Legal Name, Address, and Telephone Number:
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AMSTERDAM WATERFRONT FOUNDATION P.O. BOX 636 AMSTERDAM, NY 12010 (518) 842–7461

Name of Project Director:

PAUL GAVRY

Purpose of Project:

FUNDS WILL BE USED TO OFFSET COSTS OF THE PHASE II CONSTRUCTION PLAN AT RIVERLINK PARK. THIS PARK WILL GIVE BOATERS AND RESIDENTS GREATER ACCESS TO AMSTERDAM AND THE ERIE CANAL.

Funded Amount:

\$350,000

Requested By:

TONKO

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BLOOMINGBURG FIRE DISTRICT, INC. 117 GODFREY ROAD BLOOMINGBURG, NY 12721 (845) 733–1248

Name of Project Director:

RICHARD DIFFENDALE

Purpose of Project:

FUNDS WILL BE USED TO PAVE THE PARKING LOT OF THE NEW FIREHOUSE.

Funded Amount:

\$75,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

BOARD OF COOPERATIVE EDUCATIONAL SERVICES FOR THE FIRST SUPERVISORY DISTRICT OF MONROE COUNTY 41 O'CONNOR ROAD FAIRPORT, NY 14450 (585) 387–3832

Name of Project Director:

RICHARD STUTZMAN

Purpose of Project:

FUNDS WILL BE USED FOR UPGRADES TO THE CULINARY ARTS PROGRAM FACILITY AND EQUIPMENT MODIFICATIONS.

Funded Amount:

\$250,000

Requested By:

KOON

Name of Administering State Agency:

Legal Name,	Address.	and T	elepho	ne N	umber:

BUFFALO NAVAL PARK COMMITTEE, INC. ONE NAVAL PARK COVE BUFFALO, NY 14202 (716) 847–1773

Name of Project Director:

PATRICK J. CUNNINGHAM

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF EXHIBITS, A GIFT SHOP, AND THE PURCHASE OF FURNISHINGS. THIS PROJECT WILL ALLOW THE COMMITTEE TO ENHANCE THE MUSEUM AT BUFFALO'S NAVAL PARK.

Funded Amount:

\$250,000

Requested By:

HOYT

Name of Administering State Agency:

Legal	Name.	, Address	, and '	Telep	hone	Numb	er:

CENTER FOR JEWISH HISTORY, INC., THE 15 WEST 16TH STREET NEW YORK, NY 10011 (212) 294–6137

Name of Project Director:

MICHAEL S. GLICKMAN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL A FIRE DETECTION SYSTEM, PUBLIC ACCESS TERMINALS AND SOFTWARE. THE NEW EQUIPMENT WILL ENSURE THE SAFETY AND ACCESSIBILITY OF AN IRREPLACEABLE TROVE OF HISTORICAL AND CULTURAL MATERIALS DATING BACK MORE THAN FIVE HUNDRED YEARS.

Funded Amount:

\$125,000

Requested By:

GLICK

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:						
	CITY OF KINGSTON 420 BROADWAY KINGSTON, NY 12401 (845) 334–3960					
Name of Projec	t Director:					
	STEPHEN M. FINKLE					
Purpose of Pro	Purpose of Project:					
	FUNDS WILL BE USED FOR THE CONSTRUCTION OF A MUNICIPAL PARKING LOT.					
Funded Amoun	t:					
	\$50,000					
Requested By:						
	CAHILL					
Name of Administering State Agency:						

Legal Name, Address, and Telephone Number:

EAST ROCHESTER UNION FREE SCHOOL DISTRICT 222 WOODBINE AVENUE EAST ROCHESTER, NY 14445 (585) 248–6302

Name of Project Director:

DR. HOWARD MAFFUCCI

Purpose of Project:

FUNDS WILL BE USED FOR THE DESIGN AND IMPLEMENTATION OF A WIRELESS BROADBAND NETWORK.

Funded Amount:

\$125,000

Requested By:

KOON

Name of Administering State Agency:

Legal Name,	Address.	, and Tele	phone I	Number:

EDUCATIONAL ALLIANCE, INC., THE 197 EAST BROADWAY NEW YORK, NY 10002 (212) 780–2300

Name of Project Director:

DANIEL ROSENTHAL

Purpose of Project:

FUNDS WILL BE USED FOR PROFESSIONAL FEES ASSOCIATED WITH THE RENOVATION OF THE 14TH STREET Y. THE NEW FACILITY WILL BE BETTER SUITED TO OFFER PROGRAMS AND SERVICES TO THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

GLICK

Name of Administering State Agency:

Legal	Name.	, Address	, and '	Telep	hone	Numb	er:

FLATBUSH DEVELOPMENT CORPORATION, THE 1616 NEWKIRK AVENUE BROOKLYN, NY 11226 (718) 859–3800

Name of Project Director:

ROBIN REDMOND

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE OFFICE SPACE, AS WELL AS TO PURCHASE EQUIPMENT AND FURNITURE. THIS PROJECT WILL ALLOW THE GRANTEE TO BETTER SERVE CLIENTS AND THE SURROUNDING COMMUNITY BY PROVIDING ECONOMIC DEVELOPMENT, HOUSING, YOUTH, AS WELL AS OTHER NEEDED SERVICES AND PROGRAMS.

Funded Amount:

\$50,000

Requested By:

BRENNAN

Name of Administering State Agency:

Legal	Name.	, Address	, and '	Telep	hone	Numb	er:

FORTUNE SOCIETY, INC., THE 29–76 NORTHERN BOULEVARD LONG ISLAND CITY, NY 11101 (347) 510–3602

Name of Project Director:

SHERRY GOLDSTEIN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE FORTUNE ACADEMY, A RESIDENCE FOR HOMELESS MEN AND WOMEN RELEASED FROM INCARCERATION. RENOVATIONS INCLUDE REPAIRS DUE TO WATER DAMAGE AND STRUCTURAL DETERIORATION OF THE BUILDING.

Funded Amount:

\$115,000

Requested By:

FARRELL, JR, WRIGHT

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

GREATER SYRACUSE CHAMBER OF COMMERCE ECONOMIC DEVELOPMENT CORPORATION (D/B/A THE TECH GARDEN) 235 HARRISON STREET SYRACUSE, NY 13202 (315) 474–0910

Name of Project Director:

PAUL BROOKS

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE FACILITY, AS WELL AS THE PURCHASE OF FURNITURE AND EQUIPMENT. THESE UPGRADES WILL ALLOW THE TECH GARDEN TO PROVIDE ENHANCED SERVICES FOR ENTREPRENEURS AND START-UP BUSINESSES WITHIN THE AREA.

Funded Amount:

\$125,000

Requested By:

STIRPE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:				
	GREEN WORKER, INC. 461 TOMPSON PLACE BRONX, NY 10455 (718) 617–7807			
Name of Project	ct Director:			
	OMAR FREILLA			
Purpose of Project:				
	FUNDS WILL BE USED FOR THE PURCHASE A TRUCK FOR THE BRONX BUILDING MATERIALS REUSE CENTER, WHICH RECYCLES SALVAGED AND SURPLUS BUILDING MATERIALS AND MAJOR APPLIANCES BY DIVERTING THOSE ITEMS FROM THE WASTE STREAM.			
Funded Amour	nt:			
	\$50,000			
Requested By:				
	DIAZ-R			
Name of Administering State Agency:				

Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF PIERMONT 478 PIERMONT AVENUE PIERMONT, NY 10968 (845) 359–1258

Name of Project Director:

MAYOR CHRIS SAUNDERS

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A STORAGE FACILITY FOR THE VOLUNTEER FIRE DEPARTMENT.

Funded Amount:

\$125,000

Requested By:

JAFFEE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

ITALIAN AMERICAN MUSEUM 555 WEST STREET, SUITE 1137 NEW YORK, NY 10019 (212) 541–1031

Name of Project Director:

JOSEPH V. SCELSA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND RENOVATE A BUILDING FOR THE ITALIAN AMERICAN MUSEUM.

Funded Amount:

\$300,000

Requested By:

BENEDETTO, LENTOL

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:					
KALEIDA HEALTH 100 HIGH STREET BUFFALO, NY 14203 (716) 690–2004					
Name of Project Director:					
TAMARA OWEN					
Purpose of Project:					
FUNDS WILL BE USED FOR THE PURCHASE OF EQUIPMENT FOR DEGRAFF MEMORIAL HOSPITAL'S RETINA PROJECT.					
Funded Amount:					
\$50,000					
Requested By:					
SCHIMMINGER					
Name of Administering State Agency:					

Legal Name, Addr	ess, and Tele	phone Number:
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KINGS BAY YM YWHA, INC. 3495 NOSTRAND AVENUE BROOKLYN, NY 11229 (718) 648-7703

Name of Project Director:

LEONARD PETLAKH

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL AIR CONDITIONING UNITS IN THE GYMNASIUM. THE UNITS WILL ALLOW THE COMMUNITY CENTER TO OFFER PROGRAMS IN THE SUMMER MONTHS.

Funded Amount:

\$200,000

Requested By:

WEINSTEIN

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

MOSHOLU-MONTEFIORE COMMUNITY CENTER, INC. 3450 DEKALB AVENUE BRONX, NY 10467 (718) 882-4000

Name of Project Director:

DONALD BLUESTONE

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AIR CONDITIONING, A SECURITY/FIRE DETECTION SYSTEM, AS WELL AS OTHER EQUIPMENT FOR THE TEEN CENTER AT CO-OP CITY.

Funded Amount:

\$50,000

Requested By:

BENEDETTO

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:
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NEW ROCHELLE POST 8, AMERICAN LEGION, INC. 112 NORTH AVENUE NEW ROCHELLE, NY 10801 (914) 813–8999

Name of Project Director:

EUGENE MCLEER

Purpose of Project:

FUNDS WILL BE USED FOR THE RENOVATION OF THE FACILITY, WHICH PROVIDES SERVICES AND PROGRAMS TO VETERANS IN THE COMMUNITY.

Funded Amount:

\$50,000

Requested By:

LATIMER

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION 830 FIFTH AVENUE, THE ARSENAL BUILDING, ROOM 310 NEW YORK, NY 10065 (212) 360–1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HEAVY DUTY ENVIRONMENTAL TRASH RECEPTACLES FOR THE EMMONS AVENUE IN THE BOROUGH OF BROOKLYN.

Funded Amount:

\$50,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

Legal	Name	, Address	, and T	elephone	Number:

NYSARC, INC., BROOME-TIOGA CHAPTER (D/B/A ACHIEVE) 125 CUTLER POND ROAD BINGHAMTON, NY 13905 (607) 231-5260

Name of Project Director:

AMY G. HOWARD

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF FIRE SUPPRESSION EQUIPMENT AND AN ELEVATOR SYSTEM. THIS WILL INCREASE BUILDING SAFETY AND ACCESS.

Funded Amount:

\$125,000

Requested By:

LUPARDO

Name of Administering State Agency:

Legal Name	. Address.	, and Tele	phone	Number:

RESEARCH FOUNDATION OF STATE UNIVERSITY OF NEW YORK, INC. 670 PARKSIDE DRIVE BROOKLYN, NY 11226 (718) 270–2598

Name of Project Director:

KATHY MCCORMICK

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE PLAYGROUND EQUIPMENT FOR THE IRA SPENCER PLAY AREA AND WILL BE MAINTAINED BY THE CHILD LEARNING CENTER. THE PLAYGROUND WILL ALLOW CHILDREN WITH DEVELOPMENTAL DELAYS TO ENJOY THE PHYSICAL ACTIVITY NEEDED FOR THEIR PROGRESS IN A SAFE AND HEALTHY ENVIRONMENT.

Funded Amount:

\$50,000

Requested By:

CAMARA, PERRY

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

RICHMOND MEDICAL CENTER (D/B/A RICHMOND UNIVERSITY MEDICAL CENTER) 355 BARD AVENUE STATEN ISLAND, NY 10310 (718) 818–3895

Name of Project Director:

MARY SCULLIN

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A MATERNAL-FETAL MONITORING SYSTEM. THE NEW SYSTEM WILL IMPROVE PATIENT OUTCOMES AND SAFETY.

Funded Amount:

\$250,000

Requested By:

TITONE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number: SAMUEL FIELD YM & YWHA, INC. 58-20 LITTLE NECK PARKWAY LITTLE NECK, NY 11362 (718) 225-6750 Name of Project Director: STEVE GOODMAN **Purpose of Project:** FUNDS WILL BE USED TO RENOVATE THE STRUCTURE TO CREATE SPACE FOR THE NORC-WOW PROGRAM. **Funded Amount:** \$60,000 Requested By: **WEPRIN** Name of Administering State Agency:

Legal Name	. Address.	, and Tele	phone	Number:

ST. LUKE'S-ROOSEVELT HOSPITAL CENTER, THE 1111 AMSTERDAM AVENUE NEW YORK, NY 10025 (212) 523-8599

Name of Project Director:

DAVID MASINI

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE HYPOTHERMIA THERAPY EQUIPMENT. THE EQUIPMENT WILL IMPROVE SURVIVAL AND NEUROLOGICAL OUTCOMES FOR HOSPITAL CARDIAC ARREST PATIENTS AND PROVIDE NEUROPROTECTION FOR OPEN-HEART SURGERY, CARDIAC ARREST, BRAIN INJURY, AND STROKE PATIENTS.

Funded Amount:

\$125,000

Requested By:

O'DONNELL

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

STATEN ISLAND ZOOLOGICAL SOCIETY, INC. 614 BROADWAY STATEN ISLAND, NY 10310 (718) 442–6166

Name of Project Director:

JOHN J. CALTABIANCO

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE ZOO'S AQUARIUM AND PURCHASE EQUIPMENT SUCH AS FILTRATION SYSTEMS AND ROCK FORMATIONS. THE AQUARIUM WILL CONTAIN OVER 200 SPECIES OF FISH, INCLUDING SHARKS AND MORAY EELS AND WILL ENTERTAIN AND EDUCATE VISITORS.

Funded Amount:

\$125,000

Requested By:

HYER-SPENCER

Name of Administering State Agency:

Legal Name,	Address.	and T	elepho	ne N	umber:

STATEN ISLAND ZOOLOGICAL SOCIETY, INC. 614 BROADWAY STATEN ISLAND, NY 10310 (718) 442–6166

Name of Project Director:

JOHN J. CALTABIANO

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF THE RED PANDA EXHIBIT AT THE STATEN ISLAND ZOO. THE EXHIBIT WILL ALLOW THE ZOO HAS TO PARTICIPATE IN A SPECIES SURVIVAL PROGRAM FOR RED PANDAS.

Funded Amount:

\$125,000

Requested By:

TITONE

Name of Administering State Agency:

	SUNNYSIDE GARDENS COMMUNITY ASSOCIATION, INC. 48–21 39TH AVENUE SUNNYSIDE, NY 11104 (917) 251–0739
Name of Proje	ct Director:

Purpose of Project:

FUNDS WILL BE USED TO CREATE A BIKING, WALKING AND JOGGING PATH TO BE USED BY ALL IN THE COMMUNITY.

Funded Amount:

\$50,000

Legal Name, Address, and Telephone Number:

CIARAN STAUNTON

Requested By:

MARKEY

Name of Administering State Agency:

Legal Name, A	ddress, and Telephone Number:
	TOWN OF BROOKHAVEN ONE INDEPENDENCE HILL FARMINGVILLE, NY 11938 (631) 451–9028
Name of Project	ct Director:
	RON PULITO
Purpose of Pro	oject:
	FUNDS WILL BE USED TO PURCHASE AND INSTALL TWO HISTORICAL CLOCKS.
Funded Amou	nt:
	\$50,000
Requested By:	
	EDDINGTON
Name of Admir	nistering State Agency:
	NYS DORMITORY AUTHORITY

Legal Name, Address, and Telephone Number: TOWN OF CHEEKTOWAGA **BROADWAY AND UNION ROAD** CHEEKTOWAGA, NY 14227 (716) 686 - 3465Name of Project Director: MARY HOLTZ **Purpose of Project:** FUNDS WILL BE USED FOR THE PURCHASE OF VEHICLES AND EQUIPMENT, AS WELL AS FOR THE RENOVATION OF STIGLMEIER PARK. **Funded Amount:** \$360,000 Requested By: **GABRYSZAK** Name of Administering State Agency:

Legal Name, Address, and Telephone Number: TOWN OF CLARKSTOWN 10 MAPLE AVENUE NEW CITY, NY 10956 (845) 639–2050 Name of Project Director: ALEXANDER J. GROMACK Purpose of Project: FUNDS WILL BE USED FOR ROAD RESURFACING. Funded Amount: \$500,000 Requested By: ZEBROWSKI-K

NYS DORMITORY AUTHORITY

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

TOWN OF COXSACKIE 16 REED STREET, P.O. BOX 135 COXSACKIE, NY 12051 (518) 731–2727

Name of Project Director:

ALEXANDER BETKE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A BUILDING LOCATED AT 127 MANSION STREET, COXSACKIE, NY. THIS BUILDING WILL BE USED AS A COMMUNITY SENIOR CENTER.

Funded Amount:

\$150,000

Requested By:

GORDON-T

Name of Administering State Agency:

		Legal	Name,	Address,	and Tel	lephone	Number:
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TOWN OF VAN BUREN 7575 VAN BUREN ROAD BALDWINSVILLE, NY 13027 (315) 635–3009

Name of Project Director:

CLAUDE E. SYKES

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A GENERATOR. FUNDS WILL ALSO BE USED FOR THE ADDITION OF ADA ACCESSIBLE DOORS AND A SIDEWALK RAMP.

Funded Amount:

\$50,000

Requested By:

MAGNARELLI

Name of Administering State Agency:

Legal Name, Address, and Telephone Number: TOWN/VILLAGE OF EAST ROCHESTER 120 WEST COMMERCIAL STREET EAST ROCHESTER, NY 14445 (585) 586-3553 Name of Project Director: MARTIN G. D'AMBROSE **Purpose of Project:** FUNDS WILL BE USED FOR THE PURCHASE OF PLAYGROUND EQUIPMENT AND SIDEWALK PAVING IN LEGION EYER PARK. **Funded Amount:** \$50,000 Requested By: **KOON** Name of Administering State Agency:

Legal Name, Add	dress, and Telephone Number:
4 F	VETERANS OUTREACH CENTER, INC. 459 SOUTH AVENUE ROCHESTER, NY 14620 (585) 546–1081
Name of Project	Director:
1	THOMAS J. CRAY
Purpose of Proje	ect:
E	FUNDS WILL BE USED TO CONSTRUCT A PARKING LOT TO ALLOW BETTER ACCESS FOR CLIENTS RECEIVING EMPLOYMENT, TRAINING AND STABILIZATION SERVICES.
Funded Amount	: :
\$	\$50,000
Requested By:	
(ORTIZ
Name of Adminis	stering State Agency:

Legal Name, Address, and Telephone Number:

VILLAGE OF AIRMONT 251 CHERRY LANE, P.O. BOX 578 AIRMONT, NY 10952 (845) 357–8111

Name of Project Director:

IRENE MURPHY

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A YOUTH RECREATIONAL FACILITY.

Funded Amount:

\$125,000

Requested By:

JAFFEE

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:
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WOODSTOCK GUILD OF CRAFTSMEN, INC. 34 TINKER STREET WOODSTOCK, NY 12498 (845) 679–2079

Name of Project Director:

CARLA T. SMITH

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION OF THE HISTORIC 1903 BYRDCLIFFE ART COLONY, WHICH IS LISTED ON THE NATIONAL REGISTER OF HISTORIC SITES.

Funded Amount:

\$50,000

Requested By:

CAHILL

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

YOUNG MEN'S CHRISTIAN ASSOCIATION OF LONG ISLAND, INCORPORATED, THE 200 WEST MAIN STREET BAY SHORE, NY 11706 (631) 665-4255

Name of Project Director:

BOB PETTERSEN

Purpose of Project:

FUNDS WILL BE USED TO CONSTRUCT A WATER SPRAY PARK, AS WELL AS FOR THE PURCHASE OF COMPUTERS AND EQUIPMENT AT THE GREAT SOUTH BAY BRANCH.

Funded Amount:

\$75,000

Requested By:

RAMOS

Name of Administering State Agency:

Legal Name, Address, and Telephone Number:

YOUNG WOMEN'S CHRISTIAN ASSOCIATION OF JAMESTOWN, NY 401 NORTH MAIN STREET JAMESTOWN, NY 14701 (716) 488–2237

Name of Project Director:

MARY E. PHANEUF

Purpose of Project:

FUNDS WILL BE USED FOR RENOVATION OF THE DAY CARE CENTER, INCLUDING ELECTRICAL AND HVAC UPGRADES.

Funded Amount:

\$150,000

Requested By:

PARMENT

Name of Administering State Agency: