

**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending:12/31/2015**
**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Governance Information (Authority-Related)**

| Question   | Response | URL (if applicable)  |
|--|----------|--|
| 1. Has the Authority prepared its annual report on operations and accomplishments for the reporting period as required by section 2800 of PAL? | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 2. As required by section 2800(9) of PAL, did the Authority prepare an assessment of the effectiveness of its internal controls?               | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 3. Has the lead audit partner for the independent audit firm changed in the last five years in accordance with section 2802(4) of PAL?         | Yes      | N/A  |
| 4. Does the independent auditor provide non-audit services to the Authority?   | No       | N/A  |
| 5. Does the Authority have an organization chart?  | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 6. Are any Authority staff also employed by another government agency?   | No       |  |
| 7. Has the Authority posted their mission statement to their website?  | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 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.  |          | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |

**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending: 12/31/2015**

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Governance Information (Board-Related)

| Question  | Response | URL  |
|---|----------|--|
| 1. Has the Board established a Governance Committee in accordance with Section 2824(7) of PAL?  | Yes      | N/A  |
| 2. Has the Board established an Audit Committee in accordance with Section 2824(4) of PAL?  | Yes      | N/A  |
| 3. Has the Board established Finance Committee in accordance with Section 2824(8) of PAL?   | Yes      | N/A  |
| 4. Provide a URL link where a list of Board committees can be found (including the name of the committee and the date established):                 |          | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 5. Does the majority of the Board meet the independence requirements of Section 2825(2) of PAL?   | Yes      | N/A  |
| 6. Provide a URL link to the minutes of the Board and committee meetings held during the covered fiscal year  |          | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 7. Has the Board adopted bylaws and made them available to Board members and staff?   | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 8. Has the Board adopted a code of ethics for Board members and staff?  | Yes      | <a href="http://www.cortlandbusiness.com">www.cortlandbusiness.com</a> |
| 9. Does the Board review and monitor the Authority's implementation of financial and management controls?   | Yes      | N/A  |
| 10. Does the Board execute direct oversight of the CEO and management in accordance with Section 2824(1) of PAL?                                    | Yes      | N/A  |
| 11. Has the Board adopted policies for the following in accordance with Section 2824(1) of PAL?   |          |  |
| Salary and Compensation   | Yes      | N/A  |
| Time and Attendance   | Yes      | N/A  |
| Whistleblower Protection  | Yes      | N/A  |
| Defense and Indemnification of Board Members  | Yes      | N/A  |
| 12. Has the Board adopted a policy prohibiting the extension of credit to Board members and staff in accordance with Section 2824(5) of PAL?        | Yes      | N/A  |
| 13. Are the Authority's Board members, officers, and staff required to submit financial disclosure forms in accordance with Section 2825(3) of PAL? | Yes      | N/A  |
| 14. Was a performance evaluation of the board completed?  | 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       |  |



Public Authorities Recording Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
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Board of Directors Listing

| Name  | Brooks, Michelle | Name  | Servies, Steve        |
|---|------------------|---|-----------------------|
| Chair of Board  | No               | Chair of Board  | No                    |
| If yes, Chair designated By.  |                  | If yes, Chair designated By.  |                       |
| Term Start Date   | 01/01/2012       | Term Start Date   | 03/01/2014            |
| Term Expiration Date  | 12/31/2017       | 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  | Other            | 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 government position?     | No               | Does the Board member/designee also hold an elected or appointed State government position?     | 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                    |

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Board of Directors Listing

| Name  | Seibel, George | Name  | McSherry, Matthew |
|---|----------------|---|-------------------|
| Chair of Board  | No             | Chair of Board  | No                |
| If Yes, Chair designated By.  |                | If Yes, Chair designated By.  |                   |
| Term Start Date   | 08/01/2014     | Term Start Date   | 01/01/2002        |
| Term Expiration Date  | 12/31/2016     | Term Expiration Date  | 12/31/2016        |
| 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?  | No             | Confirmed by Senate?  |                   |
| Has the Board member/designee signed the acknowledgement of fiduciary duty?                     | Yes            | Has the Board member/designee signed the acknowledgement of fiduciary duty?                     | Yes               |
| Complied with training requirement of Section 2824?   | No             | Complied with training requirement of Section 2824?   | Yes               |
| Does the Board member/designee also hold an elected or appointed State government position?     | No             | Does the Board member/designee also hold an elected or appointed State government position?     | 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                |

Annual Report for Cortland County Business Development Corporation  
 Fiscal Year Ending:12/31/2015

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Board of Directors Listing

| Name  | Reagan, John O        | Name  | Shirley, John         |
|---|-----------------------|---|-----------------------|
| Chair of Board  | No                    | Chair of Board  | No                    |
| If Yes, Chair designated By.  |                       | If Yes, Chair designated By.  |                       |
| Term Start Date   | 01/01/2006            | Term Start Date   | 02/25/2010            |
| 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 government position?     | No                    | Does the Board member/designee also hold an elected or appointed State government position?     | 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                    |

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 Fiscal Year Ending:12/31/2015

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Board of Directors Listing

| Name  | Ames, Johanna         | Name  | Haynes, Carl |
|---|-----------------------|---|--------------|
| Chair of Board  | No                    | Chair of Board  | No           |
| If Yes, Chair designated By.  |                       | If Yes, Chair designated By.  |              |
| Term Start Date   | 03/01/2010            | Term Start Date   | 01/01/2002   |
| Term Expiration Date  | Pleasure of Authority | Term Expiration Date  | 12/31/2018   |
| Title   |                       | Title   |              |
| Has the Board member appointed a designee?  |                       | Has the Board member appointed a designee?  |              |
| Designee Name   |                       | Designee Name   |              |
| Ex-officio  | No                    | Ex-officio  | No           |
| Nominated By  | Local                 | Nominated By  | Other        |
| Appointed By  | Local                 | Appointed By  | 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 government position?     | No                    | Does the Board member/designee also hold an elected or appointed State government position?     | 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           |

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**Fiscal Year Ending:12/31/2015**

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**Board of Directors Listing**

|   |                   |   |              |
|---|-------------------|---|--------------|
| Name  | Compagni, Stephen | Name  | Sandy, Susan |
| Chair of Board  | No                | Chair of Board  | No           |
| If Yes, Chair designated By.  |                   | If Yes, Chair designated By.  |              |
| Term Start Date   | 03/01/2009        | Term Start Date   | 02/13/2012   |
| Term Expiration Date  |                   | 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  | Local             | Nominated By  | Other        |
| 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 government position?     | No                | Does the Board member/designee also hold an elected or appointed State government position?     | 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  | Totman, Bradley       | Name  | McMahon, Michael      |
|---|-----------------------|---|-----------------------|
| Chair of Board  | No                    | Chair of Board  | Yes                   |
| If Yes, Chair Designated By.  |                       | If Yes, Chair Designated By.  | Local                 |
| Term Start Date   | 05/01/2014            | Term Start Date   | 01/01/2004            |
| 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 government position?     | No                    | Does the Board member/designee also hold an elected or appointed State government position?     | 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                    |



PARIS  
Public Authorities Reporting Information System

Annual Report for Corland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
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Board of Directors Listing

| Name  | Brandstadt, David |
|---|-------------------|
| Chair of Board  | No                |
| If yes, Chair designated By.  |                   |
| Term Start Date   | 01/01/2013        |
| Term Expiration Date  | 12/31/2017        |
| 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?   | No                |
| Does the Board member/designee also hold an elected or appointed State government position?     | No                |
| Does the Board member/designee also hold an elected or appointed municipal government position? | No                |



Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

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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/Adjustments | Total Compensation | Individual also paid by another entity to perform the work of the government Authority | If yes, is the payment made by a State or local government |
|--------------------|--------------------|-----------------------------|-------------------------|------------|-----------------|-----------------------|--------|------------------------|--------------------------------------|-----------------------------|-------------------|-----------|--------------------------------|--------------------|--|--|
| Grip, Sandy        | Office Manager     | Administrative and Clerical |                         |            |                 | FT                    | Yes    | 45,000.00              | 45,000                               | 0                           | 0                 | 0         | 0                              | 45,000             | No   |  |
| Niday, Karen       | CFO/EDS            | Administrative and Clerical |                         |            |                 | FT                    | Yes    | 74,000.00              | 73,999.91                            | 0                           | 0                 | 0         | 0                              | 3,999.96           | 77,999.87  | No   |
| Vanderorder, Garry | Executive Director | Executive                   |                         |            |                 | FT                    | Yes    | 100,000.00             | 99,999.9                             | 0                           | 0                 | 0         | 0                              | 3,752              | 103,751.9  | No   |

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**Fiscal Year Ending: 12/31/2015**

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**Benefit Information**

During the fiscal year, did the Authority continue to pay for any of the above mentioned benefits for

**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 |
|-------------------|--------------------|-------------------|--------------------------|-------------------|-------------------------------|----------------|---------------------|-------------------|------------------------------------|--------------------|-----------------------|------------------------|-------|
| Seibel, George    | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Servies, Steve    | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Totman, Bradley   | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Shirley, John     | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Ames, Johanna     | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| McMahon, Michael  | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Reagan, John O    | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Haynes, Carl      | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| McSherry, Matthew | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Brooks, Michelle  | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Sandy, Susan      | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Compagni, Stephen | Board of Directors |                   |                          |                   |                               |                |                     |                   |                                    |                    |                       | X                      |       |
| Brandstadt, David | 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



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Public Authorities Reporting Information System

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**Fiscal Year Ending:12/31/2015**

Run Date: 03/23/2016  
Status: CERTIFIED

**Subsidiary/Component Unit Verification**

Is the list of subsidiaries, as assembled by the Office of the State Comptroller, correct?  
Are there other subsidiaries or component units of the Authority that are active, not included in the PARIS reports submitted by this Aut

Yes  
No

**Name of Subsidiary/Component Unit**

| Name of Subsidiary/Component Unit | Status | Requested Changes |
|-----------------------------------|--------|-------------------|
|                                   |        |                   |

**Subsidiary/Component Unit Creation**

**Name of Subsidiary/Component Unit**

| Name of Subsidiary/Component Unit | Establishment Date | Entity Purpose |
|-----------------------------------|--------------------|----------------|
|                                   |                    |                |

**Subsidiary/Component Unit Termination**

**Name of Subsidiary/Component Unit**

| Name of Subsidiary/Component Unit | Termination Date | Termination Reason | Proof of Termination |
|-----------------------------------|------------------|--------------------|----------------------|
|                                   |                  |                    |                      |

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



PARIS  
Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

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Summary Financial Information

**SUMMARY STATEMENT OF NET ASSETS**

| <b>Assets</b>                          |                    |
|--|--------------------|
| <b>Current Assets</b>                  |                    |
| Cash and cash equivalents              | \$620,114          |
| Investments                            | \$0                |
| Receivables, net                       | \$162,278          |
| Other assets                           | \$12,540           |
| <b>Total Current Assets</b>            | <b>\$734,932</b>   |
| <b>Noncurrent Assets</b>               |                    |
| Restricted cash and investments        | \$0                |
| Long-term receivables, net             | \$110,116          |
| Other assets                           | \$0                |
| <b>Capital Assets</b>                  |                    |
| Land and other nondepreciable property | \$0                |
| Buildings and equipment                | \$165,700          |
| Infrastructure                         | \$0                |
| Accumulated depreciation               | \$42,064           |
| Net Capital Assets                     | \$123,636          |
| <b>Total Noncurrent Assets</b>         | <b>\$223,752</b>   |
| <b>Total Assets</b>                    | <b>\$1,028,684</b> |



PARIS  
Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
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Summary Financial Information

**SUMMARY STATEMENT OF NET ASSETS**

Liabilities

**Current Liabilities**

|   |                |
|---|----------------|
| Accounts payable                                | \$5,118        |
| Pension contribution payable                    | \$0            |
| Other post-employment benefits                  | \$0            |
| Accrued liabilities                             | \$126          |
| Deferred revenues                               | \$0            |
| Bonds and notes payable                         | \$0            |
| Other long-term obligations due within one year | \$0            |
| <b>Total Current Liabilities</b>                | <b>\$5,244</b> |

**Noncurrent Liabilities**

|                                     |                |
|-------------------------------------|----------------|
| Pension contribution payable        | \$0            |
| Other post-employment benefits      | \$0            |
| Bonds and notes payable             | \$0            |
| Long Term Leases                    | \$0            |
| Other long-term obligations         | \$0            |
| <b>Total Noncurrent Liabilities</b> | <b>\$0</b>     |
| <b>Total Liabilities</b>            | <b>\$5,244</b> |

**Net Asset (Deficit)**

|   |                    |
|---|--------------------|
| Invested in capital assets, net of related debt | \$0                |
| Restricted                                      | \$694,146          |
| Unrestricted                                    | \$329,294          |
| <b>Total Net Assets</b>                         | <b>\$1,023,440</b> |



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Annual Report for Cortland County Business Development Corporation  
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Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Operating Revenues

|                                |                 |
|--------------------------------|-----------------|
| Charges for services           | \$14,362        |
| Rental & financing income      | \$0             |
| Other operating revenues       | \$30,181        |
| <b>Total Operating Revenue</b> | <b>\$44,543</b> |

Operating Expenses

|                                   |                    |
|-----------------------------------|--------------------|
| Salaries and wages                | \$219,000          |
| Other employee benefits           | \$81,463           |
| Professional services contracts   | \$21,282           |
| Supplies and materials            | \$20,022           |
| Depreciation & amortization       | \$1,369            |
| Other operating expenses          | \$157,853          |
| <b>Total Operating Expenses</b>   | <b>\$512,989</b>   |
| <b>Operating Income (Loss)</b>    | <b>(\$468,446)</b> |
| <u>Nonoperating Revenues</u>      |                    |
| Investment earnings               | \$228              |
| State subsidies/grants            | \$0                |
| Federal subsidies/grants          | \$0                |
| Municipal subsidies/grants        | \$416,791          |
| Public authority subsidies        | \$0                |
| Other nonoperating revenues       | \$0                |
| <b>Total Nonoperating Revenue</b> | <b>\$417,019</b>   |



PARIS  
Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

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Summary Financial Information

SUMMARY STATEMENT OF REVENUE, EXPENSES AND CHANGE IN NET ASSETS

Nonoperating Expenses

|   |                    |
|---|--------------------|
| Interest and other financing charges          | \$0                |
| Subsidies to other public authorities         | \$0                |
| Grants and donations                          | \$0                |
| Other nonoperating expenses                   | \$0                |
| <b>Total Nonoperating Expenses</b>            | <b>\$0</b>         |
| <b>Income (Loss) Before Contributions</b>     | <b>(\$51,427)</b>  |
| Capital Contributions                         | \$0                |
| Change in net assets                          | (\$51,427)         |
| <b>Net assets (deficit) beginning of year</b> | <b>\$1,074,867</b> |
| <b>Other net assets changes</b>               | <b>\$0</b>         |
| <b>Net assets (deficit) at end of year</b>    | <b>\$1,023,440</b> |



Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

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Current Debt

| Question  | Response |
|---|----------|
| 1. Did the Authority have any outstanding debt, including conduit debt, at any point during the reporting period? | No       |
| 2. If yes, has the Authority issued any debt during the reporting period?   |          |

New Debt Issuances List by Type of Debt and Program

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



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Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

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Schedule of Authority Debt

| Type of Debt                             | Statutory Authorization (\$) | Outstanding Start of Fiscal Year (\$) | New Debt Issuances (\$) | Debt Retired (\$) | Outstanding End of Fiscal Year (\$) |
|--|------------------------------|---------------------------------------|-------------------------|-------------------|-------------------------------------|
| State Obligation                         |                              |                                       |                         |                   |                                     |
| State Guaranteed                         |                              |                                       |                         |                   |                                     |
| State Supported                          |                              |                                       |                         |                   |                                     |
| State Contingent Obligation              |                              |                                       |                         |                   |                                     |
| State Moral Obligation                   |                              |                                       |                         |                   |                                     |
| Other State Funded                       |                              |                                       |                         |                   |                                     |
| Authority Obligation                     |                              |                                       |                         |                   |                                     |
| General Obligation                       |                              |                                       |                         |                   |                                     |
| Revenue                                  |                              |                                       |                         |                   |                                     |
| Other Non-State Funded Conduit           |                              |                                       |                         |                   |                                     |
| Conduit Debt                             |                              |                                       |                         |                   |                                     |
| Conduit Debt - Pilot Increment Financing |                              |                                       |                         |                   |                                     |



Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
Status: CERTIFIED

Real Property Acquisition/Disposal List

1. Address Line1: 4408 Route 11

Address Line2:

City: HOMER  
State: NY  
Postal Code: 13077

Plus4:

Province/Region: USA

Property Description: Vacant Lot/Undeveloped Land  
Estimated Fair Market Value: \$38,500  
How was the Fair Market Competitive Bid

Value Determined?:

Transaction Type: ACQUISITION

If Other, Explain:

2. Address Line1: S Main St

Address Line2:

City: HOMER  
State: NY  
Postal Code: 13077

Plus4:

Province/Region: USA

Property Description: Vacant Lot/Undeveloped Land  
Estimated Fair Market Value: \$38,500  
How was the Fair Market Competitive Bid

Value Determined?:

Transaction Type: ACQUISITION

If Other, Explain:

Transaction Date: 07/16/2015  
Purchase Sale Price: \$38,500.00

Lease Data (if applicable)

Market Rate (\$/square foot):

Lease Rate (\$/square foot):

Lease Period (months):

Seller/Purchaser/Tenant Data:

Organization: County of Cortland

Last Name:

First Name:

Address Line1: 60 Central Ave

Address Line2:

City: CORTLAND  
State: NY  
Postal Code: 13045

Plus4:

Province/Region: USA

Relation With Board  
member/senior authority management? Yes  
management? Yes

Address Line1: 60 Central Ave

Address Line2:

City: CORTLAND  
State: NY  
Postal Code: 13045

Plus4:

Province/Region: USA

Relation With Board  
member/senior authority management? Yes  
management? Yes



Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
Status: CERTIFIED

Personal Property

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



**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending:12/31/2015**

Run Date: 03/23/2016  
Status: CERTIFIED

**Property Documents**

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



**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending:12/31/2015**

**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Grant Information**

|    |   |    |  |
|----|---|----|--|
| 1. | Source of Grant Funds: Not for Profit                   | 2. | Source of Grant Funds: Not for Profit        |
|    | Name of Grant Recipient: Cortland Line Holdings         |    | Name of Grant Recipient: Long Island Bagel   |
|    | Address Line1: 3736 Kellogg Road                        |    | Address Line1: 33 Main St                    |
|    | Address Line2:  |    | Address Line2:                               |
|    | City: CORTLAND  |    | City: CORTLAND                               |
|    | State: NY   |    | State: NY                                    |
|    | Zip - plus4: 13045                                      |    | Zip - plus4: 13045                           |
|    | Province/Region:  |    | Province/Region:                             |
|    | Country: USA  |    | Country: USA                                 |
|    | Amount of Grant Award Provided                          |    | Amount of Grant Award Provided               |
|    | During Reporting Year: \$50,000                         |    | During Reporting Year: \$5,000               |
|    | Date Grant Awarded: 06/25/2015                          |    | Date Grant Awarded: 11/14/2014               |
|    | Purpose of Grant: Equipment and Fixed Asset Acquisition |    | Purpose of Grant: Business Expansion/Startup |

Was the grant expected to result  
in new jobs being created? No  
If yes, how many jobs were planned  
to be created?  
If yes, how many jobs have been  
created to date?

Was the grant expected to result  
in new jobs being created? No  
If yes, how many jobs were planned  
to be created?  
If yes, how many jobs have been  
created to date?



Public Authorities Reporting Information System

**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending:12/31/2015**

**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Grant Information**

|    |  |    |  |
|----|--|----|--|
| 3. | Source of Grant Funds: Not for Profit                                | 4. | Source of Grant Funds: Not for Profit        |
|    | Name of Grant Recipient: Lost Kingdom Brewery dba Finger Lakes Tasti |    | Name of Grant Recipient: The Bridal Barn     |
|    | Address Line1: 31 Main St  |    | Address Line1: 21 N Main St                  |
|    | Address Line2:   |    | Address Line2:                               |
|    | City: CORTLAND   |    | City: HOMER                                  |
|    | State: NY  |    | State: NY                                    |
|    | Zip - Plus4: 13045   |    | Zip - Plus4: 13077                           |
|    | Province/Region:   |    | Province/Region:                             |
|    | Country: USA   |    | Country: USA                                 |
|    | Amount of Grant Award Provided                                       |    | Amount of Grant Award Provided               |
|    | During Reporting Year: \$5,000                                       |    | During Reporting Year: \$5,000               |
|    | Date Grant Awarded: 06/02/2015                                       |    | Date Grant Awarded: 01/08/2015               |
|    | Purpose of Grant: Business Expansion/Startup                         |    | Purpose of Grant: Business Expansion/Startup |

Was the grant expected to result  
in new jobs being created? No  
If yes, how many jobs were planned  
to be created?  
If yes, how many jobs have been  
created to date?

Was the grant expected to result  
in new jobs being created? No  
If yes, how many jobs were planned  
to be created?  
If yes, how many jobs have been  
created to date?



Public Authorities Reporting Information System

**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending:12/31/2015**

Run Date: 03/23/2016  
Status: CERTIFIED

**Grant Information**

5.      Source of Grant Funds: Not for Profit  
Name of Grant Recipient: The Local Food Market  
Address Line1: 37 N Main St  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA
- Amount of Grant Award Provided  
During Reporting Year: \$5,000  
Date Grant Awarded: 11/14/2014  
Purpose of Grant: Business Expansion/Startup

Was the grant expected to result  
in new jobs being created? No  
If yes, how many jobs were planned  
to be created?  
If yes, how many jobs have been  
created to date?



Public Authorities Reporting Information System

**Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015**

**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Loan Information**

1.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: 60 Main LLC dba Brix  
Address Line1: 60 Main St  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$50,000  
Date Loan Awarded: 02/11/2010  
Interest Rate (%): 6  
Length of Loan(# of years  
to repay): 10  
Amount of Loan Principal Repaid  
to Date: \$25,120.47  
Purpose of Loan: Equipment and Fixed Asset Acquisition

2.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: Cortland Foundations LLC  
Address Line1: 75 East Court St  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$50,000  
Date Loan Awarded: 11/10/2014  
Interest Rate (%): 6  
Length of Loan(# of years  
to repay): 3  
Amount of Loan Principal Repaid  
to Date: \$15,679.72  
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

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



**Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015**

**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Loan Information**

3.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: Custom Machining Technology, Inc.  
Address Line1: 839 State Route 13  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$25,000  
Date Loan Awarded: 11/25/2014  
Interest Rate (%): 6  
Length of Loan (# of years to repay): 5  
Amount of Loan Principal Repaid to Date: \$4,420.07  
Purpose of Loan: Business Expansion/Startup

4.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: Delta Investments, a New York Partnership  
Address Line1: 75 E Court St  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$50,047  
Date Loan Awarded: 09/19/2013  
Interest Rate (%): 6  
Length of Loan (# of years to repay): 7  
Amount of Loan Principal Repaid to Date: \$13,316.27  
Purpose of Loan: Equipment and Fixed Asset Acquisition

Was the Loan expected to result in new jobs being created? No  
If yes, how many jobs were planned to be created?

If yes, how many jobs have been created to date?  
Have the terms of the loan been completed? No

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



Public Authorities Reporting Information System

**Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015**

**Run Date: 03/23/2016  
Status: CERTIFIED**

**Loan Information**

5.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: Edward Martin Corp dba MD Deli  
Address Line1: 19 Central Ave  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$60,000  
Date Loan Awarded: 07/07/2009  
Interest Rate (%): 6  
Length of Loan(# of years to repay): 10  
Amount of Loan Principal Repaid to Date: \$13,748.95  
Purpose of Loan: Commercial Property  
Construction/Acquisition/Revitalization/Improvement  
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

6.      Source of Loan Funds: Not for Profit  
Name of Loan Recipient: JAG COURT RECORDING & TRANSCRIPTION SERVIC  
Address Line1: 19-29 MAIN ST  
Address Line2:  
City: CORTLAND  
State: NY  
Zip - Plus4: 13045  
Province/Region:  
Country: USA  
Original Amount of Loan: \$20,000  
Date Loan Awarded: 11/12/2008  
Interest Rate (%): 6  
Length of Loan(# of years to repay): 60  
Amount of Loan Principal Repaid to Date: \$17,761.33  
Purpose of Loan: Commercial Property  
Construction/Acquisition/Revitalization/Improvement  
Was the Loan expected to result in new jobs being created? Yes  
If yes, how many jobs were planned to be created? 5  
If yes, how many jobs have been created to date? 0  
Have the terms of the loan been completed? No



Public Authorities Revolving Information System

**Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015**

Run Date: 03/23/2016  
Status: CERTIFIED

**Loan Information**

|    |   |   |   |  |
|----|---|---|---|--|
| 7. | Source of Loan Funds: Not for Profit<br>Name of Loan Recipient: M D DELI<br>Address Line1: 19 CENTRAL AVE | 8.<br>Source of Loan Funds: Not for Profit<br>Name of Loan Recipient: MARATHON BOAT GROUP<br>Address Line1: PO BOX 549<br>Address Line2:<br>City: MARATHON<br>State: NY<br>Zip - Plus4: 13803<br>Province/Region:<br>Country: USA<br>Original Amount of Loan: \$15,000<br>Date Loan Awarded: 06/11/2008<br>Interest Rate (%): 6 | Length of Loan(# of years<br>to repay): 7<br>Amount of Loan Principal Repaid<br>to Date: \$47,954.47<br>Purpose of Loan: Commercial Property<br>Construction/Acquisition/Revitalization/<br>Improvement<br>Was the loan expected to result<br>in new jobs being created? Yes<br>If yes, how many jobs were planned<br>to be created? 5<br>If yes, how many jobs have been<br>created to date? 5<br>Have the terms of the loan been<br>completed? No | Was the Loan expected to result<br>in new jobs being created? Yes<br>If yes, how many jobs were planned<br>to be created? 7<br>If yes, how many jobs have been<br>created to date? 3<br>Have the terms of the loan been<br>completed? No |
|----|---|---|---|--|

FARIS  
Financial Assistance Reporting Information System

**Annual Report for Cortland County Business Development Corporation**  
**Fiscal Year Ending 12/31/2015**

**Run Date:** 03/23/2016  
**Status:** CERTIFIED

**Loan Information**

|    |  |     |   |
|----|--|-----|---|
| 9. | Source of Loan Funds: Not for Profit                             | 10. | Source of Loan Funds: Not for Profit  |
|    | Name of Loan Recipient: Paul Smith Jr aka Crown City Stove Works |     | Name of Loan Recipient: Prop, Inc.  |
|    | Address Line1: 3901 RT 281                                       |     | Address Line1: 3877 Luker Rd  |
|    | Address Line2:   |     | Address Line2:  |
|    | City: CORTLAND   |     | City: CORTLAND  |
|    | State: NY  |     | State: NY   |
|    | Zip - Plus4: 13045   |     | Zip - Plus4: 13045  |
|    | Province/Region:   |     | Province/Region:  |
|    | Country: USA   |     | Country: USA  |
|    | Original Amount of Loan: \$50,000                                |     | Original Amount of Loan: \$50,000   |
|    | Date Loan Awarded: 01/29/2010                                    |     | Date Loan Awarded: 06/29/2011   |
|    | Interest Rate(%): 6  |     | Interest Rate(%): 6   |
|    | Length of Loan(# of years to repay): 10                          |     | Length of Loan(# of years to repay): 10   |
|    | Amount of Loan Principal Repaid to Date: \$21,472.84             |     | Amount of Loan Principal Repaid to Date: \$50,000.00                                    |
|    | Purpose of Loan: Equipment and Fixed Asset Acquisition           |     | Purpose of Loan: Land Acquisition/Development /Infrastructure Costs (i.e., Water/Sewer) |
|    | Was the Loan expected to result in new jobs being created? No    |     | 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 were planned to be created?                                       |
|    | If yes, how many jobs have been created to date?                 |     | If yes, how many jobs have been created to date?  |
|    | Have the terms of the loan been completed? No                    |     | Have the terms of the loan been completed? Yes  |



**Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015**

Run Date: 03/23/2016  
Status: CERTIFIED

**Loan Information**

11. Source of Loan Funds: Not for Profit

Name of Loan Recipient: cortland plastics int'l

Address Line1: 215 s main st

Address Line2:

City: CORTLAND

State: NY

Zip - Plus4: 13045

Province/Region:

Country: USA

Original Amount of Loan: \$75,000

Date Loan Awarded: 01/25/2007

Interest Rate (\$): 6

Length of Loan(# of Years

to repay): 10

Amount of Loan Principal Repaid

to Date: \$63,767.34

Purpose of Loan: Equipment and Fixed Asset Acquisition

Was the loan expected to result  
in new jobs being created? No

If yes, how many jobs were planned  
to be created?

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

Have the terms of the loan been  
completed? No



PARIS  
Public Authorities Reporting Information System

Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
Status: CERTIFIED

Bond Information

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



Annual Report for Cortland County Business Development Corporation  
Fiscal Year Ending:12/31/2015

Run Date: 03/23/2016  
Status: CERTIFIED

Additional Comments: