

**GLEN COVE LOCAL ECONOMIC ASSISTNCE CORP.**

City Hall – 9 Glen St., Glen Cove, NY 11542

Minutes of Meeting February 11, 2020

Resolution #7b

**RESOLUTION OF THE GLEN COVE LOCAL ECONOMIC ASSISTANCE CORPORATION (THE “CORPORATION”) ADOPTING AN UPDATED FORM OF ANNUAL FINANCIAL DISCLOSURE**

WHEREAS, Section 1411 of the Not-For-Profit Corporation Law, as amended (the “Act”), has been heretofore enacted by the Legislature of the State of New York for the purposes, among others, of providing for the creation of local development corporations in the State of New York for the exclusively charitable or public purposes of relieving and reducing unemployment, promoting and providing for additional and maximum employment, bettering and maintaining job opportunities, instructing or training individuals to improve or develop their capabilities for such jobs, carrying on scientific research for the purpose of aiding a community or geographical area by attracting new industry to the community or area or by encouraging the development of, or retention of, an industry in the community or area, and lessening the burdens of government and acting in the public interest; and

WHEREAS, the Glen Cove City Council (the “City Council”) authorized the formation of the Glen Cove Local Economic Assistance Corporation (the “Corporation”) under the Act pursuant to a Resolution adopted on July 22, 2014; and

WHEREAS, pursuant to such authorization of the City Council, the Corporation has been incorporated under said Act by the filing of its Certificate of Incorporation with the Office of the Secretary of State of the State of New York on July 28, 2014; and

WHEREAS, the Corporation wishes to adopt an updated form of annual financial disclosure to ensure continued compliance with current best practices in governance and applicable law, including, without limitation, the Act, the Public Authorities Accountability Act of 2005 and the Public Authorities Reform Act of 2009;

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF DIRECTORS OF THE CORPORATION AS FOLLOWS:

Section 1. The Corporation hereby determines that the proposed action is a Type II Action pursuant to Article 8 of the New York Environmental Conservation Law (including the regulations thereunder, “SEQRA”) involving “continuing agency administration” which does not involve “new programs or major reordering of priorities that may affect the environment” (6 NYCRR §617.5(c)(20)) and therefore no Findings or determination of significance are required under SEQRA.

Section 2. The Corporation hereby adopts the Glen Cove Local Economic Assistance Corporation Annual Statement of Financial Disclosure annexed hereto as Exhibit A (the “Annual Disclosure”). The Annual Disclosure shall be completed, executed and delivered annually by each director, officer and employee of the Corporation to the City Clerk of the City of Glen Cove in accordance with applicable law. The Annual Disclosure hereby replaces any and all policies, practices and procedures heretofore adopted by the Corporation with respect to the subject matter thereof.

Section 3. This Resolution shall not preclude the Corporation from adopting other or further policies relating to governance and activities of the Corporation as determined from time to time by the board of directors of the Corporation.

Section 4. This Resolution shall take effect immediately.

The question of the adoption of the foregoing Resolution was duly put to a vote on roll call, which resulted as follows:

	<u>VOTING</u>
Timothy J. Tenke	AYE
Vincent C. Hartley	AYE
Joseph Gioino	Absent
John Tetta	Absent
James J. Cappiello	AYE

The foregoing Resolution was thereupon declared duly adopted.

**ENTERED**  
2-11-20  
GC-LEAC

**ANNUAL STATEMENT OF FINANCIAL DISCLOSURE FOR  
THE GLEN COVE LOCAL ECONOMIC ASSISTANCE CORP. FOR THE YEAR 2020<sup>1</sup>**

1. NAME AND ADDRESS

Last Name	Middle Initial	First Name
Title		
Department or Agency		
Department or Agency Address		Telephone Number
Residence Address		Telephone Number

2. SPOUSE AND DEPENDENT CHILDREN

Spouse		Child/Age
Child/Age		Child/Age

NOTE: FOR QUESTIONS 3 TO 6, DO NOT REPORT EXACT DOLLAR AMOUNTS. INSTEAD, REPORT CATEGORIES OF AMOUNTS, USING THE FOLLOWING:

- CATEGORY A: UNDER \$5,000
- CATEGORY B: \$5,000 TO UNDER \$20,000
- CATEGORY C: \$20,000 TO UNDER \$60,000
- CATEGORY D: \$60,000 TO UNDER \$100,000
- CATEGORY E: \$100,000 TO UNDER \$250,000
- CATEGORY F: \$250,000 AND OVER

3. FINANCIAL INTERESTS

- a. *Business Positions.* List any office, trusteeship, directorship, partnership, or other position in any business, association, proprietary, or not-for-profit organization held by you or your spouse or dependent children, if any, during the reporting year and indicate whether these businesses have dealings with the Glen Cove Local Economic Assistance Corp. ("Agency") or the City of Glen Cove ("City") in any manner

Name of Family Member	Position	Organization	City or Agency Nature of Involvement

<sup>1</sup> The "reporting year," as used throughout this form, means the calendar year, from January 1 to December 31, preceding the year in which this report is required to be filed.

- b. *Outside Employment.* Describe any outside occupation, employment, trade, business or profession providing more than \$2,500 during the reporting year for you or your spouse or dependent children, if any, and indicate whether such activities are regulated by any state or local agency.

Name of Family Member	Position	Name, Address, and Description of Organization	State or Local Agency	Category of Amount
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- c. *Future Employment.* Describe any contract, promise, or other agreements between you and anyone else with respect to your employment after leaving your Agency position or office.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- d. *Past Employment.* Identify the source and nature of any income you have received in excess of \$2,500 during the reporting year from any prior employer, including deferred income, contributions to a pension or retirement fund, profit sharing plan, severance pay, or payments under a buy-out agreement.

Name and Address of Income Source	Description of Income (i.e., pension, deferred, etc.)	Category of Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- e. *Investments.* Itemize and describe all investments in any business, corporation, partnership, or other similar assets, including stocks, bonds, loans, pledged collateral, and other investments, held by, or for, you or your spouse during the reporting year; provided, however, do not list any investment in any business, corporation, partnership or other asset that is traded through the "over-the-counter market" or through any recognized stock exchange unless such investment is in excess of five percent of the value such business, corporation, partnership or other asset. List the location of all real estate within the City or within five miles thereof, in which you or your spouse have an interest, over \$5,000.00.

Name of Family Member	Name and Address of Business or Real Estate	Description of Investment	Category of Amount
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- f. Trusts. Identify each interest in excess of \$2,500 held by you in a trust or estate or similar beneficial interest, if reasonably ascertainable, except for IRS eligible retirement plans or interests in an estate or trust of, or for, a relative. Do not list any IRS eligible retirement plan or deferred compensation plan.

<u>Name of Family Member</u>	<u>Trustee/Executor</u>	<u>Description of Trust/Estate</u>	<u>Category Of Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- g. *Other income.* Identify the source and nature of any other income in excess of \$1,000 per year from any source not described above, including teaching income, lecture fees, honoraria, consultant fees, contractual income, or other income of any nature, received by you or your spouse.

<u>Name of Family Member</u>	<u>Name and Address of Income Source</u>	<u>Nature of Income</u>	<u>Category Of Amount</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. GIFTS AND HONORARIA.

List the source of all gifts in excess of \$1,000 received during the reporting year by you, your spouse or dependent child, excluding gifts from a relative. The term "gifts" includes gifts of cash, property, personal items, payments to third parties on your behalf, forgiveness of debt, honoraria, and any other payments that are not reportable as income. Do not list campaign contributions.

<u>Name of Family Member</u>	<u>Name and Address of Donor</u>	<u>Category of Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. THIRD-PARTY REIMBURSEMENTS.

Identify and describe the source of any third-party reimbursement for travel related expenditures in excess of \$1,000 for any matter that relates to your official duties. The term "reimbursement" includes any travel-related expenses provided by anyone other than the Agency or the City for speaking engagements, conferences, or fact-finding events that relate to your official duties. Do not list campaign contributions.

<u>Source</u>	<u>Description</u>	<u>Category of Amount</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. DEBTS.

Describe all your debts and those of your spouse in excess of \$5,000. Do not include: debts to relatives, debts incurred in the ordinary course of your trade, business or professional practice or that of your spouse; obligations to pay maintenance in a matrimonial action, alimony or child support payments; revolving charge accounts under \$5,000; any loans issued in the ordinary course of business by a financial institution to finance education costs, the cost of home purchase or improvements for a primary or secondary residence or purchase of a personally owned motor vehicle, household furniture or appliance.

Name of Family Member	Name and Address of Creditor	Category of Amount
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

7. INTEREST IN CONTRACTS.

Describe any interest you, your spouse, or your dependent children have in any contract involving the City or the Agency.

Name of Family Member	Contract Description
_____	_____
_____	_____
_____	_____
_____	_____

8. POLITICAL PARTIES.

List any position you held within the past five years as an officer of any political party, political committee, or political organization. The term "political organization" includes any independent body or any organization that is affiliated with or a subsidiary of a political party.

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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1/9/20 cb/af/mt