managerial	N/A	N/A	N/A	PT	No	0.00	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
SCHEIDT, ANN-MARIE	Board of Directors												X	
BRAUN, FREDERICK	Board of Directors												X	
Callahan, Martin	Board of Directors												X	
RUCCI, FELIX	Board of Directors												X	
KELLY, MICHAEL	Board of Directors												X	
MIDDLETON, SCOTT	Board of Directors												X	
O'LOUGHLIN, JOHN	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
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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>	
<b>Current Assets</b>	
Cash and cash equivalents	\$240,494
Investments	\$0
Receivables, net	\$0
Other assets	\$9,136
<b>Total Current Assets</b>	<b>\$249,630</b>
<b>Noncurrent Assets</b>	
Restricted cash and investments	\$0
Long-term receivables, net	\$0
Other assets	\$0
<b>Capital Assets</b>	
Land and other nondepreciable property	\$0
Buildings and equipment	\$0
Infrastructure	\$0
Accumulated depreciation	\$0
Net Capital Assets	\$0
<b>Total Noncurrent Assets</b>	<b>\$0</b>
<b>Total Assets</b>	<b>\$249,630</b>

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

**Current Liabilities**

Accounts payable	\$1,675
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
<b>Total Current Liabilities</b>	<b>\$1,675</b>

**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
<b>Total Noncurrent Liabilities</b>	<b>\$0</b>

**Total Liabilities** **\$1,675**

Net Asset (Deficit)

**Net Asset**

Invested in capital assets, net of related debt	\$0
Restricted	\$0
Unrestricted	\$247,955
<b>Total Net Assets</b>	<b>\$247,955</b>

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Operating Revenues

Charges for services	\$112,090
Rental & financing income	\$0
Other operating revenues	\$0
<b>Total Operating Revenue</b>	<b>\$112,090</b>

Operating Expenses

Salaries and wages	\$0
Other employee benefits	\$0
Professional services contracts	\$1,600
Supplies and materials	\$0
Depreciation & amortization	\$0
Other operating expenses	\$65,206
<b>Total Operating Expenses</b>	<b>\$66,806</b>

**Operating Income (Loss)** **\$45,284**

Nonoperating Revenues

Investment earnings	\$0
State subsidies/grants	\$0
Federal subsidies/grants	\$0
Municipal subsidies/grants	\$0
Public authority subsidies	\$0
Other nonoperating revenues	\$0
<b>Total Nonoperating Revenue</b>	<b>\$0</b>

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	\$0
Other nonoperating expenses	\$0
<b>Total Nonoperating Expenses</b>	<b>\$0</b>
Income (Loss) Before Contributions	<b>\$45,284</b>
Capital Contributions	\$0
Change in net assets	\$45,284
Net assets (deficit) beginning of year	\$202,671
Other net assets changes	\$0
Net assets (deficit) at end of year	<b>\$247,955</b>

**Current Debt**

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

**New Debt Issuances List by Type of Debt and Program**

Type Of Debt: Conduit Debt

Program:

Project	Amounts	CUSIP Number	Bond Closing Date	Taxable Status	Issue Process	True Interest Cost	Interest Type	Term	Cost of Issuance (\$)	PACB Project	URL
Brookhaven Hospital	Refunding	0.00	03/27/2014		Competitive	4	Fixed	30	0.00		
	New	35,000,000.00									
	Total	35,000,000.00									

**Schedule of Authority Debt**

Type of Debt	Statutory Authorization (\$)	Outstanding Start of Fiscal Year (\$)	New Debt Issuances (\$)	Debt Retired (\$)	Outstanding End of Fiscal Year (\$)
<b>State Obligation</b>					
State Guaranteed					
State Supported					
State Contingent Obligation					
State Moral Obligation					
Other State Funded					
<b>Authority Obligation</b>					
General Obligation					
Revenue					
Other Non-State Funded					
<b>Conduit</b>					
Conduit Debt	0.00	81,879,821.00	35,000,000.00	24,926,321.00	91,953,500.00
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	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
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	<a href="http://www/brookhavenldc.org">www/brookhavenldc.org</a>
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?	No	

Grant Information

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

Loan Information

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

**Bond Information**

1. Name of Recipient of Bond  
 Proceeds: Alternatives for Children  
 Address Line1: 14 Research Way  
 Address Line2:  
 City: EAST SETAUKET  
 State: NY  
 Zip - Plus4: 11733  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$6,235,000.00  
 Date Bonds Issued: 06/26/2013  
 Bond Interest Rate: 2.95  
 Last Year Bonds Expected to be Retired: 2033  
 Amount of Bond Principal retired during the reporting year: \$220,000  
 Amt of Bond Principal retired prior to reporting year: \$0  
 Current Amount of Bonds Outstanding: \$6,015,000  
 Purpose of project requiring the Bond Issuance: Commercial Property Construction/Acquisition/Revitalization/Improvement  
 Was the bond issuance 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 bonds been fully retired? No

2. Name of Recipient of Bond  
 Proceeds: Brookhaven Memorial Hospital Medical Center  
 Address Line1: 101 Hospital Road  
 Address Line2:  
 City: PATCHOGUE  
 State: NY  
 Zip - Plus4: 11772  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$35,000,000.00  
 Date Bonds Issued: 03/27/2014  
 Bond Interest Rate: 4  
 Last Year Bonds Expected to be Retired: 2044  
 Amount of Bond Principal retired during the reporting year: \$0  
 Amt of Bond Principal retired prior to reporting year:  
 Current Amount of Bonds Outstanding: \$35,000,000  
 Purpose of project requiring the Bond Issuance: Equipment and Fixed Asset Acquisition  
 Was the bond issuance 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 bonds been fully retired? No

**Bond Information**

3. Name of Recipient of Bond  
 Proceeds: IGHL  
 Address Line1: 1483 Stony Brook Road  
 Address Line2:  
 City: STONY BROOK  
 State: NY  
 Zip - Plus4: 11790  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$11,015,000.00  
 Date Bonds Issued: 10/31/2012  
 Bond Interest Rate: 3.15  
 Last Year Bonds Expected to be Retired: 2033  
 Amount of Bond Principal retired during the reporting year: \$0  
 Amt of Bond Principal retired prior to reporting year: \$1,101,500  
 Current Amount of Bonds Outstanding: \$9,913,500  
 Purpose of project requiring the Bond Issuance: Residential Property Construction/Acquisition/Rehabilitation/Improvement  
 Was the bond issuance 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 bonds been fully retired? No

4. Name of Recipient of Bond  
 Proceeds: JOHN T MATHER MEMORIAL HOSPITAL  
 Address Line1: NORTH COUNTRY ROAD  
 Address Line2:  
 City: PORT JEFFERSON  
 State: NY  
 Zip - Plus4: 11777  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$23,000,000.00  
 Date Bonds Issued: 08/15/2013  
 Bond Interest Rate: 4.28  
 Last Year Bonds Expected to be Retired: 2043  
 Amount of Bond Principal retired during the reporting year: \$0  
 Amt of Bond Principal retired prior to reporting year: \$0  
 Current Amount of Bonds Outstanding: \$23,000,000  
 Purpose of project requiring the Bond Issuance: Commercial Property Construction/Acquisition/Revitalization/Improvement  
 Was the bond issuance 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 bonds been fully retired? No

**Bond Information**

5. Name of Recipient of Bond  
 Proceeds: JOHN T MATHER MEMORIAL HOSPITAL  
 Address Line1: NORTH COUNTRY ROAD  
 Address Line2:  
 City: PORT JEFFERSON  
 State: NY  
 Zip - Plus4: 11777  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$20,105,000.00  
 Date Bonds Issued: 11/30/2012  
 Bond Interest Rate: 2.43  
 Last Year Bonds Expected to be Retired: 2022  
 Amount of Bond Principal retired during the reporting year: \$3,640,000  
 Amt of Bond Principal retired prior to reporting year:  
 Current Amount of Bonds Outstanding: \$16,465,000  
 Purpose of project requiring the Bond Issuance: Commercial Property Construction/Acquisition/Revitalization/Improvement  
 Was the bond issuance 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 bonds been fully retired? No

6. Name of Recipient of Bond  
 Proceeds: NEW INTERDISCIPLINARY SCHOOL INC.  
 Address Line1: 430 SILLS ROAD  
 Address Line2:  
 City: YAPHANK  
 State: NY  
 Zip - Plus4: 11980  
 Province/Region:  
 Country: USA  
 Amount of Bonds Issued: \$2,305,000.00  
 Date Bonds Issued: 10/31/2012  
 Bond Interest Rate: 2.87  
 Last Year Bonds Expected to be Retired: 2019  
 Amount of Bond Principal retired during the reporting year: \$745,000  
 Amt of Bond Principal retired prior to reporting year:  
 Current Amount of Bonds Outstanding: \$1,560,000  
 Purpose of project requiring the Bond Issuance: Education/Training(Business Development)  
 Was the bond issuance 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 bonds been fully retired? No

**Bond Information**

7. Name of Recipient of Bond  
Proceeds: New Interdisciplinary School Inc.  
Address Line1: 430 Sills Rd  
Address Line2:  
City: YAPHANK  
State: NY  
Zip - Plus4: 11980  
Province/Region:  
Country: USA  
Amount of Bonds Issued: \$2,305,000.00  
Date Bonds Issued: 10/31/2012  
Bond Interest Rate: 2.9  
Last Year Bonds Expected to be Retired: 2019  
Amount of Bond Principal retired during the reporting year: \$366,036  
Amt of Bond Principal retired prior to reporting year: \$1,938,964  
Current Amount of Bonds Outstanding: \$0  
Purpose of project requiring the Bond Issuance: Education/Training(Business Development)

Was the bond issuance 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 bonds been fully retired? Yes

Additional Comments: