

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.islipcda.org
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	www.islipcda.org
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.islipcda.org
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.islipcda.org
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.		www.islipcda.org

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.islipcda.org
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.islipcda.org
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	www.islipcda.org
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	www.islipcda.org
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?	No	

Board of Directors Listing

Name	Cavanagh, Debra	Name	Troche, Manuel
Chair of the Board	Yes	Chair of the Board	No
If yes, Chair Designated by.	Elected by Board	If yes, Chair Designated by.	
Term Start Date	01/01/2013	Term Start Date	01/01/2013
Term Expiration Date	03/01/2017	Term Expiration Date	06/30/2014
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	Other	Nominated By	Other
Appointed By	Other	Appointed By	Other
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?	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	Colon, Ramon V	Name	Ortiz, Renee
Chair of the Board	No	Chair of the Board	No
If yes, Chair Designated by.		If yes, Chair Designated by.	
Term Start Date	01/01/2012	Term Start Date	01/01/2012
Term Expiration Date	01/31/2014	Term Expiration Date	12/31/2015
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	Other	Nominated By	Other
Appointed By	Other	Appointed By	Other
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?	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	Raccuglia, Steven
Chair of the Board	No
If yes, Chair Designated by.	
Term Start Date	04/01/2013
Term Expiration Date	03/31/2018
Title	
Has the Board member appointed a designee?	
Designee Name	
Ex-officio	No
Nominated By	Other
Appointed By	Other
Confirmed by Senate?	
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	Bargaining Unit	Full Time/ Part Time	Exempt	Base Annualized Salary	Actual salary paid to the individual	Overtime 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 State or local government
Alden, Cameron	Staff Attorney / Rehab Specialist	Professional				PT	Yes	55,521.84	55,521.84	0	0	0	9,624.32	65,146.16	No	
Depalma, Maria	Maintenance	Operational				PT	No	34,320.00	528	0	0	0	0	528	No	
Felpo, Diane	Bookkeeper	Administrative and Clerical				FT	No	43,087.41	43,087.41	0	0	0	0	43,087.41	No	
Fink, Paul A	Executive Director / CEO	Executive				FT	Yes	103,100.40	103,100.4	0	0	0	30,643.33	133,743.73	No	
Fuchs, Robert T	General Counsel	Professional				FT	Yes	118,300.00	118,300	0	0	0	82.8	118,382.8	No	
Gesseck, Janet	Bookkeeper	Administrative and Clerical				FT	No	50,973.00	50,973	0	0	0	10,057.48	61,030.48	No	
Homfeld, George	Senior Rehab Specialists	Operational				FT	No	64,667.20	64,667.2	1,263.77	0	0	0	65,930.97	No	
Karppi, Alison M	Executive Director/CEO	Executive				FT	Yes	46,730.79	46,730.79	0	0	0	0	46,730.79	No	
Kuri, Robert M	Affordable Housing Program Director	Managerial				FT	Yes	73,964.80	73,964.8	0	0	0	8,658.24	82,623.04	No	
MacGibbon, Julia E	Director of Administrative Services	Managerial				FT	Yes	73,600.28	73,600.28	0	0	0	43.2	73,643.48	No	
Matera, Salvatore	Assistant Director / CFO	Executive				FT	Yes	92,925.56	92,925.56	0	0	0	690.21	93,615.77	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	Overtime 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 State or local government
Silas, Barbara	Property Manager	Operational				FT	No	54,653.04	54,653.04	45.03	0	0	1,051.02	55,749.09	No	
Tilford, Vivian	Receptionist	Administrative and Clerical				FT	No	38,594.92	38,594.92	0	0	0	1,484.41	40,079.33	No	
Toth, Terry	Rehabilitation Coordinator	Administrative and Clerical				FT	No	55,588.00	55,588	0	0	0	0	55,588	No	
Williams, Kathy	Program Coordinator	Administrative and Clerical				FT	No	20,060.83	20,060.83	0	0	0	0	20,060.83	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 Allow-ance	Spousal / Dependent Life Insurance	Tuition Assist-ance	Multi-Year Employ-ment	None of These Benefits	Other
Troche, Manuel	Board of Directors												X	
Cavanagh, Debra	Board of Directors												X	
Ortiz, Renee	Board of Directors												X	
Colon, Ramon V	Board of Directors												X	
Raccuglia, Steven	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
Fink, Paul A	Executive Director / CEO	X	X											
Fuchs, Robert T	General Counsel												X	

Subsidiary/Component Unit Verification

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct? No
 Are there other subsidiaries or component units of the Authority that are active, not included in the PARIS reports submitted by this Yes

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
Islip's Housing Development Fund Company, Inc.	05/11/1990	Assist the Town of Islip CDA in providing new Affordable Homes and Rentals to income eligible individuals/families within the Town of Islip.

Subsidiary/Component Unit Termination

Name of Subsidiary/Component Unit	Termination Date	Termination Reason	Proof of Termination
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Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

<u>Assets</u>	
Current Assets	
Cash and cash equivalents	\$3,480,076
Investments	\$0
Receivables, net	\$691,623
Other assets	\$683,632
Total Current Assets	\$4,855,331
Noncurrent Assets	
Restricted cash and investments	\$201,683
Long-term receivables, net	\$17,449,394
Other assets	\$0
Capital Assets	
Land and other nondepreciable property	\$10,860,675
Buildings and equipment	\$4,355,208
Infrastructure	\$0
Accumulated depreciation	\$2,302,912
Net Capital Assets	\$12,912,971
Total Noncurrent Assets	\$30,564,048
Total Assets	\$35,419,379

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

Current Liabilities

Accounts payable	\$748,946
Pension contribution payable	\$39,755
Other post-employment benefits	\$0
Accrued liabilities	\$310,420
Deferred revenues	\$0
Bonds and notes payable	\$0
Other long-term obligations due within one year	\$0
Total Current Liabilities	\$1,099,121

Noncurrent Liabilities

Pension contribution payable	\$0
Other post-employment benefits	\$655,759
Bonds and notes payable	\$0
Long Term Leases	\$0
Other long-term obligations	\$281,549
Total Noncurrent Liabilities	\$937,308

Total Liabilities

\$2,036,429

Net Asset (Deficit)

Net Asset

Invested in capital assets, net of related debt	\$2,052,296
Restricted	\$30,015,279
Unrestricted	\$1,315,375
Total Net Assets	\$33,382,950

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

Charges for services	\$2,557,653
Rental & financing income	\$0
Other operating revenues	\$0
Total Operating Revenue	\$2,557,653

Operating Expenses

Salaries and wages	\$955,931
Other employee benefits	\$432,995
Professional services contracts	\$67,665
Supplies and materials	\$0
Depreciation & amortization	\$120,242
Other operating expenses	\$0
Total Operating Expenses	\$1,576,833

Operating Income (Loss) **\$980,820**

Nonoperating Revenues

Investment earnings	\$4,340
State subsidies/grants	\$0
Federal subsidies/grants	\$7,085,414
Municipal subsidies/grants	\$0
Public authority subsidies	\$0
Other nonoperating revenues	\$0
Total Nonoperating Revenue	\$7,089,754

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETS

Nonoperating Expenses

Interest and other financing charges	\$53,186
Subsidies to other public authorities	\$0
Grants and donations	\$343,978
Other nonoperating expenses	\$3,187,670
Total Nonoperating Expenses	\$3,584,834
Income (Loss) Before Contributions	\$4,485,740
Capital Contributions	\$0
Change in net assets	\$4,485,740
Net assets (deficit) beginning of year	\$28,897,210
Other net assets changes	\$0
Net assets (deficit) at end of year	\$33,382,950

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	0.00	800,000.00	0.00	800,000.00	0.00
Revenue					
Other Non-State Funded					
Conduit					
Conduit Debt					
Conduit Debt - Pilot Increment Financing					

Real Property Acquisition/Disposal List

1. Address Line1: 46 Irving Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$232,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 07/22/2013
Purchase Sale Price: \$232,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Alicea
First Name: Aileen

Address Line1: 46 Irving Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

2. Address Line1: 89 Cordello Avenue
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$225,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 08/21/2013
Purchase Sale Price: \$225,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Mensah
First Name: Alberta

Address Line1: 89 Cordello Avenue
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

3. Address Line1: 2 Oak St.

 Address Line2:

 City: CENTRAL ISLIP
 State: NY
 Postal Code: 11722
 Plus4:
 Province/Region:
 Country: USA
 Property Description: Residential Building
 Estimated Fair Market Value: \$232,000
 How was the Fair Market Value Appraisal
 Determined?
 Transaction Type: DISPOSITION SALE
 If Other, Explain:

Transaction Date: 08/21/2013
 Purchase Sale Price: \$232,000.00
Lease Data (If applicable)
 Market Rate(\$/square foot):
 Lease Rate(\$/square foot):
 Lease Period (months):
Seller/Purchaser/Tenant Data:
 Organization:
 Last Name: Chaudry
 First Name: Mohammed

Address Line1: 2 Oak Street
 Address Line2:
 City: CENTRAL ISLIP
 State: NY
 Postal Code: 11722
 Plus4:
 Province/Region:
 Country: USA
 Relation With Board
 member/senior authority
 management? No

4. Address Line1: 20 St. Andrews St.

 Address Line2:

 City: BRENTWOOD
 State: NY
 Postal Code: 11717
 Plus4:
 Province/Region:
 Country: USA
 Property Description: Residential Building
 Estimated Fair Market Value: \$255,000
 How was the Fair Market Value Appraisal
 Determined?
 Transaction Type: DISPOSITION SALE
 If Other, Explain:

Transaction Date: 09/12/2013
 Purchase Sale Price: \$255,000.00
Lease Data (If applicable)
 Market Rate(\$/square foot):
 Lease Rate(\$/square foot):
 Lease Period (months):
Seller/Purchaser/Tenant Data:
 Organization:
 Last Name: Sosa
 First Name: Benjamin

Address Line1: 20 Andrews Street
 Address Line2:
 City: BRENTWOOD
 State: NY
 Postal Code: 11717
 Plus4:
 Province/Region:
 Country: USA
 Relation With Board
 member/senior authority
 management? No

Real Property Acquisition/Disposal List

5. Address Line1: 151 Grand Blvd
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$240,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 09/17/2013
Purchase Sale Price: \$240,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Steutterman
First Name: Richard

Address Line1: 151 Grand Blvd
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

6. Address Line1: 19 Pine Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$195,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 10/28/2013
Purchase Sale Price: \$195,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Fenelus
First Name: Sweeney

Address Line1: 19 Pine Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

7. Address Line1: 5 E. Sycamore Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$255,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 10/28/2013
Purchase Sale Price: \$255,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Andrews
First Name: Alexander

Address Line1: 5 E. Sycamore Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

8. Address Line1: 36 Fifth Street
Address Line2:
City: WEST ISLIP
State: NY
Postal Code: 11795
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$1,750,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: ACQUISITION
If Other, Explain:

Transaction Date: 11/12/2013
Purchase Sale Price: \$155,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization: Town of Islip CDA
Last Name:
First Name:

Address Line1: 15 Shore Lane
Address Line2:
City: BAY SHORE
State: NY
Postal Code: 11706
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

9. Address Line1: 11 Oak Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$225,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 11/18/2013
Purchase Sale Price: \$225,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Brewster
First Name: Michelle

Address Line1: 11 Oak Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

10. Address Line1: 140 Timberline Drive
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$210,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 12/10/2013
Purchase Sale Price: \$210,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Magee
First Name: Virginia

Address Line1: 140 Timberline Drive
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

11. Address Line1: 417 Cherry Avenue
Address Line2:
City: WEST SAYVILLE
State: NY
Postal Code: 11796
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$335,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 12/11/2013
Purchase Sale Price: \$335,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Hohenstein
First Name: George

Address Line1: 417 Cherry Avenue
Address Line2:
City: WEST SAYVILLE
State: NY
Postal Code: 11796
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

12. Address Line1: 40 O'Kane Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$232,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 12/19/2013
Purchase Sale Price: \$232,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Minier
First Name: Daniel

Address Line1: 40 O'Kane Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

13. Address Line1: 12 Willow Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$225,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 01/16/2014
Purchase Sale Price: \$225,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Jackson
First Name: Donald

Address Line1: 12 Willow Street
Address Line2:
City: CENTRAL ISLIP
State: NY
Postal Code: 11722
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

14. Address Line1: 209 Clark Street
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Property Description: Residential Building
Estimated Fair Market Value: \$245,000
How was the Fair Market Value Appraisal
Determined?
Transaction Type: DISPOSITION SALE
If Other, Explain:

Transaction Date: 04/15/2014
Purchase Sale Price: \$245,000.00
Lease Data (If applicable)
Market Rate(\$/square foot):
Lease Rate(\$/square foot):
Lease Period (months):
Seller/Purchaser/Tenant Data:
Organization:
Last Name: Mateo
First Name: Amin

Address Line1: 209 Clark Street
Address Line2:
City: BRENTWOOD
State: NY
Postal Code: 11717
Plus4:
Province/Region:
Country: USA
Relation With Board
member/senior authority
management? No

Real Property Acquisition/Disposal List

15. Address Line1: 13A McWhorter Street

Address Line2:

City: BRENTWOOD

State: NY

Postal Code: 11717

Plus4:

Province/Region:

Country: USA

Property Description: Office Building

Estimated Fair Market Value: \$100,000

How was the Fair Market Value Appraisal

Determined?

Transaction Type: DISPOSITION SALE

If Other, Explain:

Transaction Date: 05/22/2014

Purchase Sale Price: \$100,000.00

Lease Data (If applicable)

Market Rate(\$/square foot):

Lease Rate(\$/square foot):

Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization: Youth Enrichment Services

Last Name:

First Name:

Address Line1: PO Box 105

Address Line2:

City: WEST ISLIP

State: NY

Postal Code: 11795

Plus4:

Province/Region:

Country: USA

Relation With Board

member/senior authority

management? No

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	www.islipcda.org
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	www.islipcda.org
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	

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

Additional Comments: