Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

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	https://brooklynnavyyard.org/about/development-at-the-yard
2.	As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	https://brooklynnavyyard.org/about/corporate-documents
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	https://brooklynnavyyard.org/about/meet-the-staff
6.	Are any Authority staff also employed by another government agency?	No	
7.	Has the Authority posted their mission statement to their website?	Yes	https://brooklynnavyyard.org/about/mission
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.		https://brooklynnavyyard.org/about/development-at-the-yard

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Governance Information (Board-Related)

Question		Response	URL (If Applicable)
1.	Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL?	Yes	N/A
2.	Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL?	Yes	N/A
3.	Has the Board established a Finance Committee in accordance with Section 2824(8) of PAL?	Yes	N/A
4.	Provide a URL link where a list of Board committees can be found (including the name of the committee and the date established):		https://brooklynnavyyard.org/about/corporate-documents
5.	Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?	Yes	N/A
6.	Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year		https://brooklynnavyyard.org/about/corporate-documents
7.	Has the Board adopted bylaws and made them available to Board members and staff?	Yes	https://brooklynnavyyard.org/about/corporate-documents
8.	Has the Board adopted a code of ethics for Board members and staff?	Yes	https://brooklynnavyyard.org/about/corporate-documents
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?	No	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Board of Directors Listing

Name	Berger, Henry	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/22/2019	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Cohen, Ofer	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Cruz, William	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/1/1971	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Friedman, Adam	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	9/13/2002	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Gutman, Henry	Nominated By	Local
Chair of the Board	Yes	Appointed By	Local
If yes, Chair Designated by	Elected by Board	Confirmed by Senate?	N/A
Term Start Date	6/23/2014	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Headin Abb.	Naminated Du	11
Name	Hamlin, Abby	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	Pleasure of Authority	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	No
a Designee?		also Hold an Elected or Appointed	
		Municipal Government Position?	
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Hastick, Roy	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	11/2/1995	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	Pleasure of Authority	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	No
a Designee?		also Hold an Elected or Appointed	
_		Municipal Government Position?	
Designee Name		Ex-Officio	

Name	Hayashi, Kei	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Joseph, Jillian	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Kane, Meredith	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Kohl-Riggs, Joseph	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Leitner, Joel	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Lisa, Davis	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Marshall, Jane	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	9/13/2002	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Martin, Amani	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	10/11/2007	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	McCain, Ronald	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	9/18/2002	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	McQuade, Daniel	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Montvel-Cohen, Thomas	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	9/13/2002	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Nojovits, Alexander	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	1/1/1974	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	No
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Peguero, Ramon	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	3/8/2016	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Rowden, Wendy	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	12/8/2017	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Scissura, Carlo A	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	12/4/2012	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Sinacori, Steven M	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	12/28/2001	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Name	Turner, William D	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	10/11/2007	Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?	Yes
Term Expiration Date	Pleasure of Authority	Complied with Training Requirement of Section 2824?	Yes
Title		Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?	No
Has the Board Member Appointed a Designee?		Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position?	No
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

-

Name	Yuille-Williams, Toni	Nominated By	Local
Chair of the Board	No	Appointed By	Local
If yes, Chair Designated by		Confirmed by Senate?	N/A
Term Start Date	9/13/2002	Has the Board Member/Designee	Yes
		Signed the Acknowledgement of	
		Fiduciary Duty?	
Term Expiration Date	Pleasure of Authority	Complied with Training	Yes
		Requirement of Section 2824?	
Title		Does the Board Member/Designee	No
		also Hold an Elected or Appointed	
		State Government Position?	
Has the Board Member Appointed		Does the Board Member/Designee	No
a Designee?		also Hold an Elected or Appointed	
_		Municipal Government Position?	
Designee Name		Ex-Officio	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Subsidiary/Component Unit Verification

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

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 CERTIFIED Status: Certified Date: 02/03/2020

Summary Financial Information SUMMARY STATEMENT OF NET ASSETS

			Amount
Assets			
Current Assets			
	Cash and cash equivalents		\$5,824,479.00
	Investments		\$0.00
	Receivables, net		\$2,589,624.00
	Other assets		\$10,068,900.00
	Total Current Assets		\$18,483,003.00
Noncurrent Assets			
	Restricted cash and investments		\$72,161,216.00
	Long-term receivables, net		\$76,093,099.00
	Other assets		\$15,892,500.00
	Capital Assets		
		Land and other nondepreciable property	\$788,735,435.00
		Buildings and equipment	\$0.00
		Infrastructure	\$0.00
		Accumulated depreciation	\$230,301,968.00
		Net Capital Assets	\$558,433,467.00
	Total Noncurrent Assets		\$722,580,282.00
Total Assets			\$741,063,285.00
Liabilities			
Current Liabilities			
	Accounts payable		\$12,188,309.00
	Pension contribution payable		\$0.00
	Other post-employment benefits		\$0.00
	Accrued liabilities		\$0.00
	Deferred revenues		\$45,000,461.00
	Bonds and notes payable		\$8,646,551.00
	Other long-term obligations due within one year		\$0.00
	Total Current Liabilities		\$65,835,321.00
Noncurrent Liabilities			

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	Pension contribution payable	\$0.00
	Other post-employment benefits	\$0.00
	Bonds and notes payable	\$258,049,273.00
	Long Term Leases	\$0.00
	Other long-term obligations	\$10,427,233.00
	Total Noncurrent Liabilities	\$268,476,506.00
Total Liabilities		\$334,311,827.00
Net Asset (Deficit)		
Net Assets		
	Invested in capital assets, net of related debt	\$300,384,194.00
	Restricted	\$27,165,755.00
	Unrestricted	\$79,201,509.00
	Total Net Assets	\$406,751,458.00

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGES IN NET ASSETS

		Amount
Operating Revenues		
	Charges for services	\$0.00
	Rental & financing income	\$50,613,350.00
	Other operating revenues	\$10,101,886.00
	Total Operating Revenue	\$60,715,236.00
Operating Expenses		
	Salaries and wages	\$22,470,531.00
	Other employee benefits	\$0.00
	Professional services contracts	\$0.00
	Supplies and materials	\$4,780,833.00
	Depreciation & amortization	\$28,791,147.00
	Other operating expenses	\$19,822,834.00
	Total Operating Expenses	\$75,865,345.00
Operating Income (Loss)		(\$15,150,109.00)
Nonoperating Revenues		
	Investment earnings	\$1,654,767.00
	State subsidies/grants	\$4,016,937.00
	Federal subsidies/grants	\$0.00
	Municipal subsidies/grants	\$0.00
	Public authority subsidies	\$46,477,746.00

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	Other nonoperating revenues	\$2,568,872.00
	Total Nonoperating Revenue	\$54,718,322.00
Nonoperating Expenses		
	Interest and other financing charges	\$11,295,195.00
	Subsidies to other public authorities	\$0.00
	Grants and donations	\$0.00
	Other nonoperating expenses	\$0.00
	Total Nonoperating Expenses	\$11,295,195.00
	Income (Loss) Before Contributions	\$28,273,018.00
Capital Contributions		\$0.00
Change in net assets		\$28,273,018.00
Net assets (deficit) beginning of		\$378,478,440.00
year		
Other net assets changes		\$0.00
Net assets (deficit) at end of year		\$406,751,458.00

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Current Debt

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

New Debt Issuances

Type of Debt: Authority Debt - General Obligation

Program:

Project	Amounts		Bond Closing Date	Issue Process	True Interest Cost	Interest type	Term (Yrs)	Cost Of Issuance
Local Initiatives Support Corporation	Refunding New	\$0.00 \$5,063,125.00	9/21/2018	Competitive	5%	Fixed	3	\$0.00
	Total	\$5,063,125.00						
GSUIG Real Estate Member LLC	Refunding	\$0.00	9/21/2018	Competitive	6.5%	Fixed	8	\$0.00
	New	\$17,844,500.00						
	Total	\$17,844,500.00						

Type of Debt: Authority Debt - Other

Program:

Project	Amounts	Bond Closing Date	Issue Process	True Interest Cost	Interest type	Term (Yrs)	Cost Of Issuance
127 QALICB promissory notes dated September 21, 2018	Refunding \$0.00	9/21/2018	Competitive	1.07%	Fixed	35	\$0.00
	New \$35,330,000.	00					
	Total \$35,330,000.	00					
GSUIG Real Estate Member LLC - Line of Credit	Refunding \$0.00	9/21/2018	Competitive	6.5%	Fixed	4	\$0.00
LEO - LING OF OFECIE	New \$5,000,000.0	0					

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED

Certified Date: 02/03/2020

Project	Amounts		Bond Closing Date	Issue Process	True Interest Cost	Interest type	Term (Yrs)	Cost Of Issuance
	Total	\$5,000,000.00						

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Schedule of Authority Debt

Type of Debt			Statutory Authorization(\$)	Outstanding Start of Fiscal Year(\$)	New Debt Issuances(\$)	1.7	Outstanding End of Fiscal Year(\$)
State Obligation	State Guaranteed						
State Obligation	State Supported						
State Obligation	State Contingent Obligation						
State Obligation	State Moral Obligation						
Other State-Funded	Other State-Funded						
Authority Debt - General Obligation	Authority Debt - General Obligation		0.0	72,524,993.00	22,907,625.0	1,853,844.00	93,578,774.00
Authority Debt - Revenue	Authority Debt - Revenue						
Authority Debt - Other	Authority Debt - Other		0.0	0 132,787,050.00	40,330,000.0	0.00	173,117,050.00
Conduit		Conduit Debt					
Conduit		Conduit Debt - Pilot Increment Financing					
TOTALS			0.0	0 205,312,043.00	63,237,625.0	0 1,853,844.00	266,695,824.00

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$26.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	7/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	26
Lease Rate(\$/square foot)	26
Lease Period (months)	120
Organization	Transmitter Brewing LLC
Last Name	•
First Name	
Address Line1	141 Flushing Avenue
Address Line2	•
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$21.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	7/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	21
Lease Rate(\$/square foot)	21
Lease Period (months)	60
Organization	Hip Hop Closet
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$15.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	7/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	15
Lease Rate(\$/square foot)	15
Lease Period (months)	60
Organization	DCM Fabrication Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	•
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$22.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	22
Lease Rate(\$/square foot)	22
Lease Period (months)	60
Organization	Picture Farm II, LLC
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$17.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	17
Lease Rate(\$/square foot)	17
Lease Period (months)	240
Organization	Duggal Visual Solutions, Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	00 51 11 4
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$30.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	30
Lease Rate(\$/square foot)	30
Lease Period (months)	60
Organization	Navy Studio LLC
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Lines	62 Flushing Avenue
Address Line1	63 Flushing Avenue
Address Line2	DDOO!/()/A)
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$23.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	8/6/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	23
Lease Rate(\$/square foot)	23
Lease Period (months)	60
Organization	New York University
Last Name	,
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	•

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$13.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	9/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	13
Lease Rate(\$/square foot)	13
Lease Period (months)	120
Organization	R, Limited Liability Company
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$15.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	10/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	15
Lease Rate(\$/square foot)	15
Lease Period (months)	120
Organization	Division Paper Inc
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$18.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	10/18/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18
Lease Rate(\$/square foot)	18
Lease Period (months)	61
Organization	Jay Dee Group USA Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	•
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$15.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	10/22/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	15
Lease Rate(\$/square foot)	15
Lease Period (months)	121
Organization	Duggal Visual Solutions, Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	00 EL 1: A
Address Line1	63 Flushing Avenue
Address Line2	PDCOM/AN
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	11/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20
Lease Period (months)	60
Organization	IP Woodwork Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	PDCOM/AN
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	12/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20
Lease Period (months)	60
Organization	D.S. & Durga, LLC
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	12/1/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20
Lease Period (months)	60
Organization	i2R CNC LLC
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	•
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

A.I	00.51 1: 4
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$25.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	12/6/2018
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	25
Lease Rate(\$/square foot)	25
Lease Period (months)	121
Organization	Nanotronics Industrial, LLC
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$19.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	19
Lease Rate(\$/square foot)	19
Lease Period (months)	60
Organization	Noho Health Soultions, LLC
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$17.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	17
Lease Rate(\$/square foot)	17
Lease Period (months)	60
Organization	Turntable Lab Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

A.I	00.51 1: 4
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$30.22
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	30.22
Lease Rate(\$/square foot)	30.22
Lease Period (months)	60
Organization	Charlotta Westergen
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
, ,	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$22.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/14/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	22
Lease Rate(\$/square foot)	22
Lease Period (months)	241
Organization	The New York City School Construction Authority
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	•
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	00 EL 1: A
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	1/15/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20
Lease Period (months)	61
Organization	Skyline Environmental Corp.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 51 11 4
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$20.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	2/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	20
Lease Rate(\$/square foot)	20
Lease Period (months)	60
Organization	Nanov Display Inc.
Last Name	. ,
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Lines	C2 Flushing Avenue
Address Line1	63 Flushing Avenue
Address Line2	PD00/41/41
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$18.50
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	2/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18.5
Lease Rate(\$/square foot)	18.5
Lease Period (months)	120
Organization	Bednark Studio
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
, ,	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 51 11 4
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$23.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	3/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	23
Lease Rate(\$/square foot)	23
Lease Period (months)	60
Organization	Donald Gatanis Framing, Inc.
Last Name	·
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Addres 11 d	AAA Florida a Arrana
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$19.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	3/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	19
Lease Rate(\$/square foot)	19
Lease Period (months)	60
Organization	Globus Cork Inc.
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$21.36
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	3/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	21.36
Lease Rate(\$/square foot)	21.36
Lease Period (months)	60
Organization	Abby Lichtman Design LLC
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$22.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	3/11/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	22
Lease Rate(\$/square foot)	22
Lease Period (months)	180
Organization	Leap, Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$19.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	4/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	19
Lease Rate(\$/square foot)	19
Lease Period (months)	180
Organization	Kingbridge Garment Care Corp.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
<u> </u>	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$22.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	4/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	22
Lease Rate(\$/square foot)	22
Lease Period (months)	120
Organization	HITN Inc.
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
· · · · · · · · · · · · · · · · · · ·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$27.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	5/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	27
Lease Rate(\$/square foot)	27
Lease Period (months)	60
Organization	Video Guy, LLC
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
·	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	00.51 1: 4
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$17.50
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	5/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	17.5
Lease Rate(\$/square foot)	17.5
Lease Period (months)	60
Organization	Prospect Woodworks Inc and Frantz and Harmon LLC
Last Name	
First Name	
Address Line1	63 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
, ,	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$18.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	6/1/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	18
Lease Rate(\$/square foot)	18
Lease Period (months)	60
Organization	Atoms, Inc.
Last Name	
First Name	
Address Line1	141 Flushing Avenue
Address Line2	· ·
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	
, , , , , , , , , , , , , , , , , , , ,	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

	444 EL 11 A
Address Line1	141 Flushing Avenue
Address Line2	
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	USA
Property Description	Commercial Building
Estimated Fair Market Value	\$32.00
How was the Fair Market Value	Other
Determined?	
Transaction Type	DISPOSITION LEASE
If Other, Explain	
Transaction Date	6/10/2019
Purchase Sale Price	
Lease Data (If Applicable)	
Market Rate(\$/square foot)	32
Lease Rate(\$/square foot)	32
Lease Period (months)	60
Organization	Lecker Foods Hospital Group LLC
Last Name	,
First Name	
Address Line1	141 Flushing Avenue
Address Line2	· ·
City	BROOKLYN
State	NY
Postal Code	11205
Plus4	
Province/Region	
Country	United States
Relation With Board member/senior	No
authority management?	

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Personal Property

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

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED

Certified Date: 02/03/2020

Property Documents

Question		Response	URL (If Applicable)
1.	In accordance with Section 2896(3) of PAL, the Authority is required to prepare a report at least annually	Yes	https://brooklynnavyyard.org/about/corporate-documents
	of all real property of the Authority. Has this report been prepared?		
2.	Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring,	Yes	https://brooklynnavyyard.org/about/corporate-documents
	and reporting of contracts for the acquisition and disposal of property?		
3.	In accordance with Section 2896(1) of PAL, has the Authority named a contracting officer who shall be	Yes	N/A
	responsible for the Authority's compliance with and enforcement of such guidelines?		

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Grant Information

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

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Loan Information

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

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Bond Information

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

Fiscal Year Ending: 06/30/2019

Run Date: 02/03/2020 Status: CERTIFIED Certified Date: 02/03/2020

Additional Comments