Legal Name, Address, and Telephone Number:

ADIRONDACK AQUATIC CENTER, INC. (DBA: CAPITAL REGION AQUATIC CENTER) 21 BELLFLOWER ROAD MALTA, NY 12020 (518) 365-6516

Name of Project Director:

KARA HARADEN

Purpose of Project:

FUNDS WILL BE USED TO COMPLETE THE CONSTRUCTION OF AN AQUATIC FACILITY, WHICH WOULD INCLUDE ANY SITE WORK OR OTHER CONSTRUCTION RELATED COSTS.

Funded Amount:

\$2,500,000

Requested By:

SANTABARBARA

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ALBANY MEDICAL CENTER 43 NEW SCOTLAND AVENUE ALBANY, NY 12208 (518) 262-9590

Name of Project Director:

COURTNEY BURKE

Purpose of Project:

FUNDS WILL BE USED FOR THE PLANNING AND INITIAL CONSTRUCTION OF THE PEDIATRIC EMERGENCY DEPARTMENT AT THE HOSPITAL.

Funded Amount:

\$1,000,000

Requested By:

FAHY, MCDONALD-J

Name of Administering State Agency:

Legal Name	. Address.	and Tele	phone	Number:

ALPHAPOINTE 87-46 123RD STREET RICHMOND HILL, NY 11418 (929) 499-3670

Name of Project Director	Name	ot Pr	oject	Dire	Cto	r
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SCOTT THORNHILL

Purpose of Project:

FUNDS WILL BE USED TO ENHANCE POWER ON 2ND AND 3RD FLOORS, INSTALL HVAC AND IMPROVE AIR FILTRATION SYSTEMS FOR THE MANUFACTURING DEPARTMENTS. FUNDS WILL ALSO BE USED TO RECONSTRUCT FLOORS, AS WELL AS TO COAT WALLS AND CEILINGS FOR DUST REDUCTION, WHICH WILL IMPROVE THE WORK ENVIRONMENT FOR EMPLOYEES WHO ARE BLIND AND VISUALLY IMPAIRED.

Funded Amount:

\$1,200,000

Requested By:

WEPRIN-D

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

AMERICAN MUSEUM OF NATURAL HISTORY 200 CENTRAL PARK WEST NEW YORK, NY 10024 (212) 769-5033

Name of Project Director:

DANIEL SLIPPEN

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT THE GILDER CENTER FOR SCIENCE, EDUCATION, AND INNOVATION.

Funded Amount:

\$5,000,000

Requested By:

AUBRY, BENEDETTO, BLAKE, CRESPO, DINOWITZ, GLICK, GOTTFRIED, LINARES, MARKEY, MOYA, PICHARDO, QUART, RODRIGUEZ, ROSENTHAL-L, SEAWRIGHT, WRIGHT-K

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

AN CLAIDHEAMH SOLUIS, INC., D/B/A IRISH ARTS CENTER 553 WEST 51ST STREET NEW YORK, NY 10019 (212) 757-3318

Name of Project Director:

AIDAN CONNOLLY

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE CONSTRUCTION OF A NEW IRISH ARTS CENTER, WHICH WILL SERVE AS A MULTI-DISCIPLINARY CULTURAL FACILITY INCLUDING TWO PERFORMANCE VENUES, CLASSROOMS, COMMUNITY AND OFFICE SPACES, AS WELL AS REHEARSAL STUDIOS.

Funded Amount:

\$1,000,000

Requested By:

CUSICK

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ARTS CENTER AND THEATRE OF SCHENECTADY, INC., D/B/A PROCTOR'S SCHENECTADY 432 STATE STREET SCHENECTADY, NY 12305 (518) 382-3884

Name of Project Director:

JUSTIN KNUDSEN

Purpose of Project:

FUNDS WILL BE USED TO EXPAND THE MARQUEE POWER SYSTEM. SPECIFICALLY, THIS PROJECT WILL INSTALL NEW HEATING/COOLING EQUIPMENT AND "SMART" ELECTRICAL GRID SWITCHES, AS WELL AS CONNECT ADDITIONAL BUILDINGS TO THE THERMAL DISTRICT.

Funded Amount:

\$500,000

Requested By:

SANTABARBARA, STECK

Name of Administering State Agency:

	Legal Name,	. Address.	and Tele	phone	Number
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ASPHALT GREEN, INC. 555 E. 90TH STREET NEW YORK, NY 10128 (646) 981-2236

Name of Project Director:

MARGARET SIEGEL

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF MAZUR HALL, CONSTRUCTION OF AN INDOOR SOCCER FIELD, CONSTRUCTION OF THE SPORTS PERFORMANCE INSTITUTE, AS WELL AS FOR THE RENOVATION OF THE LOCKER ROOMS, BATHROOMS, SHOWERS AND COMMON AREA.

Funded Amount:

\$250,000

Requested By:

SEAWRIGHT

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BANK STREET COLLEGE OF EDUCATION 1610 WEST 112TH STREET NEW YORK, NY 10025 (212) 875-4518

Name of Project Director	Name	ot Pr	oject	Dire	Cto	r
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JUSTIN TYACK

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE VARIOUS SPACES WITHIN THE EXISTING FACILITY ON 112TH STREET, WHICH WILL ALLOW FOR EXPANDED SERVICES PROVIDED TO STUDENTS, CHILDREN WHO ATTEND AFTER SCHOOL PROGRAMS, AS WELL AS TEACHERS IN TRAINING AT THE GRADUATE SCHOOL. THE PROJECT WILL INCLUDE VARIOUS IMPROVEMENTS TO EXISTING CLASSROOMS AND THE ADDITION OF NEW CLASSROOMS, BOTH OF WHICH WILL BE UTILIZED BY STUDENTS AT THE SCHOOL FOR CHILDREN AND GRADUATE SCHOOL STUDENTS. ADMINISTRATIVE OFFICES AND COMMON SPACES WILL BE ENHANCED, AND ELECTRICAL INFRASTRUCTURE UPGRADES WILL TAKE PLACE DURING THE RENOVATIONS.

Funded Amount:

\$1,500,000

Requested By:

O'DONNELL

Name of Administering State Agency:

Legal Nan	ne, Address	, and Tele	phone	Number:

BOYS & GIRLS CLUB OF ULSTER COUNTY 139 GREENKILL AVENUE KINGSTON, NY 12401 (845) 338-8666

	KINGSTON, NY 12401 (845) 338-8666
Name of Project	ct Director:
	DAN WHALEN
Purpose of Pro	oject:
	FUNDS WILL BE USED TO CONSTRUCT AN INDOOR ICE SKATING RINK
Funded Amou	nt:
	\$3,000,000
Requested By:	:
	CAHILL

Name of Administering State Agency:

	Legal Name,	Address,	and Tele	phone	Number:
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BRENTWOOD PUBLIC LIBRARY 34 SECOND AVENUE BRENTWOOD, NY 11717 (631) 273-7883

Name of Project Director:

THOMAS A. TARANTOWICZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL THE COMPUTERS AND EQUIPMENT NECESSARY TO SET UP AND OPERATE A COMMUNITY-WIDE WI-FI NETWORK SYSTEM WITHIN THE CENTRAL ISLIP COMMUNITY.

Funded Amount:

\$500,000

Requested By:

RAMOS

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BRONX CHILDREN'S MUSEUM P.O. BOX 2381 BRONX, NY 10451 (347) 971-2155

Name of Project Director:

CARLA PRECHT

Purpose of Project:

FUNDS WILL BE USED FOR THE DESIGN, FABRICATION, CONSTRUCTION AND INSTALLATION OF EXTERIOR SIGNAGE AND WAYFINDING ON AND NEARBY THE GROUNDS OF THE MUSEUM. THIS PROJECT WILL HELP TO DIRECT VEHICLES AND PEDESTRIANS TO PARKING, DROPOFF AND PICKUP SITES, AS WELL AS ENTRANCES TO THE BUILDING.

Funded Amount:

\$1,879,243

Requested By:

ARROYO, BENEDETTO, BLAKE, CRESPO, DINOWITZ, GJONAJ, HEASTIE, JOYNER, PICHARDO, RIVERA-J, SEPULVEDA

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BRONX CHILDREN'S MUSEUM P.O. BOX 2381 BRONX, NY 10451 (347) 971-2155

Name of Project Director:

CARLA PRECHT

Purpose of Project:

FUNDS WILL BE USED FOR THE DESIGN, FABRICATION, CONSTRUCTION AND INSTALLATION OF EXTERIOR SIGNAGE AND WAYFINDING ON AND NEARBY THE GROUNDS OF THE MUSEUM. THIS PROJECT WILL HELP TO DIRECT VEHICLES AND PEDESTRIANS TO PARKING, DROPOFF AND PICKUP SITES, AS WELL AS ENTRANCES TO THE BUILDING.

Funded Amount:

\$120,757

Requested By:

ARROYO, BENEDETTO, BLAKE, CRESPO, DINOWITZ, GJONAJ, HEASTIE, JOYNER, PICHARDO, RIVERA-J, SEPULVEDA

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BROOKDALE HOSPITAL MEDICAL CENTER ONE BROOKDALE PLAZA BROOKLYN, NY 11212 (718) 240-7273

Name of Project Director:

KHANI EDWARDS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE DIGITAL MAMMOGRAPHY EQUIPMENT AND AN ULTRASOUND MACHINE.

Funded Amount:

\$350,000

Requested By:

PERSAUD

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BUFFALO HERITAGE CAROUSEL, INC. 324 NIAGARA FALLS BOULEVARD TONAWANDA, NY 14223 (716) 883-0362

Name of Project Director:

SHATORAH DONOVAN

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION OF A HISTORIC HAND-CARVED CAROUSEL.

Funded Amount:

\$600,000

Requested By:

RYAN

Name of Administering State Agency:

Lega	I Name	. Address.	. and '	Telephone	e Number:

CARNEGIE HALL CORPORATION, THE 881 SEVENTH AVENUE NEW YORK, NY 10019 (212) 903-9660

Name of Proj	ect Director:
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DAVID FREUDENTHAL

Purpose of Project:

FUNDS WILL BE USED TO RESTORE CARNEGIE HALL'S HISTORIC FACADE. OVER THREE YEARS, ELEMENTS OF THE BUILDING WILL BE REMOVED AND RESTORED OR REPLICATED OFFSITE AND OTHER FACADE ELEMENTS WILL BE ADDRESSED. THERE WILL BE TERRA COTTA, MASONRY, STONE, AND SHEET METAL RESTORATION OF ALL FACADES OF THE BUILDING AND SELECT WINDOW RESTORATION AND LINTEL/STRUCTURAL STEEL RECONSTRUCTION. FURTHERMORE, THE CAST IRON FIRE ESCAPE ON THE SEVENTH AVENUE FACADE WILL BE RESTORED AS PART OF THIS WORK.

Funded Amount:

\$3,000,000

Requested By:

GOTTFRIED

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

CENTERSTATE CORPORATION FOR ECONOMIC OPPORTUNITY 109 SOUTH WARREN STREET, SUITE 1900 SYRACUSE, NY 13202 (315) 422-8284

Name of Project Director:

ROBERT SIMPSON

Purpose of Project:

FUNDS WILL BE USED TO BUILD OUT OFFICE SPACE IN THE GALLERIES LOCATED AT 441 SOUTH SALINA STREET, SYRACUSE FOR AN EXPANDING COMPANY, TCGPLAYER. FUNDS WILL ALSO BE USED TO PURCHASE ASSOCIATED FURNITURE AND FIXTURES AFTER THE RENOVATION HAS BEEN COMPLETED.

Funded Amount:

\$3,000,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

CENTERSTATE CORPORATION FOR ECONOMIC OPPORTUNITY 115 WEST FAYETTE STREET SYRACUSE, NY 13202 (315) 470-1800

Name of Proj	ect Director:
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LORI DIETZ

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT THE EXPANSION OF THE SYRACUSE TECH GARDEN, INCLUDING THE ADDITION OF A 2ND AND 3RD FLOOR, FLEXIBLE OFFICE SPACE, NEW ENTRANCE, LOBBY AND SUPPORT SPACES, UAS DRONE SPACE, UPDATED MECHANICAL AND SECURITY SYSTEMS AND ACCESS TO A ROOF TERRACE.

Funded Amount:

\$1,000,000

Requested By:

STIRPE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

CHILDREN'S MUSEUM OF MANHATTAN, THE 212 WEST 83RD STREET, THE TISCH BUILDING NEW YORK, NY 10024 (212) 721-1223

Name of Project Director:

STEPH BERNABEI

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A NEW LARGER FACILITY FOR THE CHILDREN'S MUSEUM BY RENOVATING A BUILDING AT 96TH STREET AND CENTRAL PARK WEST. SPECIFICALLY, THESE FUNDS WILL BE USED FOR THE DEMO AND ABATEMENT PHASE OF THE PROJECT.

Funded Amount:

\$1,000,000

Requested By:

O'DONNELL

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

CITY OF BUFFALO 65 NIAGARA SQUARE BUFFALO, NY 14202 (716) 851-4890

Name of Project Director:

MIKE FINN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE CAZENOVIA POOL IN SOUTH BUFFALO.

Funded Amount:

\$1,000,000

Requested By:

BURKE

Name of Administering State Agency:

Legal Name,	Address.	and Tele	phone	Number:

CITY OF MIDDLETOWN 16 JAMES STREET MIDDLETOWN, NY 10940 (845) 346-4170

Name of Project Director:

MARIA BRUNI

Purpose of Project:

FUNDS WILL BE USED TO RESTORE THE FORMER O&W TRAIN STATION LOCATED IN MIDDLETOWN, NY. THIS PROJECT WILL RESTORE THE BUILDING'S EXTERIOR, WHILE THE INTERIOR WILL BE STABILIZED AND RENOVATED.

Funded Amount:

\$2,000,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

CITY OF NIAGARA FALLS 745 MAIN STREET, PO BOX 69 NIAGARA FALLS, NY 14302 (716) 286-4480

Name of Project Director:

ANTHONY VILARDO

Purpose of Project:

FUNDS WILL BE USED TO MAKE VARIOUS STREETSCAPTE IMPROVEMENTS IN THE BUFFALO AVENUE/CAYUGA DRIVE AREA OF THE CITY, AS KNOWN AS THE LASALLE BUSINESS DISTRICT.

Funded Amount:

\$500,000

Requested By:

CERETTO

Name of Administering State Agency:

Legal Name, Address, and Telephone Numb

CITY OF ROCHESTER 30 CHURCH STREET ROCHESTER, NY 14614 (585) 428-6384

Name of Project Director:

HOLLY BARRETT

Purpose of Project:

FUNDS WILL BE USED TO PROVIDE CRITICAL FACILITY UPGRADES DESIGNED TO IMPROVE THE FAN EXPERIENCE AT THE BLUE CROSS ARENA AT THE WAR MEMORIAL. IMPROVEMENTS INCLUDE BUT ARE NOT LIMITED TO: UPGRADES TO HVAC, LIGHTING, SOUND, VIDEO AND RELATED SYSTEMS; UPGRADES TO RESTROOM FINISHES AND INCREASING HANDICAPPED ACCESSIBILITY; THE ADDITION OF CLUB SPACE AND SEATING; AND THE INSTALLATION OF A LED RIBBON IN THE BOWL SEATING AREA.

Funded Amount:

\$3,500,000

Requested By:

BRONSON, MORELLE

Name of Administering State Agency:

CORTLAND REGIONAL MEDICAL CENTER 134 HOMER AVENUE CORTLAND, NY 13045 (607) 756-3506

Name of Proj	ject Director:
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DENISE WRINN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE COMPUTERS AND SURGICAL SOFTWARE TO REPLACE THE VASTLY OUTDATED TECHNOLOGY THAT IS CURRENTLY BEING UTILIZED. IN ADDITION, FUNDS WILL ALSO BE USED TO PURCHASE AND INSTALL A VIDEO SYSTEM FOR THE MAIN OPERATING ROOM, WHICH WILL PROVIDE FOR A MUCH HIGHER QUALITY VISUALIZATION OF SURGICAL PROCEDURES.

Funded Amount:

\$450,000

Requested By:

LIFTON

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

CULTURAL MUSEUM OF AFRICAN ART, INC. - THE ERIC EDWARDS COLLECTION
213 TAFFE PLACE, SUITE 111
BROOKLYN, NY 11205
(718) 399-9053

Name of Project Director:

ERIC EDWARDS

Purpose of Project:

FUNDS WILL BE USED FOR THE CREATION OF A NEW MUSEUM, INCLUDING DESIGN, CONSTRUCTION, AND FFE. IN ADDITION, FUNDS WILL ALSO BE USED TO PURCHASE EQUIPMENT TO PROVIDE EDUCATIONAL PROGRAMMING TO THE GENERAL PUBLIC.

Funded Amount:

\$1,000,000

Requested By:

ZINERMAN

Name of Administering State Agency:

Legal Name, Address, and Telephone Numb

EL PUENTE DE WILLIAMSBURG, INC. 211 SOUTH 4TH STREET BROOKLYN, NY 11211 (718) 387-0404

Name of Project Director:

LUIS GARDEN ACOSTA

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE INTERIOR OF THE CENTER INCLUDING PLUMBING, ELECTRICAL, HEATING, MECHANICAL UPGRADES, AND ENHANCEMENTS TO THE OVERALL STRUCTURE.

Funded Amount:

\$250,000

Requested By:

DAVILA

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ELLIS HOSPITAL (D/B/A: ELLIS MEDICINE) 1101 NOTT STREET SCHENECTADY, NY 12308 (518) 243-4144

Name of Project Director:

MARC MESICK

Purpose of Project:

CONSTRUCTION OF A PARKING GARAGE AT THE NOTT STREET CAMPUS.

Funded Amount:

\$1,000,000

Requested By:

STECK

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

EVERSON MUSEUM OF ART OF SYRACUSE AND ONONDAGA COUNTY 401 HARRISON STREET SYRACUSE, NY 13202 (315) 474-6064

Name of Project Director:

ELIZABETH DUNBAR

Purpose of Project:

FUNDS WILL BE USED TO MAKE VARIOUS IMPROVEMENTS TO THE MUSEUM'S BUILDING. THIS PROJECT INCLUDES EXTERIOR RENOVATIONS TO THE BUILDING'S FACADE, MAKING THE BUILDING ADA COMPLIANT, REPLACING THE ENTRANCE DOORS, RENOVATION OF THE AUDITORIUM AND INTERNAL ROOMS, AS WELL AS UPDATING THE HVAC AND ALARM SYSTEMS.

Funded Amount:

\$1,500,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

	Legal Name,	Address.	and Tele	enong	Number:
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GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE, 9TH FLOOR NEW YORK, NY 10001 (212) 243-7070

Name of Project Director:

AMY COHEN

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT EXPENSIVE RENOVATIONS IN THE FACILITY, INCLUDING REHABILITATION, DEMOLITION OF THE KITCHENS AND BATHROOMS, INSTALLATION OF CEMENT BASE FLOORS, AND ASSOCIATED ELECTRICAL WORK.

Funded Amount:

\$250,000

Requested By:

RODRIGUEZ

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

GREATER HARLEM HOUSING DEVELOPMENT CORPORATION 200 A WEST 136TH STREET NEW YORK, NY 10030 (212) 862-8299

Name of Project Director:

CHARLES POWELL

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND PRESERVE LOW INCOME HOUSING FACILITIES.

Funded Amount:

\$650,000

Requested By:

FARRELL, JR, WRIGHT-K

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

HARLEM CONGREGATIONS FOR COMMUNITY IMPROVEMENT, INC. 2854 FREDERICK DOUGLASS BOULEVARD NEW YORK, NY 10039 (212) 281-4887

Name of Project Director:

DEREK E. BROOMES

Purpose of Project:

FUNDS WILL BE USED TO BUILD OUT A DAY CARE FACILITY AT 260-262 WEST 153RD STREET, WHICH WILL SERVE THE BRAD HURST AREA OF CENTRAL HARLEM.

Funded Amount:

\$500,000

Requested By:

FARRELL, JR

Name of Administering State Agency:

	Legal Name,	Address.	and Tele	enong	Number:
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HASC CENTER, INC. 5601 FIRST AVENUE BROOKLYN, NY 11220 (718) 745-7575

Name of	Projec	ct Directo	or:
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SAMUEL KAHN

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A RESIDENCE WITH A TEN BED CAPACITY TO SERVE AS A YEAR-ROUND OVERNIGHT RESPITE HOME ON WEEKENDS AND HOLIDAYS FOR CHILDREN AND YOUNG ADULTS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AGED 6 THROUGH 21. THE RESIDENCE WILL HAVE EIGHT BEDROOMS, THREE BATHROOMS, TWO KITCHENS, LIVING ROOM, DINING ROOM, RECREATION AREA, MEDICATION AND A NURSING STATION, AS WELL AS OFFICE SPACE.

Funded Amount:

\$250,000

Requested By:

HIKIND

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

HISPANIC HERITAGE COUNCIL OF WESTERN NEW YORK, INC. P.O. BOX 361 BUFFALO, NY 14021 (716) 912-3489

Name of Project Director:

CASIMIRO D. RODRIGUEZ, SR.

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A BUILDING FOR THE HISPANIC HERITAGE CULTURAL INSTITUTE, WHICH WILL INCLUDE A MUSEUM, ART GALLERY, CAFE, ACTIVITIES HALL, THEATER, CONFERENCE ROOMS, MEDIA CENTER, OFFICES AND OTHER INTERIOR FACILITIES.

Funded Amount:

\$2,500,000

Requested By:

DAVILA, RIVERA-J

Name of Administering State Agency:

	Legal Name,	. Address.	and Tele	phone	Number
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HISTORIC HUDSON RIVER TOWNS 180 ROUTE 100 KATONAH, NY 10536 (914) 760-8067

Name of Project Director:

JERRY FAIELLA

Purpose of Project:

FUNDS WILL BE USED TO IMPLEMENT A BUILDING STABILIZATION PROGRAM FOR THE 1825 CELL BLOCK AND 1936 POWER HOUSE AT SING SING CORRECTIONAL FACILITY. THE PURPOSE OF THE PROJECT IS TO PRESERVE THESE TWO HISTORICALLY SIGNIFICANT LANDMARK BUILDINGS FOR FUTURE USE AS THE SING SING PRISON MUSEUM.

Funded Amount:

\$1,000,000

Requested By:

GALEF

Name of Administering State Agency:

	Legal Name,	Address.	and Tele	enong	Number:
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HUDSON OPERA HOUSE, INC. 327 WARREN STREET HUDSON, NY 12534 (518) 822-1438

Name of Project Director:

GARY SCHIRO

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION OF THE HUDSON OPERA HOUSE. THIS PROJECT WILL REHABILITATE THE HISTORIC 2ND FLOOR PERFORMANCE HALL AND MAKE THE BUILDING EASILY ASSESSABLE. THE RESTORED HALL WILL QUADRUPLE AUDIENCE CAPACITY AND ALLOW THE HOUSE TO IMPROVE THE LEVEL AND SCOPE OF PROGRAMING.

Funded Amount:

\$500,000

Requested By:

BARRETT

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

INTREPID MUSEUM FOUNDATION ONE INTREPID SQUARE, W. 46TH STREET AND 12TH AVENUE NEW YORK, NY 10036 (646) 381-5253

Name of Project Director:

IRENE TSITKO

Purpose of Project:

FUNDS WILL BE USED FOR THE DECONSTRUCTION AND REPLACEMENT OF THE 4.020-SQUARE-FOOT PLATFORM BENEATH THE NOW DECOMMISSIONED CHILLER-HVAC PLANT BUILDING ON THE PIER. THIS SECTION OF THE PIER WAS ORIGINALLY BUILT MORE THAN 80 YEARS AGO AND IS SUPPORTED BY SEVERELY DETERIORATED WOOD PILINGS. THE SCOPE OF WORK WILL INCLUDE: 1) ENGINEERING DESIGN AND REVIEWS: 2) DECONSTRUCTION OF THE DECOMMISSIONED BUILDING AND THE OLD PIER STRUCTURE BENEATH THE BUILDING: AND 3) MARINE CONSTRUCTION. BY REMOVING THE DECOMMISSIONED CHILLER AND REBUILDING THE SURROUNDING AREA OF THE PIER, THE PROJECT WILL: 1) MAKE ADDITIONAL SPACE AVAILABLE FOR THE MUSEUM'S VISITORS TO ENJOY: 2) ENCOURAGE INCREASED PUBLIC ACCESS TO THE CITY/STATE-OWNED WATERFRONT; 3) PROVIDE A MUCH-NEEDED FOOTPRINT FOR STAGING CULTURAL AND EDUCATIONAL PROGRAMS, EXHIBITIONS AND EVENTS FOR THE PUBLIC.

Funded Amount:

\$1,000,000

Requested By:

DENDEKKER, GOTTFRIED, HUNTER, QUART, ROSENTHAL-L, SEAWRIGHT

Name of Administering State Agency:

	Legal Name,	Address.	and Tele	enong	Number:
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JEWISH MUSEUM, THE 1109 FIFTH AVENUE NEW YORK, NY 10128 (212) 423-3227

Name of Proj	ject Director:
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ELYSE BUXBAUM

Purpose of Project:

FUNDS WILL BE USED TO REPLACE THE ROOFS OF THE MANSION AND THE ADJACENT TOWNHOUSE. FUNDS WILL ALSO BE USED TO RESTORE THE MANSION'S FACADE, AS WELL AS FOR BROWNSTONE RECONSTRUCTION ON THE TOWNHOUSE. THESE IMPROVEMENTS WILL PRESERVE THE HISTORIC INTEGRITY OF THE LANDMARK STRUCTURE.

Funded Amount:

\$275,000

Requested By:

QUART

Name of Administering State Agency:

Legal Name	. Address.	and Tele	phone	Number:

KINGS BAY YM-YWHA, INC. 3495 NOSTRAND AVENUE BROOKLYN, NY 11229 (718) 648-7703

Name of Project Director:

ERICA GILERMAN

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF THE SWIMMING POOL AND OTHER FACILITIES. THIS PROJECT WOULD INCLUDE THE ROOF, VENTILATION SYSTEM AND FILTRATION SYSTEM OF THE POOL.

Funded Amount:

\$250,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

LOWER EAST SIDE GIRLS CLUB 101 AVENUE D, SUITE 12E NEW YORK, NY 10009 (212) 982-1633

Name of Project Director:

ADRIANA PEZZULLI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND ANNEX GROUND FLOOR SPACES THAT ARE PHYSICALLY ADJACENT TO THE CURRENT ORGANIZATIONAL FACILITY. THIS PROJECT WILL OPEN TWO NEW COMMUNITY PROGRAMS AS A RESULT OF THE PURCHASE AND RENOVATION OF SUCH SPACES.

Funded Amount:

\$250,000

Requested By:

KAVANAGH

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

LOWER EASTSIDE GIRLS CLUB OF NEW YORK, INC. 402 EAST 8TH STREET NEW YORK, NY 10019 (212) 982-1633

Name of Project Director:

EBONIE SIMPSON

Purpose of Project:

FUNDS WILL BE USED TO FULLY OUTFIT THE LEARNING LABS AND FACILITIES OF THE BROWNSVILLE GIRLS EMPOWERMENT CENTER.

Funded Amount:

\$1,500,000

Requested By:

WALKER-L

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

MAIMONIDES MEDICAL CENTER 4802 TENTH AVENUE BROOKLYN, NY 11219 (718) 283-3993

Name of Project Director:

HELEN FABRIZIO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A LINEAR ACCELERATOR (LINAC) FOR THE CANCER CENTER.

Funded Amount:

\$3,000,000

Requested By:

ABBATE, BARRON-C, BICHOTTE HERMELYN, BRENNAN, COLTON, CYMBROWITZ-S, DAVILA, DILAN, HARRIS, HIKIND, LENTOL, MOSLEY, ORTIZ, PERRY, RICHARDSON, ROBINSON, SIMON, WALKER-L, WEINSTEIN

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

MERCY FLIGHT CENTRAL 2420 BRICKYARD ROAD CANANDAIGUA, NY 14424 (585) 396-0584

Name of Project Director:

JEFF BARTKOSKI

Purpose of Project:

FUNDS WILL BE USED FOR HELICOPTER AMBULANCE ENGINE RECONSTRUCTION.

Funded Amount:

\$100,000

Requested By:

KOLB

Name of Administering State Agency:

Legal Name,	Address,	, and Tele	phone	Number
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MID-ISLAND LITTLE LEAGUE, INC. 3665 VICTORY BOULEVARD STATEN ISLAND, NY 10314 (917) 846-9134

Name of Project Director:

JOE CALABRESE

Purpose of Project:

FUNDS WILL BE USED TO MAKE IMPROVEMENTS TO VARIOUS BASEBALL FIELDS, INCLUDING ADDRESSING EROSION ISSUES ON TWO FIELDS, REPLACING THE TURF ON ALL FOUR FIELDS, AND UPGRADING THE ENTIRE COMPLEX.

Funded Amount:

\$2,000,000

Requested By:

CUSICK

Name of Administering State Agency:

Legal Name, Address, and Telephone Number

MOHAWK VALLEY LATINO ASSOCIATION 28 SCOTT STREET UTICA, NY 13501 (315) 864-8419

Name of Project Director	Name	ot Pr	oject	Dire	Cto	r
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C. SONIA MARTINEZ

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A MOHAWK VALLEY COMMUNITY AND CULTURAL RESOURCE CENTER. THIS CENTER WILL SERVE AS THE SUPPORT NEXUS FOR LATINO RESIDENTS IN THIS REGION AND WILL PROVIDE WRAP AROUND SAFETY NET SERVICES AND TRANSITIONAL HOUSING TO AID THE LATINO RESIDENT IN INCREASING FINANCIAL STABILITY AND SUSTAINABILITY. IT WILL ALSO SERVE AS THE CULTURAL HUB TO CELEBRATE THE RICH AND IMPACTFUL CONTRIBUTIONS OF THE LATINO COMMUNITY.

Funded Amount:

\$500,000

Requested By:

BUTTENSCHON

Name of Administering State Agency:

Legal Name, Address, and Telephone Number

MORRIS HEIGHTS HEALTH CENTER 85 WEST BURNSIDE AVENUE BRONX, NY 10453 (718) 483-1270

Name of Project Director:

CLAUDETTE B. PHIPPS

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE HEALTH CARE CENTER AND PURCHASE OF DENTAL EQUIPMENT. COMPLETION OF THIS PROJECT WILL ALLOW THE CENTER TO EXPAND SERVICES TO AN AREA THAT CURRENTLY HAS NO ACCESS TO SAFETY NET DENTAL SERVICES, AND SUFFERS FROM MULTIPLE ORAL HEALTH-RELATED DISPARITIES.

Funded Amount:

\$1,000,000

Requested By:

HEASTIE

Name of Administering State Agency:

Legal Name	. Address.	and Tele	phone	Number:

MORRIS HEIGHTS HEALTH CENTER, INC. 85 WEST BURNSIDE AVENUE BRONX, NY 10453 (718) 483-1270

Name of Project Director:

STEVEN FASS

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT AN INTEGRATIVE HEALTH AND WELLNESS CENTER THAT WILL INTEGRATE PREVENTIVE SERVICES, ADVANCED PRIMARY CARE, COMPLEMENTARY AND ALTERNATIVE MEDICINE, AND SERVICES THAT ADDRESS THE LEADING SOCIAL DETERMINANTS OF HEALTH.

Funded Amount:

\$1,000,000

Requested By:

PICHARDO

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK BOTANICAL GARDEN 2900 SOUTHERN BOULEVARD BRONX, NY 10458 (718) 817-8850

Name of Project Director:

ANNEMARIE BLANCATO

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A NEW CLASSROOM AND GARDEN FACILITY FOR THE EDIBLE ACADEMY. COMPLETION OF THIS PROJECT WILL HELP BRONX SCHOOL CHILDREN AND THEIR FAMILIES LEARN ABOUT HEALTHFUL AND NUTRITIOUS FOOD OPTIONS, THROUGH LESSONS IN VEGETABLE GARDENING.

Funded Amount:

\$1,000,000

Requested By:

ARROYO, BENEDETTO, BLAKE, CRESPO, DINOWITZ, GJONAJ, HEASTIE, JOYNER, PICHARDO, RIVERA-J, SEPULVEDA

Name of Administering State Agency:

NEW YORK BOTANICAL GARDEN 2900 SOUTHERN BOULEVARD BRONX, NY 10458 (718) 817-8542

Name of Proj	ect Director:
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AARON BOUSKA

Purpose of Project:

FUNDS WILL BE USED TO REDESIGN AND RENOVATE THE CHILDREN'S ADVENTURE GARDEN, A NINE ACRE SITE FOR TEACHING SCIENCE AND ECOLOGY TO STUDENTS. SPECIFICALLY, THIS PROJECT WILL RENOVATE THE INTERIOR OF TWO BUILDINGS AND RESTORE BOTH BUILDING'S EXTERIOR FACADES. IN ADDITION, A NEW FAMILY RESTROOM WILL BE CONSTRUCTED, OUTDOOR LEARNING SPACES FOR CHILDREN WILL BE CREATED, AND SIGNAGE WILL BE INSTALLED.

Funded Amount:

\$2,000,000

Requested By:

DINOWITZ

Name of Administering State Agency:

Legal Name, Address	, and Tele	phone	Number:
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NEW YORK CITY BOARD OF EDUCATION 335 ADAMS STREET, 29TH FLOOR BROOKLYN, NY 11201 (718) 935-4450

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE COMPUTERS FOR THE ACADEMY FOR LANGUAGE AND TECHNOLOGY (\$125,000), THE FAMILY SCHOOL (\$125,000), THE HIGHBRIDGE SCHOOL (\$125,000), AND AND I.S. 229 - THE ROLAND PATTERSON SCHOOL (\$125,000) IN THE BRONX.

Funded Amount:

\$500,000

Requested By:

JOYNER

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION 1400 PELHAM PARKWAY SOUTH, BUILDING 4, 12TH FLOOR, RM 12S17 BRONX, NY 10461 (646) 816-5128

Name of Project Director:

MARIA ARIAS-CLARKE

Purpose of Project:

FUNDS WILL BE USED TO CREATE A COMMUNITY CENTER AT THE JACOBI MEDICAL CENTER. SPECIFICALLY, AN OLD GYMNASIUM LOCATED IN THE CELLAR OF BUILDING 4 WILL BE RECONDITIONED AND INCLUDE A NEW FITNESS AND EXERCISE EQUIPMENT, WHEELCHAIR ACCESSIBILITY ENTRANCES, NEW SELF-CONTAINED HEATING AND COOLING ROOFTOP AHU WITH STRUCTURAL FRAMEWORK TO SUPPORT THEM, NEW LED LIGHTS, PLUMBING FIXTURES, SPRINKLERS AND FA DEVICES AND RESTORATION OF THE FLOOR.

Funded Amount:

\$1,000,000

Requested By:

GJONAJ

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK PUBLIC LIBRARY, ASTOR, LENOX AND TILDEN FOUNDATIONS 445 FIFTH AVENUE NEW YORK, NY 10016 (212) 930-0051

Name	of	Pro	ject	Dire	ctor:
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GEORGE MIHALTSES

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL TECHNOLOGY HARDWARE FOR THREE PUBLIC LIBRARIES (INWOOD, FORT WASHINGTON, AND WASHINGTON HEIGHTS). BOTH INWOOD AND FORT WASHINGTON LIBRARIES WOULD RECEIVE NEW LAPTOPS, LAPTOP CARTS, AND ASSOCIATED ELECTRICAL WORK WILL BE PERFORMED. THE WASHINGTON HEIGHTS LIBRARY WOULD USE FUNDS TO RENOVATE THE 3RD FLOOR, AS WELL AS TO PURCHASE TECHNOLOGY EQUIPMENT.

Funded Amount:

\$375,000

Requested By:

LINARES

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK SHAKESPEARE FESTIVAL, D/B/A THE PUBLIC THEATER 425 LAFAYETTE STREET NEW YORK, NY 10003 (212) 534-8732

Name of	Projec	ct Directo	or:
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ROSALIND BARBOUR

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE DELACORTE THEATERE, INCLUDING INFRASTRUCTURE UPGRADES. FUNDS WILL ALSO BE USED TO PURCHASE EQUIPMENT SERVING BOTH PRODUCTION AND OPERATIONS AT THE THEATER. SPECIFIC UPGRADES PLANNED INCLUDE THE REPLACEMENT OF THE SHOW DECK, THE ADDITION OF HEAT TRACERS ALONG PIPING TO PREVENT SERVER WINTER WEATHER DAMAGE BETWEEN SEASONS, NEW LIGHTING AND AUDIO EQUIPMENT INCLUDING DIMMERS AND MICROPHONES TO BETTER SUPPORT THE PRODUCTION NEEDS OF THE DELACORTE'S SHOWS AND ADDITIONAL ASSISTANCE LISTENING DEVICES.

Funded Amount:

\$250,000

Requested By:

O'DONNELL

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK STATE LEGISLATIVE BILL DRAFTING COMMISSION CAPITOL BUIDLING, ROOM 308 ALBANY, NY 12224 (518) 455-7506

Name of Project Director:

PAUL NARKIEWICZ

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HIGH SPEED AND OTHER TYPES OF PRINTERS, COMPUTER EQUIPMENT, LAN NETWORK EQUIPMENT, AS WELL AS ASSOCIATED TECHNOLOGY UPGRADES.

Funded Amount:

\$6,000,000

Requested By:

HEASTIE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK STRUCTURAL BIOLOGY CENTER, INC. 89 CONVENT AVENUE, PARK BUILDING AT 133 STREET NEW YORK, NY 10027 (212) 926-8548

Name of Project Director:

WILLA APPEL

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION AND EXPANSION OF THE SIMONS CRYOELECTRON MICROSCOPY CENTER. FUNDS WILL ALSO BE USED TO PURCHASE RESEARCH EQUIPMENT FOR THE CENTER.

Funded Amount:

\$5,000,000

Requested By:

WRIGHT-K

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK UNITED JEWISH ASSOCIATION, INC. 2076 FLATBUSH AVENUE BROOKLYN, NY 11234 (718) 407-1832

Name of Project Director:

MICHAEL (MENDY) RINKOFF

Purpose of Project:

FUNDS WILL BE USED TO REBUILD THE FIRST AND SECOND FLOOR OF THE BUILDING, AS WELL AS THE GYMNASIUM OF THE JCC OF MARINE PARK COMMUNITY CENTER.

Funded Amount:

\$250,000

Requested By:

PERSAUD

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NORTH SYRACUSE CENTRAL SCHOOL DISTRICT 5355 WEST TAFT ROAD NORTH SYRACUSE, NY 13212 (315) 218-2119

Name of Proj	ect Director:
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DON KEEGAN

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT VARIOUS CAPITAL IMPROVEMENTS AND UPGRADES THROUGHOUT THE DISTRICT. SPECIFICALLY, FUNDS WILL BE USED TO PURCHASE A NEW SOUND SYSTEM AT THE HIGH SCHOOL STADIUM AND WITHIN THE GYMS AT THE HIGH SCHOOL, NORTH SYRACUSE JUNIOR HIGH, ROXBORO ROAD MIDDLE SCHOOL, AND GILLETTE ROAD MIDDLE SCHOOL. IN ADDITION, FUNDS WILL ALSO BE USED TO PROVIDE VARIOUS TECHNOLOGICAL UPGRADES, AS WELL AS A NEW BACK-UP POWER GENERATOR. FURTHERMORE, FUNDS WILL BE USED TO REPLACE AND UPGRADE SIGNAGE, PURCHASE AND INSTALL SMART BOARDS FOR ALL GYMS, REPLACE THREE SCORE BOARDS, AND REPLACE THE BLEACHERS AT THE C-NS GYM.

Funded Amount:

\$520,000

Requested By:

STIRPE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ONONDAGA HISTORICAL ASSOCIATION 321 MONTGOMERY STREET SYRACUSE, NY 13202 (315) 428-1864

Name of Project Director:

LISA MOORE & GREGG TRIPOLI

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FACILITY, INCLUDING HEATING SYSTEM, BOILERS, HVAC, ELECTRICAL, AIR CONDITIONING, WATER HEATING, CEILING, LIGHTING, SPRINKLERS, GAS HEAT, VENTILATION, HUMIDIFICATION, WALLS, PAINTING, FLOORING, INFILL THE COURTYARD WITH A STRUCTURAL FRAME AND ROOF, WINDOWS, REPLACING THE ROOF, AND CREATING A KITCHEN AREA AND BATHROOMS.

Funded Amount:

\$3,000,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

QUEENS BOTANICAL GARDEN SOCIETY, INC., THE 43-50 MAIN STREET FLUSHING, NY 11355 (718) 886-3800

Name of Project Director:

SUSAN LACERTE

Purpose of Project:

FUNDS WILL BE USED FOR THE EXTERIOR IMPROVEMENTS TO THE KIDS CULTURE AND EDUCATION GARDEN, AS WELL AS THE EDUCATION CENTER.

Funded Amount:

\$1,000,000

Requested By:

MARKEY

Name of Administering State Agency:

Legal Name	. Address.	and Tele	phone	Number:

RENAISSANCE YOUTH CENTER 3485 THIRD AVENUE BRONX, NY 10456 (718) 450-3466

Name of Project Director	Name	of Pro	ject L	Directo	or:
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BERVIN HARRIS

Purpose of Project:

FUNDS WILL BE USED TO ASSIST IN THE IMPROVEMENT OF THE CENTER'S BUILDING LOCATED AT 3485 THIRD AVENUE IN THE BRONX. SPECIFICALLY, THESE FUNDS WILL ASSIST IN EXPANDING A SCIENCE ROOM FOR THE STEM AFTER-SCHOOL PROGRAM, BUILDING AN AVIATION LAB AND A DANCE FLOOR, IN ADDITION TO ACADEMIC CLASSROOMS.

Funded Amount:

\$500,000

Requested By:

BLAKE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

SEVENTH REGIMENT ARMORY CONSERVANCY, INC. (D/B/A PARK AVENUE ARMORY)
643 PARK AVENUE
NEW YORK, NY 10065
(212) 616-3937

Name	of	Pro	ject	Dire	ctor:
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KIRSTEN REOCH

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE ARMORY'S FACILITY. SPECIFICALLY, THIS PROJECT WILL REMOVE THREE TO FOUR COURSES OF BRICK WHERE THE ROOF MEETS THE WALL OF THE BUILDING, INSERT COPPER COUNTER FLASHING INTO THE BRICK, REPLACE THE BRICK AND SEAL THE ROOF MEMBRANE. FUNDS WILL ALSO BE USED TO REMOVE OBSOLETE FIRE ESCAPES.

Funded Amount:

\$1,000,000

Requested By:

QUART

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

SIMON WIESENTHAL CENTER, INC. 11 BROADWAY, SUITE 766 NEW YORK, NY 10004 (212) 697-1180

Name of Project Director:

MICHAEL COHEN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND RETROFIT THE APPROPRIATE SIZED VEHICLE, AS WELL AS TO PURCHASE THE ASSOCIATED TECHNOLOGY. WHEN COMPLETED, THIS VEHICLE WILL SERVE AS A MOBILE MUSEUM OF TOLERANCE.

Funded Amount:

\$1,500,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ST. FRANCIS COLLEGE 180 REMSEN STREET BROOKLYN, NY 11201 (718) 489-5370

Name of Project Director:

LINDA WERBEL

Purpose of Project:

FUNDS WILL BE USED FOR PHASE III OF CONSTRUCTION ON THE EILEEN C. DUGAN LIFE SCIENCES CENTER AT THE BROOKLYN HEIGHT CAMPUS. THE EILEEN C. DUGAN LIFE SCIENCES CENTER WILL BE A WORLD-CLASS RESEARCH AND TEACHING FACILITY DEDICATED TOWARDS CREATING TRANSFORMATIONAL LIFE-SCIENCES LEADERS FOR CAREERS IN BIO-SCIENCES AND NURSING.

Funded Amount:

\$1,000,000

Requested By:

ABBATE, BARRON-C, BICHOTTE HERMELYN, BRENNAN, COLTON, CYMBROWITZ-S, DAVILA, DILAN, HARRIS, HIKIND, LENTOL, MOSLEY, ORTIZ, PERRY, RICHARDSON, ROBINSON, SIMON, WALKER-L, WEINSTEIN

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ST. GEORGE THEATRE RESTORATION, INC. 35 HYATT STREET STATEN ISLAND, NY 10301 (718) 442-2900

Name of Project Director:

DOREEN CUGNO

Purpose of Project:

FUNDS WILL BE USED TO RESTORE THE FACILITY'S INTERIOR, INCLUDING THE GRAND CHANDELIERS, MARBLE, INTERIOR WALLS, AS WELL AS TO REPLACE THE HISTORIC FLOORING.

Funded Amount:

\$1,000,000

Requested By:

FALL

Name of Administering State Agency:

STATE UNIVERSITY OF NEW YORK AT NEW PALTZ 1 HAWK DRIVE NEW PALTZ, NY 12561 (845) 257-2901

Name of Project Director	Name	of Pro	ject L	Directo	or:
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GERALD BENJAMIN

Purpose of Project:

FUNDS WILL BE USED TO ESTABLISH SCIENCE AND TECHNOLOGY CENTERS IN VARIOUS PUBLIC SCHOOL DISTRICTS INCLUDING THE KINGSTON CSD, NEW PALTZ CSD, ONTEORA CSD, RED HOOD CSD, RHINEBECK CSD, RONDOUT VALLEY CSD, AND ULSTER BOCES. THIS PROJECT WILL PROVIDE CAPITAL IMPROVEMENTS AND ALTERATIONS FOR THESE CENTERS, AS WELL AS PURCHASE FURNITURE, COMPUTERS, 3-D PRINTERS AND OTHER EQUIPMENT.

Funded Amount:

\$500,000

Requested By:

CAHILL

Name of Administering State Agency:

TOGETHER WE ARE 1569 47TH STREET BROOKLYN, NY 11219 (718) 427-2012

Name of Project Director:

JOEL ROSENFELD

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OFFICE SPACE, AS WELL AS ADDITIONAL OFFICE SPACE FOR ORGANIZATIONAL OPERATIONS.

Funded Amount:

\$750,000

Requested By:

HIKIND

Name of Administering State Agency:

Legal Name	e. Address	, and Tele	phone	Number:

UNITED JEWISH ORGANIZATION OF WILLIAMSBURG, INC. 32 PENN STREET BROOKLYN, NY 11211 (718) 643-9700

Name of Proj	ject Director:
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DAVID KATZ

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF OFFICE SPACE LOCATED AT 498 BEDFORD AVENUE IN BROOKLYN.

Funded Amount:

\$250,000

Requested By:

LENTOL

Name of Administering State Agency:

Legal Name, Address	, and Tele	phone	Number:
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UNIVERSAL HIP HOP MUSEUM P.O. BOX 6001 BRONX, NY 10451 (347) 454-2793

Name of Project Director:

DANIEL ROCKY BUCANO

Purpose of Project:

FUNDS WILL BE USED TO SUPPORT CONSTRUCTION COSTS RELATED TO THE INTERIOR FIT OUT OF THE UNIVERSAL HIP HOP MUSEUM LOCATED AT 575 EXTERIOR STREET, BRONX, NY 10451. EXPENSES RELATED TO CONSTRUCTION OF THE FIT OUT INCLUDES, BUT IS NOT LIMITED TO: ARCHITECTURAL; ENGINEERING; MECHANICAL; ELECTRICAL; HVAC SYSTEM; PLUMBING; AND LIGHTING.

Funded Amount:

\$2,000,000

Requested By:

JOYNER

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

VILLAGE OF HUDSON FALLS 220 MAIN STREET HUDSON FALLS, NY 12839 (518) 747-5426

Name of Project Director:

JOHN BARTON

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF THE FORMER WASHINGTON COUNTY COURTHOUSE PROPERTIES TO SERVE AS A COMMUNITY AND YOUTH CENTER.

Funded Amount:

\$250,000

Requested By:

WOERNER

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

YOUNG MEN'S & YOUNG WOMEN'S HEBREW ASSOCIATION, (D/B/A 92ND STREET Y)
1395 LEXINGTON AVENUE
NEW YORK, NY 10128
(212) 415-5593

Name	of	Pro	ject	Dire	ctor:
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JIM O'HARA

Purpose of Project:

FUNDS WILL BE USED TO RECONFIGURE AND RENOVATE THE WOMEN'S AND MEN'S RESTROOMS ON THE SECOND FLOOR OF THE FACILITY. THIS PROJECT WILL IMPROVE THE USE OF SPACE IN THE RESTROOMS WHILE ALSO REDUCING WATER USE, AND BRINGING THE RESTROOMS INTO ADA COMPLIANCE.

Funded Amount:

\$500,000

Requested By:

QUART

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

YOUNG MEN'S CHRISTIAN ASSOCIATION OF GREATER NEW YORK 5 WEST 63RD STREET, 6TH FLOOR NEW YORK, NY 10023 (212) 630-9640

Name of Project Director:

SHARON LEVY

Purpose of Project:

FUNDS WILL BE USED TO COVER CONSTRUCTION COSTS ASSOCIATED WITH RENOVATIONS AND UPGRADES AT TWO YMCA BRANCHES: THE CASTLE HILL YMCA, LOCATED IN THE BRONX, AND THE STATEN ISLAND-BROADWAY YMCA. SPECIFICALLY, THE CASTLE HILL FACILITY WILL UNDERGO IMPROVEMENTS TO BOTH INDOOR AND OUTDOOR SPACES, INCLUDING BUT NOT LIMITED TO, OUTDOOR POOLS, PLAY SPACES, INDOOR LOCKER ROOMS, HEALTH AND WELLNESS SPACES, AS WELL AS MECHANICAL EQUIPMENT. THE STATEN ISLAND BROADWAY FACILITY WILL UNDERGO A SERIES OF IMPROVEMENTS THAT INCLUDE INSTALLATION OF NEW ROOFING SYSTEMS, IMPROVEMENTS TO TWO GYMNASIUMS, THE AQUATIC CENTER AND INVESTMENTS INTO MEMBER AREAS INCLUDING THE WELCOME AREA, FITNESS CENTER AND LOCKER ROOMS.

Funded Amount:

\$1,000,000

Requested By:

BURGOS, CUSICK, FALL

Name of Administering State Agency: