

Governance Information (Authority-Related)

Question	Response	URL (if applicable)
1. Has the Authority prepared its annual report on operations and accomplishments for the reporting period as required by section 2800 of PAL?	Yes	http://www.clintoncountyida.com/
2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?	Yes	http://www.clintoncountyida.com/
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	http://www.clintoncountyida.com/
6. Are any Authority staff also employed by another government agency?	Yes	Clinton County
7. Has the Authority posted their mission statement to their website?	Yes	http://www.clintoncountyida.com/
8. Has the Authority's mission statement been revised and adopted during the reporting period?	Yes	N/A
9. Attach the Authority's measurement report, as required by section 2824-a of PAL and provide the URL.		http://www.clintoncountyida.com/

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):		http://www.clintoncountyida.com/
5. Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?	Yes	N/A
6. Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year		http://www.clintoncountyida.com/
7. Has the Board adopted bylaws and made them available to Board members and staff?	Yes	http://www.clintoncountyida.com/
8. Has the Board adopted a code of ethics for Board members and staff?	Yes	http://www.clintoncountyida.com/
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?	Yes	http://www.clintoncountyida.com/

Board of Directors Listing

Name	VanNatten, John	Name	Hoover, David
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	11/11/2010	Term Start Date	11/11/2010
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	Local
Appointed By	Local	Appointed By	Local
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?	No	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	Defayette, Keith	Name	Trahan, Trent
Chair of Board	No	Chair of Board	Yes
If yes, Chair designated By.		If yes, Chair designated By.	Local
Term Start Date	09/11/2013	Term Start Date	11/11/2010
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	Local
Appointed By	Local	Appointed By	Local
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	Murray, Kim	Name	Zurlo, Michael
Chair of Board	No	Chair of Board	No
If yes, Chair designated By.		If yes, Chair designated By.	
Term Start Date	07/24/2013	Term Start Date	11/11/2010
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	Local
Appointed By	Local	Appointed By	Local
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	Leta, Mark
Chair of Board	No
If yes, Chair designated By.	
Term Start Date	11/11/2010
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?	
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	Over time paid by Authority	Performance Bonus	Extra Pay	Other Compensation/Allowances/Adjustments	Total Compensation	Individual also paid by another entity to perform the work of the Authority	If yes, Is the payment made by a State or local government
Jabaut, Christine	Comptroller	Professional				FT	Yes	0.00	0	0	0	0	0	0	Yes	No
McManus, Melissa	Executive Director	Professional				FT	Yes	0.00	0	0	0	0	0	0	Yes	Yes
Shute, Barbara	Administrative Assistant	Administrative and Clerical				FT	Yes	0.00	0	0	0	0	0	0	Yes	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
VanNatten, John	Board of Directors												X	
Zurlo, Michael	Board of Directors												X	
Leta, Mark	Board of Directors												X	
Trahan, Trent	Board of Directors												X	
Hoover, David	Board of Directors												X	
Defayette, Keith	Board of Directors												X	
Murray, Kim	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>	
Current Assets	
Cash and cash equivalents	\$98,745
Investments	\$0
Receivables, net	\$0
Other assets	\$0
Total Current Assets	\$98,745
Noncurrent Assets	
Restricted cash and investments	\$0
Long-term receivables, net	\$21,325
Other assets	\$0
Capital Assets	
Land and other nondepreciable property	\$0
Buildings and equipment	\$0
Infrastructure	\$0
Accumulated depreciation	\$0
Net Capital Assets	\$0
Total Noncurrent Assets	\$21,325
Total Assets	\$120,070

Summary Financial Information

SUMMARY STATEMENT OF NET ASSETS

Liabilities

Current Liabilities

Accounts payable	\$10,000
Pension contribution payable	\$0
Other post-employment benefits	\$0
Accrued liabilities	\$0
Deferred revenues	\$0
Bonds and notes payable	\$0
Other long-term obligations due within one year	\$0
Total Current Liabilities	\$10,000

Noncurrent Liabilities

Pension contribution payable	\$0
Other post-employment benefits	\$0
Bonds and notes payable	\$0
Long Term Leases	\$0
Other long-term obligations	\$21,325
Total Noncurrent Liabilities	\$21,325

Total Liabilities **\$31,325**

Net Asset (Deficit)

Net Asset

Invested in capital assets, net of related debt	\$0
Restricted	\$0
Unrestricted	\$88,745
Total Net Assets	\$88,745

Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Operating Revenues

Charges for services	\$24,300
Rental & financing income	\$0
Other operating revenues	\$0
Total Operating Revenue	\$24,300

Operating Expenses

Salaries and wages	\$0
Other employee benefits	\$0
Professional services contracts	\$82,000
Supplies and materials	\$0
Depreciation & amortization	\$0
Other operating expenses	\$0
Total Operating Expenses	\$82,000

Operating Income (Loss) **(\$57,700)**

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
Total Nonoperating Revenue	\$0

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
Total Nonoperating Expenses	\$0
Income (Loss) Before Contributions	(\$57,700)
Capital Contributions	\$0
Change in net assets	(\$57,700)
Net assets (deficit) beginning of year	\$146,445
Other net assets changes	\$0
Net assets (deficit) at end of year	\$88,745

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
Behavioral Health Services North, Inc.	Refunding	1,629,727.00	10/13/2017		Negotiated	2.75	Fixed	22	62,800.00		
	New	1,510,273.00									
	Total	3,140,000.00									

Schedule of Authority Debt

Type of Debt	Statutory Authorization (\$)	Outstanding Start of Fiscal Year (\$)	New Debt Issuances (\$)	Debt Retired (\$)	Outstanding End of Fiscal Year (\$)
State Obligation					
State Guaranteed					
State Supported					
State Contingent Obligation					
State Moral Obligation					
Authority Debt - General Obligation					
Authority Debt - General Obligation					
Authority Debt - Other					
Authority Debt - Other					
Authority Debt - Revenue					
Authority Debt - Revenue					
Conduit					
Conduit Debt	0.00	37,680,000.00	3,140,000.00	2,384,119.33	38,435,880.67
Conduit Debt - Pilot Increment Financing					
Other State-Funded					
Other State-Funded					

Real Property Acquisition/Disposal List

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

Personal Property

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

Property Documents

Question	Response	URL (if applicable)
1. In accordance with Section 2896(3) of PAL, the Authority is required to prepare a report at least annually of all real property of the Authority. Has this report been prepared?	Yes	http://www.clintoncountyida.com/
2. Has the Authority prepared policies, procedures, or guidelines regarding the use, awarding, monitoring, and reporting of contracts for the acquisition and disposal of property?	Yes	http://www.clintoncountyida.com/
3. In accordance with Section 2896(1) of PAL, has the Authority named a contracting officer who shall be responsible for the Authority's compliance with and enforcement of such guidelines?	Yes	

Grant Information

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

Loan Information

1. Source of Loan Funds: Municipal
Name of Loan Recipient: Strand Performing Arts Center, Inc.
Address Line1: 23 Brinkerhoff Street
Address Line2:
City: PLATTSBURGH
State: NY
Zip - Plus4: 12901
Province/Region:
Country: USA
Original Amount of Loan: \$100,000
Date Loan Awarded: 08/25/2017
Interest Rate(%): 0
Length of Loan(# of years
to repay): 8
Amount of Loan Principal Repaid
to Date: \$0.00
Purpose of Loan: Business Expansion/Startup

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

Bond Information

1. Name of Recipient of Bond
 Proceeds: Behavioral Health Services North Inc.
 Address Line1: 22 US Oval Suite 218
 Address Line2:
 City: PLATTSBURGH
 State: NY
 Zip - Plus4: 12903
 Province/Region:
 Country: USA
 Amount of Bonds Issued: \$3,140,000.00
 Date Bonds Issued: 10/13/2017
 Bond Interest Rate: 2.75
 Last Year Bonds Expected to be Retired: 2039
 Amount of Bond Principal retired during the reporting year: \$0
 Amt of Bond Principal retired prior to reporting year:
 Current Amount of Bonds Outstanding: \$3,140,000
 Purpose of project requiring the Bond Issuance: Business Expansion/Startup
 Was the bond issuance expected to result in new jobs being created? Yes
 If yes, how many jobs were planned to be created? 5
 If yes, how many jobs have been created to date? 3
 Have the bonds been fully retired? No

2. Name of Recipient of Bond
 Proceeds: CVPH Medical Center
 Address Line1: 75 Beekman St.
 Address Line2:
 City: PLATTSBURGH
 State: NY
 Zip - Plus4: 12901
 Province/Region:
 Country: USA
 Amount of Bonds Issued: \$31,680,000.00
 Date Bonds Issued: 10/31/2016
 Bond Interest Rate: 1.35
 Last Year Bonds Expected to be Retired: 2042
 Amount of Bond Principal retired during the reporting year: \$2,210,000
 Amt of Bond Principal retired prior to reporting year: \$0
 Current Amount of Bonds Outstanding: \$29,470,000
 Purpose of project requiring the Bond Issuance: Business Expansion/Startup
 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: Hudson Headwater Health Network
Address Line1: 9 Carey Rd
Address Line2:
City: QUEENSBURY
State: NY
Zip - Plus4: 12804
Province/Region:
Country: USA
Amount of Bonds Issued: \$6,000,000.00
Date Bonds Issued: 12/15/2015
Bond Interest Rate: 2.85
Last Year Bonds Expected to be Retired: 2037
Amount of Bond Principal retired during the reporting year: \$174,119.33
Amt of Bond Principal retired prior to reporting year: \$0
Current Amount of Bonds Outstanding: \$5,825,880.67
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? Yes
If yes, how many jobs were planned to be created? 59
If yes, how many jobs have been created to date? 10
Have the bonds been fully retired? No

Additional Comments: