

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

ADELANTE OF SUFFOLK COUNTY, INC.
10 THIRD AVENUE
BRENTWOOD, NY 11717
(631) 434-3481

Name of Project Director:

GEORGE B. FUA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE OFFICE EQUIPMENT AND FURNITURE, INCLUDING INSTALLATION OF THE WIRING AND NETWORKING OF COMPUTER SYSTEMS. THIS WILL HELP WITH COMMUNITY OUTREACH FOR THE PROGRAMS ADMINISTERED.

Funded Amount:

\$100,000

Requested By:

RAMOS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

CITY OF ROCHESTER
30 CHURCH STREET, ROOM 300B
ROCHESTER, NY 14614
(585) 428-7383

Name of Project Director:

PAUL R. WAY

Purpose of Project:

FUNDS WILL BE USED FOR THE RESTORATION OF ATLANTIC AVENUE, WHICH WILL INCLUDE THE RECONSTRUCTION OF SIDEWALKS AND CROSSWALKS. THESE IMPROVEMENTS WILL MAKE THE AREA MORE PEDESTRIAN FRIENDLY.

Funded Amount:

\$50,000

Requested By:

MORELLE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

IMAGINE FOUNDATION, INC. (D/B/A IMAGINE ACADEMY)
1465 EAST 7TH STREET
BROOKLYN, NY 11230
(718) 376-8882

Name of Project Director:

MINDY JEROME

Purpose of Project:

FUNDS WILL BE USED TO CONVERT A BUILDING INTO A SCHOOL THAT WILL ACCOMMODATE AN AUTISTIC AND DISABLED POPULATION. THE NEW FACILITY WILL PROVIDE BETTER ACCESS TO SERVICES TO THE COMMUNITY AND WILL INCLUDE CLASSROOMS, THERAPY ROOMS, AN ELEVATOR, AND ADMINISTRATIVE OFFICES.

Funded Amount:

\$500,000

Requested By:

HIKIND, JACOBS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

INCORPORATED VILLAGE OF PORT JEFFERSON
121 WEST BROADWAY
PORT JEFFERSON, NY 11777
(631) 473-4724

Name of Project Director:

BARBARA RANSOME

Purpose of Project:

FUNDS WILL BE USED FOR RESTORATION AND RECONSTRUCTION OF THE HISTORIC PHILLIPS ROE HOUSE TO PRESERVE THE BUILDING FOR FUTURE GENERATIONS.

Funded Amount:

\$60,000

Requested By:

ENGLEBRIGHT

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

JOHN T. MATHER MEMORIAL HOSPITAL OF PORT JEFFERSON, NEW
YORK, INC.
75 NORTH COUNTRY ROAD
PORT JEFFERSON, NY 11777-2190
(631) 473-1320

Name of Project Director:

MARLENE ISRAEL

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A NEW STEREOTACTIC BREAST
BIOPSY SYSTEM FOR THE FORTUNATO BREAST HEALTH CENTER.

Funded Amount:

\$125,000

Requested By:

ALESSI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LEHMAN COLLEGE CENTER FOR THE PERFORMING ARTS, INC. (D/B/A
LEHMAN CENTER FOR THE PERFORMING ARTS, INC.)
250 BEDFORD PARK BOULEVARD WEST
BRONX, NY 10468
(718) 960-8490

Name of Project Director:

EVA BORNSTEIN

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A SOUND SYSTEM TO
ACCOMMODATE EVENTS OFFERED TO THE COMMUNITY.

Funded Amount:

\$200,000

Requested By:

RIVERA-J

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

LENOX HILL NEIGHBORHOOD HOUSE, INC.
331 EAST 70TH STREET
NEW YORK, NY 10021
(212) 744-5022

Name of Project Director:

CLAIRE GROSSMAN

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE HEADQUARTERS, WHICH WILL INCLUDE THE INSTALLATION OF A WHEELCHAIR LIFT, RESTORATION OF THE AUDITORIUM AND FIRST FLOOR BATHROOM. THE RENOVATIONS ARE PART OF AN ONGOING ACCESSIBILITY, MODERNIZATION AND SAFETY IMPROVEMENT PROJECT THAT WILL RESULT IN GREATER ACCESS TO SOCIAL SERVICES FOR THE COMMUNITY.

Funded Amount:

\$250,000

Requested By:

KELLNER

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NASSAU COUNTY FIREFIGHTERS MUSEUM AND EDUCATION CENTER
ONE DAVIS AVENUE
GARDEN CITY, NY 11530
(516) 572-4177

Name of Project Director:

FRANK SARACINO

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE AND INSTALL DISPLAYS AND EXHIBITS TO AID CHILDREN IN LEARNING FIRE SAFETY AND PREVENTION.

Funded Amount:

\$50,000

Requested By:

DINAPOLI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY BOARD OF EDUCATION
52 CHAMBERS STREET
NEW YORK, NY 10007
(212) 374-4934

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED FOR THE INSTALLATION OF UPGRADED WIRING
AND THE PURCHASE OF AIR CONDITIONING UNITS FOR PS 107X.

Funded Amount:

\$50,000

Requested By:

DIAZ-R

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY BOARD OF EDUCATION
52 CHAMBERS STREET
NEW YORK, NY 10007
(212) 374-4934

Name of Project Director:

GRAHAM GORDON

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE DANCE STUDIO AT THE BENJAMIN BANNEKER ACADEMY, WHICH WILL SUPPORT A HIGHER QUALITY PROGRAM FOR STUDENTS, FACULTY AND FAMILY MEMBERS.

Funded Amount:

\$100,000

Requested By:

GREEN

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION
830 FIFTH AVENUE, THE ARSENAL, ROOM 310
NEW YORK, NY 10021
(212) 360-1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE SEATING FOR A ROOFTOP PARK AREA. THE ROOFTOP IS PART OF A MAJOR CONSTRUCTION PLAN TO CREATE GREEN SPACE ON A FORMER HELIPORT SITE LOCATED EAST OF THE FDR DRIVE BETWEEN EAST 60TH AND EAST 62ND STREETS.

Funded Amount:

\$50,000

Requested By:

GRANNIS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION
830 FIFTH AVENUE, THE ARSENAL, ROOM 310
NEW YORK, NY 10021
(212) 360-1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED TO CONDUCT A STUDY TO DETERMINE THE MOST COST EFFECTIVE AND EFFICIENT MANNER TO RENOVATE THE OLD NEW YORK CITY PARKS DEPARTMENT BATH HOUSE SITE INTO A HEALTH/RECREATION CENTER FOR THE COMMUNITY.

Funded Amount:

\$125,000

Requested By:

CYMBROWITZ-S

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK CITY PARKS AND RECREATION
830 FIFTH AVENUE, THE ARSENAL, ROOM 310
NEW YORK, NY 10021
(212) 360-1360

Name of Project Director:

EDWARD J. LEWIS

Purpose of Project:

FUNDS WILL BE USED TO MAKE VARIOUS IMPROVEMENTS TO RIVERSIDE PARK. THE PROJECT INCLUDES RECONSTRUCTION OF FENCES, PAVEMENT, STAIRCASES, RAMPS, WALLS AND GENERAL SITE WORK. THIS PROJECT WILL BENEFIT THE COMMUNITY BY PROVIDING IMPROVED SAFETY, COMFORT AND BETTER ACCESS TO THE PARK.

Funded Amount:

\$125,000

Requested By:

O'DONNELL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NEW YORK SHAKESPEARE FESTIVAL
425 LAFAYETTE STREET
NEW YORK, NY 10003
(212) 539-8713

Name of Project Director:

ADRIENNE DOBSOVITS

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE DELACORTE THEATER IN CENTRAL PARK AND WILL INCLUDE PLUMBING AND HVAC SYSTEM UPGRADES. THE THEATRE PROVIDES FREE AND LOW COST STAGE PRODUCTIONS TO 250,000 COMMUNITY MEMBERS EACH YEAR.

Funded Amount:

\$125,000

Requested By:

O'DONNELL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

NIAGARA FALLS MEMORIAL MEDICAL CENTER
621 TENTH STREET
NIAGARA FALLS, NY 14302
(716) 278-4301

Name of Project Director:

JOSEPH A. RUFFOLO

Purpose of Project:

FUNDS WILL BE USED FOR THE INSTALLATION OF A FOUNTAIN AT SCHOELLKOPF PARK. THIS FOUNTAIN WILL PROVIDE A LANDMARK IN THE TOWNS OLDEST PARK, AND WILL BE AESTHETICALLY PLEASING TO PARK VISITORS.

Funded Amount:

\$50,000

Requested By:

DELMONTE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

REGIONAL AID FOR INTERIM NEEDS, INC.
2405 EAST TREMONT AVENUE
BRONX, NY 10461
(718) 892-5520

Name of Project Director:

JAMES FIGUEROA

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE OFFICE SPACE AND THE
PARKING LOT IN ORDER TO PROVIDE A SAFE ENVIRONMENT FOR
STAFF, CLIENTS AND RESIDENTS.

Funded Amount:

\$50,000

Requested By:

HEASTIE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

REGIONAL AID FOR INTERIM NEEDS, INC.
811 MORRIS PARK AVENUE
BRONX, NY 10462
(718) 892-5520

Name of Project Director:

LOUIS M. VAZQUEZ

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE THE BUILDING LOCATED AT 811 MORRIS PARK AVENUE WHERE THE GRANTEE WILL HOUSE A HOME ATTENDANT PROGRAM.

Funded Amount:

\$50,000

Requested By:

RIVERA-P

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

REGIONAL AID FOR INTERIM NEEDS, INC.
811 MORRIS PARK AVENUE
BRONX, NY 10462
(718) 892-5520

Name of Project Director:

LOUIS M. VASQUEZ

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE OF A TRANSPORTATION VAN, EQUIPMENT, AND OFFICE FURNITURE IN ORDER TO SUPPORT COMMUNITY OUTREACH PROGRAMS.

Funded Amount:

\$125,000

Requested By:

HEASTIE

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL, INC.
555 BUSHWICK AVENUE
BROOKLYN, NY 11206
(718) 366-3800

Name of Project Director:

ANGELA M. BATTAGLIA

Purpose of Project:

FUNDS WILL BE USED TO PURCHASE A 15 SEAT VAN TO TRANSPORT SENIOR CITIZENS WHO RESIDE IN SENIOR HOUSING TO LOCAL SENIOR CENTERS FOR NUTRITIONAL, RECREATIONAL AND SOCIAL SERVICES.

Funded Amount:

\$50,000

Requested By:

LOPEZ-V

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SOUND BEACH CIVIC ASSOCIATION, INC.
19 BIRCH AVENUE
SOUND BEACH, NY 11789
(631) 922-3773

Name of Project Director:

WILLIAM PELLEZZ, JR.

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF A VETERANS
MEMORIAL IN SOUND BEACH, NEW YORK.

Funded Amount:

\$50,000

Requested By:

ALESSI

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

SYMPHONY SPACE, INC., THE
2537 BROADWAY
NEW YORK, NY 10025
(212) 864-1414

Name of Project Director:

LEAH MADDRIE

Purpose of Project:

FUNDS WILL BE USED FOR THE PURCHASE AND INSTALLATION OF A LIGHTING SYSTEM FOR THE PERFORMING ARTS SPACE. THE IMPROVEMENTS WILL ALLOW THE GRANTEE TO KEEP PACE WITH CURRENT TECHNICAL STANDARDS, AS WELL AS TO CONTINUE TO PROVIDE FREE AND LOW COST PROGRAMMING IN THE PERFORMING ARTS.

Funded Amount:

\$95,000

Requested By:

ROSENTHAL

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF BETHEL
3454 STATE ROUTE 55
WHITE LAKE, NY 12786
(845) 583-4350

Name of Project Director:

SUSAN RUNNELS

Purpose of Project:

FUNDS WILL BE USED FOR VARIOUS RENOVATIONS AND IMPROVEMENTS TO THE BETHEL TOWN PARK. SPECIFICALLY, THE TOWN WILL REPLACE CURBINGS, PLAYGROUND EQUIPMENT AND ADD LIGHTING TO THE PARK.

Funded Amount:

\$50,000

Requested By:

GUNTHER-A

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

TOWN OF VESTAL
605 VESTAL PARKWAY WEST
VESTAL, NY 13850
(607) 748-1514

Name of Project Director:

JAMES BUKOWSKI

Purpose of Project:

FUNDS WILL BE USED TO RESTORE, RENOVATE AND PURCHASE EQUIPMENT FOR THE HISTORIC ROUNDS COAL HOUSE SO THAT IT CAN CONTINUE TO PROVIDE A LONG TERM BENEFIT TO THE COMMUNITY.

Funded Amount:

\$100,000

Requested By:

LUPARDO

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

Legal Name, Address, and Telephone Number:

UNIVERSITY OF ROCHESTER
RIVER CAMPUS
ROCHESTER, NY 14627
(585) 275-4151

Name of Project Director:

KEVIN J. PARKER

Purpose of Project:

FUNDS WILL BE USED FOR THE CONSTRUCTION OF THE ROBERT B. GOERGEN HALL OF BIOMEDICAL ENGINEERING AND OPTICS AT THE UNIVERSITY OF ROCHESTER.

Funded Amount:

\$50,000

Requested By:

KOON

Name of Administering State Agency:

NYS DORMITORY AUTHORITY

PROJECT INFORMATION

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) 630-9633

Name of Project Director:

DENISE ZIMMER

Purpose of Project:

FUNDS WILL BE USED TO RENOVATE AND UPGRADE THE GYMNASIUM AT THE FLATBUSH YMCA. RENOVATIONS WILL INCLUDE NEW LIGHTING, REFURBISHING THE FLOOR, INSTALLATION OF NEW PARTITIONS, AND A SCOREBOARD.

Funded Amount:

\$50,000

Requested By:

JACOBS

Name of Administering State Agency:

NYS DORMITORY AUTHORITY