

E-25-22 Certified:

Filed with the Clerk of the Nassau County Legislature March 31, 2022 3:38PM

Capital:

SERVICE: Peer Diversion Program

Contract ID #:CQPB20000011 NIFS Entry Date: 09-SEP-21 Term: from 01-OCT-20 to 30-SEP-21

| Amendment |
|---------------------|
| Time Extension: |
| Addl. Funds: |
| Blanket Resolution: |
| RES# |

| 1) Mandated Program: | Y |
|--|---|
| 2) Comptroller Approval Form Attached: | Y |
| 3) CSEA Agmt. § 32 Compliance Attached: | Y |
| 4) Material Adverse Information Identified? (if yes, attach memo): | N |
| 5) Insurance Required | Y |

| Vendor Info: | |
|---------------------------------|--------------------------------|
| Name: Fund for the City of New | Vendor ID#: 13-2612524 |
| York, Center for Court | |
| Innovation | |
| Address: 520 Fifth Avenue, 18th | Contact Person: Alexandrea Lee |
| Floor New York, NY 10018 | |
| | Phone: 212-925-6676 |

| Department: |
|--------------------------------|
| Contact Name: Joseph Schiliro |
| Address: 400 County Seat Drive |
| Mineola, NY 10501 |
| Phone: 516-571-5548 |

Routing Slip

| Department | NIFS Entry: X | 09-SEP-21 JSCHILIRO |
|--------------|---------------------------|---------------------|
| Department | NIFS Approval: X | 09-SEP-21 JSCHILIRO |
| DPW | Capital Fund Approved: | |
| ОМВ | NIFA Approval: X | 15-SEP-21 IQURESHI |
| ОМВ | NIFS Approval: X | 10-SEP-21 SJACOB |
| County Atty. | Insurance Verification: X | 10-SEP-21 AAMATO |

| County Atty. | Approval to Form: X | 10-SEP-21 DGREGWARE |
|--------------|---------------------|---------------------|
| СРО | Approval: X | 17-SEP-21 PARJUNE |
| DCEC | Approval: X | 03-DEC-21 RCLEARY |
| Dep. CE | Approval: X | 31-MAR-22 ATWALSH |
| Leg. Affairs | Approval/Review: X | 31-MAR-22 CLEIMONE |
| Legislature | Approval: | |
| Comptroller | Deputy: | |
| NIFA | NIFA Approval: | |

Contract Summary

Purpose: The Peer Diversion Court seeks to help teenage defendants avoid the legal and collateral consequences associated with criminal prosecution. The program ensures that adolescents ages 16 and 17 receive the benefit of developmentally appropriate services and reduce the likelihood of continuing a cycle of re-offending.

Method of Procurement: Sole Source

Procurement History: Fund for the City of New York, Center for Court Innovation has performed these services for the County for several years through the District Attorney's Office. There is no other entity with the expertise, experiences, and capacity to provide the services required under the contract.

Description of General Provisions: The Peer Diversion Court is an educational diversion program for young offenders coordinated through the Center for Court Innovation(CCI). This effort requires an on-site coordination staff to ensure that appropriate defendants are identified, referred to effective services and monitored appropriately. CCI staff reports to and allows project stakeholders to track progress, outcomes and case resolutions, as well as monitors compliance with the Peer Diversion Program dispositions.

Impact on Funding / Price Analysis: Program is 100% funded by NYS OCFS. Increasing maximum amount by \$99,178. New maximum amount is \$196,347.

Change in Contract from Prior Procurement: \$2,009

Recommendation: (approve as submitted) Approve as submitted

Advisement Information

| BUDGET CODES | | | |
|--------------|---------|--|--|
| Fund: | GRT | | |
| Control: | 79 | | |
| Resp: | PB79-20 | | |
| Object: | DE500 | | |
| Transaction: | | | |
| Project #: | | | |
| Detail: | | | |

| RENEWAL | | |
|----------|--|--|
| % | | |
| Increase | | |
| % | | |
| Decrease | | |
| | | |

| FUNDING SOURCE | AMOUNT | |
|-------------------|--------------|--|
| Revenue | | |
| Contract: | | |
| County | \$ 0.00 | |
| Federal | \$ 0.00 | |
| State | \$ 99,178.00 | |
| Capital | \$ 0.00 | |
| Other | \$ 0.00 | |
| TOTAL | \$ 99,178.00 | |

| LINE | INDEX/OBJECT CODE | AMOUNT | |
|------|---------------------------|--------------|--|
| 1 | PBGRT79X1NYS- X9/DE500 | \$ 99,178.00 | |
| | | \$ 0.00 | |
| | | \$ 0.00 | |
| | | \$ 0.00 | |
| | | \$ 0.00 | |
| | | \$ 0.00 | |
| | TOTAL | \$ 99,178.00 | |

RULES RESOLUTION NO. - 2022

A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE AN AMENDMENT TO A PERSONAL SERVICES AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE COUNTY DEPARTMENT OF PROBATION, AND FUND FOR THE CITY OF NEW YORK, CENTER FOR COURT INNOVATION

WHEREAS, the County has negotiated an amendment to a personal services agreement with Fund for the City of New York, Center for Court Innovation to provide a youth court coordinator for the Nassau County Youth Court, a copy of which is on file with the Clerk of the Legislature; now, therefore, be it

RESOLVED, that the Rules Committee of the Nassau County
Legislature authorizes the County Executive to execute the said amendment
to an agreement with Fund for the City of New York, Center for Court
Innovation.

Contract Approval Request Form (As of January 1, 2015)

| 1. Vendor: Fund for the City of New York, Center fo | r Court Innovation | | |
|---|--|-----------------------------------|--|
| 2. Dollar amount requiring NIFA approval: \$9917 | '8 | | |
| Amount to be encumbered: \$99178 | | | |
| This is a Amendment | | | |
| If new contract - \$ amount should be full amount of of advisement ?NIFA only needs to review if it is incr If amendment - \$ amount should be full amount of a | easing funds above the | e amount pre | eviously approved by NIFA |
| 3. Contract Term: 10/01/2020-09/30/2021 Has work or services on this contract commence | ed? Y | | |
| If yes, please explain: Grant Program | | | |
| 4. Funding Source: | | | |
| General Fund (GEN) Capital Improvement Fund (CAP) Other | X Grant Fund (GRT) | Federal % State % County % | 100 |
| Is the cash available for the full amount of the contra | act? | Υ | |
| If not, will it require a future borrowing? | | N | |
| Has the County Legislature approved the borrowing | ? | N/A | |
| Has NIFA approved the borrowing for this contract? | | N/A | |
| 5. Provide a brief description (4 to 5 sentences) | of the item for which | this approv | al is requested: |
| The Peer Diversion Court seeks to help teenage defendants avensures that adolescents ages 16 and 17 receive the benefit of offending. | oid the legal and collateral co developmentally appropriate | onsequences as services and re | sociated with criminal prosecution. The program educe the likelihood of continuing a cycle of re- |
| 6. Has the item requested herein followed all pro | oper procedures and | thereby ap | proved by the: |
| Nassau County Attorney as to form | | | |
| Nassau County Committee and/or Legislature | | | |
| Date of approval(s) and citation to the resolut | tion where approval f | or this item | was provided: |

7. Identify all contracts (with dollar amounts) with this or an affiliated party within the prior 12 months:

Amount

Date

Contract ID

AUTHORIZATION

To the best of my knowledge, I hereby certify that the information contained in this Contract Approv al Request Form and any additional information submitted in connection with this request is true an d accurate and that all expenditures that will be made in reliance on this authorization are in confor mance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan. I understand that NIFA will rely upon this information in its official deliberation s.

IQURESHI 15-SEP-21

Authenticated User Date

COMPTROLLER'S OFFICE

To the best of my knowledge, I hereby certify that the information listed is true and accurate and is in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan.

Regarding funding, please check the correct response:

_ I certify that the funds are available to be encumbered pending NIFA approval of this contract.

If this is a capital project:

I certify that the bonding for this contract has been approved by NIFA.

Budget is available and funds have been encumbered but the project requires NIFA bonding authorization

Authenticated User Date

NIFA

Amount being approved by NIFA: _

Payment is not guaranteed for any work commenced prior to this approval.

Authenticated User Date

NOTE: All contract submissions MUST include the County's own routing slip, current NIFS pri ntouts for all relevant accounts and relevant Nassau County Legislature communication docu ments and relevant supplemental information pertaining to the item requested herein.

NIFA Contract Approval Request Form MUST be filled out in its entirety before being submitted to NIFA for review.

NIFA reserves the right to request additional information as needed.

Jack Schnirman Comptroller



OFFICE OF THE COMPTROLLER

240 Old Country Road Mineola, New York 11501

COMPTROLLER APPROVAL FORM FOR PERSONAL, PROFESSIONAL OR HUMAN SERVICES CONTRACTS

Attach this form along with all personal, professional or human services contracts, contract renewals, extensions and amendments.

| CONTRACTOR NAME: Fund for the City of New York, Center for Court Innovation |
|--|
| CONTRACTOR ADDRESS: 520 8th Avenue, 18th Floor, New York, NY 10018 |
| FEDERAL TAX ID #: 13-2612524 |
| <u>Instructions:</u> Please check the appropriate box ("\sum") after one of the following roman numerals, and provide all the requested information. |
| I. The contract was awarded to the lowest, responsible bidder after advertisement for sealed bids. The contract was awarded after a request for sealed bids was published in [newspaper] on [date]. The sealed bids were publicly opened on sealed bids were received and opened. [#] of sealed bids were received and opened. |
| II. The contractor was selected pursuant to a Request for Proposals. The Contract was entered into after a written request for proposals was issued on [date]. Potential proposers were made aware of the availability of the RFP by advertisement in [newspaper], posting on industry websites, via email to interested parties and by publication on the County procurement website. Proposals were due on [date] [state #] proposals were received and evaluated. The evaluation committee consisted of: |
| (list # of persons on committee and their respective departments). The proposals were scored and ranked. As a result of the scoring and ranking, the highest-ranking proposer was selected. |

| This is a renewal, extension or amendment of an existing contract. The contract was originally executed by Nassau County on 1/19/2021 [date]. This is renewal or extension pursuant to the contract, or an amendment within the scope of the contract or RF (copies of the relevant pages are attached). The original contract was entered in after determining that The Center for Court Innovation is a one-of-a-kind public/private partnership that is uniquely suited to provide the service. |
|--|
| [describe procurement method, i.e., RFP, three proposals evaluated, etc.] Attach a copy of the most recent evaluation of the contractor's performance for any contract to be renewed or extended. If the contractor has not received a satisfactory evaluation, the department must explain why the contractor should nevertheless be permitted to continue to contract with the county. |
| IV. □ Pursuant to Executive Order No. 1 of 1993, as amended, at least three proposals were solicited and received. The attached memorandum from the department head describes the proposals received, along with the cost of each proposal. |
| \square A. The contract has been awarded to the proposer offering the lowest cost proposal; OR: |
| □ B. The attached memorandum contains a detailed explanation as to the reason(s) why the contract was awarded to other than the lowest-cost proposer. The attachment includes a specific delineation of the unique skills and experience, the specific reasons why a proposal is deemed superior, and/or why the proposer has been judged to be able to perform more quickly than other proposers. |
| V. Pursuant to Executive Order No. 1 of 1993 as amended, the attached memorandum from the department head explains why the department did not obtain at least three proposals. |
| A. There are only one or two providers of the services sought or less than three providers submitted proposals. The memorandum describes how the contractor was determined to be the sole source provider of the personal service needed or explains why only two proposals could be obtained. If two proposals were obtained, the memorandum explains that the contract was awarded to the lowest cost proposer, or why the selected proposer offered the higher quality proposal, the proposer's unique and special experience, skill, or expertise, or its availability to perform in the most immediate and timely manner. |
| ☐ B. The memorandum explains that the contractor's selection was dictated by the terms of a federal or New York State grant, by legislation or by a court order. (Copies of the relevant documents are attached). |
| C. Pursuant to General Municipal Law Section 104, the department is purchasing the services required through a New York State Office of General Services contract no and the attached memorandum explains how the purchase is within the scope of the terms of that contract. |

| ☐ D. Pursuant to General Municipal Law Section 119-0, the department is purchasing the services required through an inter-municipal agreement. |
|---|
| VI. This is a human services contract with a not-for-profit agency for which a competitive process has not been initiated. Attached is a memorandum that explains the reasons for entering into this contract without conducting a competitive process, and details when the department intends to initiate a competitive process for the future award of these services. For any such contract, where the vendor has previously provided services to the county, attach a copy of the most recent evaluation of the vendor's performance. If the contractor has not received a satisfactory evaluation, the department must explain why the contractor should nevertheless be permitted to contract with the county. |
| In certain limited circumstances, conducting a competitive process and/or completing performance evaluations may not be possible because of the nature of the human services program, or because of a compelling need to continue services through the same provider. In those circumstances, attach an explanation of why a competitive process and/or performance evaluation is inapplicable. |
| VII. □ This is a public works contract for the provision of architectural, engineering or surveying services. The attached memorandum provides details of the department's compliance with Board of Supervisors' Resolution No. 928 of 1993, including its receipt and evaluation of annual Statements of Qualifications & Performance Data, and its negotiations with the most highly qualified firms. |
| Instructions with respect to Sections VIII, IX and X: All Departments must check the box for VIII. |
| Then, check the box for either IX or X, as applicable. VIII. Participation of Minority Group Members and Women in Nassau County |
| Contracts. The selected contractor has agreed that it has an obligation to utilize best efforts to hire MWBE sub-contractors. Proof of the contractual utilization of best efforts as outlined in Exhibit "EE" may be requested at any time, from time to time, by the Comptroller's Office prior to the approval of claim vouchers. |
| IX. Department MWBE responsibilities. To ensure compliance with MWBE requirements as outlined in Exhibit "EE", Department will require vendor to submit list of sub-contractor requirements prior to submission of the first claim voucher, for services under this contract being submitted to the Comptroller. |
| X. Vendor will not require any sub-contractors. |
| In addition, if this is a contract with an individual or with an entity that has only one or two employees: □ a review of the criteria set forth by the Internal Revenue Service, Revenue Ruling No. 87-41, 1987-1 C.B. 296, attached as Appendix A to the Comptroller's Memorandum, dated February 13, 2004, concerning independent contractors and employees indicates that the contractor would not be considered an employee for federal tax purposes. |
| Department Head Signature |
| 9/3/21 |
| Date |



COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

| 1. Has | the ven | dor or a | any corp | orate officers of the vendor provided campaign contributions pursuant to the New York |
|---------|-----------|----------|------------|---|
| State E | Election | Law in | (a) the p | period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning |
| April 1 | , 2018, t | he peri | od begin | nning two years prior to the date of this disclosure and ending on the date of this |
| disclos | ure, to t | he can | npaign co | ommittees of any of the following Nassau County elected officials or to the campaign |
| commi | ttees of | any ca | ndidates | for any of the following Nassau County elected offices: the County Executive, the Count |
| Clerk, | the Con | nptrolle | r, the Dis | strict Attorney, or any County Legislator? |
| | | | | |
| YES | | NO | Х | If yes, to what campaign committee? |

2. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

The undersigned further certifies and affirms that the contribution(s) to the campaign committees identified above were made freely and without duress, threat or any promise of a governmental benefit or in exchange for any benefit or remuneration.

Courtney Bryan [BRYANC@COURTINNOVATION.ORG]

Electronically signed and certified at the date and time indicated by:

Dated: 08/06/2021 05:26:01 PM Vendor: Fund for the City of New York, Inc., Center for Court Innovation

Title: Executive Director

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COUNTY OF NASSAU

LOBBYIST REGISTRATION AND DISCLOSURE FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization. The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

None.

| 2. List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State): |
|--|
| None. |
| |
| 3. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated: |
| None. |
| 4. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activity listed. See the last page for a complete description of lobbying activities. |
| None. |
| |
| 5. The name of persons, organizations or governmental entities before whom the lobbyist expects to lobby: |
| None. |
| |

6. If such lobbyist is retained or employed pursuant to a written agreement of retainer or employment, you must attach a copy of such document; and if agreement of retainer or employment is oral, attach a written statement of the substance thereof. If the written agreement of retainer or employment does not contain a signed authorization from the client by whom you have been authorized to lobby. separately attach such a written authorization from the client.

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| 7. Has the lobbyist/lobbying organization or any of its corporate officers provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator? YES NO X If yes, to what campaign committee? If none, you must so state: | | | | | | | | | |
|--|---------|---|--|--|--|--|--|--|--|
| | | | | | | | | | |
| | | | | | | | | | |
| I understand that copies of this form will be sent to the Nassau County Department of Information Technology ("IT") to be posted on the County's website. | | | | | | | | | |
| I also understand that upon termination of retainer, employment or designation I must give written notice to the County Attorney within thirty (30) days of termination. | | | | | | | | | |
| VERIFICATION: The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate. | | | | | | | | | |
| The undersigned further certifies and affirms that the contribution(s) to the campaign committees listed above were made freely and without duress. threat or any promise of a governmental benefit or in exchange for any benefit or remuneration. | | | | | | | | | |
| Electronically signed and certified at the date a Courtney Bryan [BRYANC@COURTINNOVA] | • | | | | | | | | |
| Dated: 08/06/2021 05:27:25 PM | Vendor: | Fund for the City of New York, Inc., Center for Court Innovation | | | | | | | |
| | Title: | Executive Director | | | | | | | |

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The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

The term "lobbying" or "lobbying activities" <u>does not include:</u> Persons engaged in drafting legislation, rules, regulations or rates; persons advising clients and rendering opinions on proposed legislation, rules, regulations or rates, where such professional services are not otherwise connected with legislative or executive action on such legislation or administrative action on such rules, regulations or rates; newspapers and other periodicals and radio and television stations and owners and employees thereof, provided that their activities in connection with proposed legislation, rules, regulations or rates are limited to the publication or broadcast of news items, editorials or other comment, or paid advertisements; persons who participate as witnesses. attorneys or other representatives in public rule-making or ratemaking proceedings of a County agency, with respect to all participation by such persons which is part of the public record thereof and all preparation by such persons for such participation; persons who attempt to influence a County agency in an adjudicatory proceeding, as defined by § 102 of the New York State Administrative Procedure Act.

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| Business Ac | ldroce: | 520 8th Avenue | | | |
|--|---|--------------------------|---|-----------------------|-------|
| City: | New York | | ovince/Territory: NY | Zip/Postal Code: | 10018 |
| Country | US | | , | <u> </u> | |
| Telephone: | (646) 386-37 | 00 | | | |
| Other prese | nt address(es) | | | | |
| City: | | State/Pr | ovince/Territory: | Zip/Postal Code: | |
| Country: | | | | <u> </u> | |
| Telephone: | | | | | |
| President Chairman of Chief Exec. | f Board _ Officer _ | business and starting da | Treasurer Shareholder Secretary | plicable) | |
| President Chairman of | f Board Officer cial Officer | | Treasurer Shareholder | pplicable) | |
| President Chairman of Chief Exec. Chief Financ Vice Preside (Other) | f Board Officer cial Officer | | Treasurer Shareholder Secretary | Start Date | |
| President Chairman of Chief Exec. Chief Financ Vice Preside (Other) | f Board Officer cial Officer | | Treasurer Shareholder Secretary | | |
| President Chairman of Chief Exec. Chief Finance Vice Preside (Other) Type Other | f Board Officer cial Officer ent | Description | Treasurer Shareholder Secretary Partner | Start Date 03/16/2020 | |

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| | NO X If Yes, provide details. |
|----------|---|
| | |
| | |
| | |
| Has a | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in th |
| | rs while you were a principal owner or officer? |
| YES | NO X If Yes, provide details. |
| | |
| | |
| | |
| An aff | firmative answer is required below whether the sanction arose automatically, by operation of law, or |
| | action taken by a government agency. Provide a detailed response to all guestions checked "YES". |
| ore sp | pace, photocopy the appropriate page and attach it to the questionnaire. |
| | |
| | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Se |
| | ich you have been a principal owner or officer: |
| a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | taken. |
| | tancii. |
| | |
| | |
| | |
| | |
| b. | Been declared in default and/or terminated for cause on any contract, and/or had any contracts |
| b. | cancelled for cause? |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| b. | cancelled for cause? |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. |
| b. c. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any pending that could formally debar or otherwise affect such business's ability to bid or propose on |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any |

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| 8. | any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever ed? NO X If 'Yes', provide details for each such instance. (Provide a detailed response to estions check "Yes". If you need more space, photocopy the appropriate page and attached it to the ionnaire.) | |
|----|--|--|
| | | |
| 9. | | |
| 0. | a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

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| YES | nse to Quest NO | ion 5? X | or on behalf of the submitting business entity and/or an affiliated business. If yes, provide an explanation of the circumstances and corrective action to |
|--------------------------------|-----------------------------|-------------|---|
| | | | |
| In addition | on to the info | rmation | provided, in the past 5 years has any business or organization listed in resp |
| | | | ect of a criminal investigation and/or a civil anti-trust investigation and/or any |
| | | | government agency, including but not limited to federal, state, and local regul |
| | | | rincipal owner or officer? |
| YES | NO | Χ | If yes, provide an explanation of the circumstances and corrective action ta |
| | | | |
| | | | |
| | | | |
| | | 01/01/01 | or this business, or any other affiliated business listed in response to Quest |
| In the pa | st 5 years, h | ave you | i or this business, or arry other armated business hoted in response to equest |
| • | | • | s a result of judicial or administrative proceedings with respect to any profess |
| had any : licens <u>e h</u> | sanction imp <u>eld?</u> | osed a | s a result of judicial or administrative proceedings with respect to any profess |
| • | sanction imp | • | · |
| had any : licens <u>e h</u> | sanction imp <u>eld?</u> | osed a | s a result of judicial or administrative proceedings with respect to any profess |
| had any : licens <u>e h</u> | sanction imp <u>eld?</u> | osed a | s a result of judicial or administrative proceedings with respect to any profess |
| nad any : icens <u>e h</u> | sanction imp <u>eld?</u> | osed a | s a result of judicial or administrative proceedings with respect to any profes |
| had any i license h YES | sanction impeld? | x | s a result of judicial or administrative proceedings with respect to any profes |

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| I, Courtney Bryan , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|---|
| I, Courtney Bryan , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. Fund for the City of New York, Inc. |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Courtney Bryan [BRYANC@COURTINNOVATION.ORG] |
| Executive Director |
| Title |
| 08/31/2021 12:48:03 PM |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| | Principal Nam | ne: Lisett | e Nieves | | | | | |
|---|-----------------------|----------------------|--------------------|--------------------|------------------|--|--|--------------|
| | Date of birth: | 07/02 | 2/1968 | | | | | |
| | Home addres | s: 86 6th | h Ave. | | | | | |
| | City: | Brooklyn | | State/Province | ce/Territory: N | VΥ | Zip/Postal Code: | 11217 |
| | Country: | US | | | | | • | |
| | D ' A. | | 404.4 | | 04 5 | | | |
| | Business Ado City: | ness: New York | | ue of the Americ | | VV. | Zip/Postal Code: | 10013 |
| | Country | US TOIK | | State/Provinc | ce/Territory: N | N I | Zip/Postai Code. | 10013 |
| | - | 21292566 | 75 | | | | | |
| | releptione. | 21292500 | 13 | | | | | |
| | Other present | t address(e | es): | | | | | |
| | City: | | | State/Province | ce/Territory: | | Zip/Postal Code: | _ |
| | Country: | | | | | | | |
| | Telephone: | | | | | | | |
| | | | | | | | | |
| | List of other a | iddresses a | and telephone nu | ımbers attached | | | | |
| | Docitions hale | مانده مانده ماند | ling business on | d atautina data a | facab (abaal) | المحم الد | aabla\ | |
| | Positions neit | ın Submill | ting business and | a starting date of | l each (check a | ш аррп | cable) | |
| | President | | 09/01/2020 | | Treasurer | | | |
| | Chairman of I | Board | - | | Shareholder | 1 | | |
| | Chief Exec. C | | | | Secretary | - | | |
| | Chief Financia | | - | | Partner | 1 | | |
| | Vice Presider | | | | | - | | |
| | (Other) | | - | | | | | |
| | , | | | | | | | |
| | | an equit <u>y ir</u> | nterest in the bus | siness submitting | the questionna | aire? | | |
| | YES | NO | X If Yes, prov | vide details. | | | | |
| L | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Are there any | outstandin | na loone augrani | toos or any otho | r form of coouri | ity or lo | aca ar any othar tw | oo of |
| | | | | | | | ase or any other typ the questionnaire? | |
| | YES | _ | | vide details. | e pusitiess sub | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | i ine questionnalle: | |
| Г | TES | INO | X II res, pro | vide details. | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Within the pa | st 3 years, | have you been a | n principal owner | or officer of an | ny busir | ness or notfor-profit | organization |
| | | | itting the questic | | | - | • | J |
| | YES X | NO | | vide details. | | | | |
| | Chair, Guttma | an Commur | | | nd for Children | ; Truste | ee, Edwin Gould Fo | ln; Board |
| _ | | | | | | | | |

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| 6. | | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in the past s while you were a principal owner or officer? |
|--------|------------|--|
| | YES | X NO If Yes, provide details. |
| | The no | onprofit organizations listed have received contracts. |
| | | |
| result | t of any a | irmative answer is required below whether the sanction arose automatically, by operation of law, or as a action taken by a government agency. Provide a detailed response to all questions checked "YES". If you ace, photocopy the appropriate page and attach it to the questionnaire. |
| 7. | | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 ch you have been a principal owner or officer: |
| | a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | b. | Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | C. | Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NOX If yes, provide an explanation of the circumstances and corrective action taken. |
| | d. | Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NOX If yes, provide an explanation of the circumstances and corrective action taken. |

Mbr. NewSchools Venture Fund: Trustee, NYPL

6.

7.

Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or 8. been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever

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| • | NO X If 'Yes', provide details for each such instance. (Provide a detailed response lestions check "Yes". If you need more space, photocopy the appropriate page and attached it to the tionnaire.) |
|----|---|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other cran element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action |

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you

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| | prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? |
|-----|---|
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 11. | In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other |
| | type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 12. | In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 13. | For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, |
| | state or local taxes or other assessed charges, including but not limited to water and sewer charges? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |

been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local

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| I, Lisette Nieves , hereby acknowledge that a materially false state willfully or fraudulently made in connection with this form may result in rendering the submitting business entity any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. | |
|---|------|
| I, Lisette Nieves , hereby certify that I have read and understand a items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occur after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. | ring |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH TH QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBELY WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERMAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. Fund for the City of New York, Inc | BLE |
| Name of submitting business | |
| Electronically signed and certified at the date and time indicated by: Lisette Nieves [LN@FCNY.ORG] | |
| President | |
| Title | |
| 08/26/2021 12:17:39 PM | |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| i ililoipai i | lame: Michael Arad | | | |
|------------------------------|--|---|---|-------|
| Date of bir | th: <u>07/21/1969</u> | | | |
| Home add | ress: 19 Warwick Ave | | | |
| City: | Douglaston State/F | Province/Territory: NY | Zip/Postal Code: | 11363 |
| Country: | US | · | | |
| Business A | Address: 121 Avenue of the A | Americas, 6th Flor | | |
| City: | New York State/F | Province/Territory: NY | Zip/Postal Code: | 10013 |
| Country | US | | <u> </u> | |
| Telephone | 2129256675 | | | |
| Other pres | ent address(es): | | | |
| City: | | Province/Territory: | Zip/Postal Code: | _ |
| Country: | | | ' | |
| Telephone | | | | |
| | | | | |
| List of other | er addresses and telephone numbers att | ached | | |
| Daaitianal | and in automitting business and stagting | data of a a b / ab a alc all an | unlinahla) | |
| Positions | neld in submitting business and starting of | aate of each (check all ap | pplicable) | |
| President | | Treasurer | | |
| Chairman | of Board 11/05/2020 | Shareholder | | |
| Chief Exec | - | Secretary — | | |
| | ncial Officer | Partner | | |
| Vice Presi | dent | | | |
| (Other) | | | | |
| (0) | | | | |
| | | mitting the guestionnaire | ? | |
| Do you ha | ve an equity interest in the business sub | milling the questionnaire | • | |
| Do you ha | ve an equity interest in the business sub NO X If Yes, provide detail | | • | |
| | | | • | |
| | | | | |
| | | | | |
| YES | NO X If Yes, provide detail | S. | | |
| YES Are there a | NO X If Yes, provide detail | s. y other form of security o | r lease or any other ty | |
| YES Are there a | NO X If Yes, provide detail | s. y other form of security o | r lease or any other ty | |
| YES Are there a | NO X If Yes, provide detail | s. y other form of security or and the business submitt | r lease or any other ty | |
| Are there a contributio | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you | s. y other form of security or and the business submitt | r lease or any other ty | |
| Are there a contributio | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you | s. y other form of security or and the business submitt | r lease or any other ty | |
| Are there a contributio | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you | s. y other form of security or and the business submitt | r lease or any other ty | |
| Are there a contributio | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you | s. y other form of security or and the business submitt | r lease or any other ty | |
| Are there a contribution YES | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you NO X If Yes, provide detail past 3 years, have you been a principal | y other form of security or and the business submitts. | r lease or any other ty ing the questionnaire? | |
| Are there a contribution YES | NO X If Yes, provide detail any outstanding loans, guarantees or any n made in whole or in part between you NO X If Yes, provide detail | y other form of security or and the business submitts. | r lease or any other ty ing the questionnaire? | |
| Are there a contribution YES | NO X If Yes, provide detail any outstanding loans, guarantees or any nade in whole or in part between you NO X If Yes, provide detail past 3 years, have you been a principal the one submitting the questionnaire? | y other form of security or and the business submitt s. | r lease or any other ty ing the questionnaire? | |

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| | I am a | minority owner of the firm Handel Architects in New York |
|--------|--------|---|
| | | |
| 6. | | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in the past rs while you were a principal owner or officer? NO X If Yes, provide details. |
| | | |
| | | |
| result | of any | firmative answer is required below whether the sanction arose automatically, by operation of law, or as a action taken by a government agency. Provide a detailed response to all questions checked "YES". If you bace, photocopy the appropriate page and attach it to the questionnaire. |
| 7. | | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 ch you have been a principal owner or officer: |
| | a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | b. | Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES NOX If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | C. | Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not |
| | | limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | d. | Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | | |

Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or 8. been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever

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| • | NO X If 'Yes', provide details for each such instance. (Provide a detailed response lestions check "Yes". If you need more space, photocopy the appropriate page and attached it to the tionnaire.) |
|----|---|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other cran element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action |

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you

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| | prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? |
|-----|---|
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 11. | In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other |
| | type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 12. | In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| | |
| 13. | For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, |
| | state or local taxes or other assessed charges, including but not limited to water and sewer charges? |
| | YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |

been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local

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| I, Michael Arad , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|---|
| I, Michael Arad , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. |
| Fund for the City of New York, Inc. |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Michael Arad [MA@FCNY.ORG] |
| Board Chair |
| Title |
| 11/23/2021 08:55:22 AM |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| Date of birth: | Ester Fuchs | 8 | | | | |
|--|-------------|---------------------------|-------------------------------|--------|--------------------------|-------|
| | 08/14/1951 | | | | | |
| Home address: | 420 Riversi | | | | | |
| City: Nev | v York | State | Province/Territory: | NY | Zip/Postal Code: | 10025 |
| Country: US | | | | | | |
| Business Address | : | 121 Avenue of the | Americas, 6th Floor | | | |
| | v York | | Province/Territory: | NY | Zip/Postal Code: | 10013 |
| Country US | | | , <u>-</u> | | • | |
| Telephone: 212 | 9256675 | | | | | |
| Other present add | lress(es)· | | | | | |
| City | | State | Province/Territory: | | Zip/Postal Code: | _ |
| Country: | | | _ | | | |
| Telephone: | | | | | | |
| Chief Exec. Office Chief Financial Office | r | | Shareholder Secretary Partner | | | |
| Vice President (Other) | | | T attrict | | | |
| Vice President (Other) | | Description | T dittle | | Start Date | |
| Vice President | | Description Vice Chair | | | Start Date 11/05/2020 | |
| Vice President (Other) Type Other | · <u> </u> | Vice Chair | bmitting the question | naire? | II. | |

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| | NO X If Yes, provide details. |
|----------|---|
| | |
| | |
| | |
| Has a | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in th |
| | rs while you were a principal owner or officer? |
| YES | NO X If Yes, provide details. |
| | |
| | |
| | |
| An aff | firmative answer is required below whether the sanction arose automatically, by operation of law, or |
| | action taken by a government agency. Provide a detailed response to all guestions checked "YES". |
| ore sp | pace, photocopy the appropriate page and attach it to the questionnaire. |
| | |
| | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Se |
| | ich you have been a principal owner or officer: |
| a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | taken. |
| | tancii. |
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| | |
| b. | Been declared in default and/or terminated for cause on any contract, and/or had any contracts |
| b. | cancelled for cause? |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| b. | cancelled for cause? |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| b. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. |
| b. c. | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any |
| | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any pending that could formally debar or otherwise affect such business's ability to bid or propose on |
| C. | Cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective act taken. Been suspended by any government agency from entering into any contract with it; and/or is any |

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| 8. | been to last 7 years initiated YES all que | any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever ed? NO X If 'Yes', provide details for each such instance. (Provide a detailed response to estions check "Yes". If you need more space, photocopy the appropriate page and attached it to the ionnaire.) |
|----|--|--|
| | | |
| 9. | | |
| 0. | a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

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| to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation an type of investigation by any government agency, including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal, state, and local contents agency including but not limited to federal contents agency including the contents agency including the contents agency including the contents agency in the co |
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| In addition to the information provided, in the past 5 years has any business or organization listed to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and type of investigation by any government agency, including but not limited to federal, state, and logagencies while you were a principal owner or officer? YES NO X If yes, provide an explanation of the circumstances and corrective and c |
| to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation an type of investigation by any government agency, including but not limited to federal, state, and logagencies while you were a principal owner or officer? |
| agenci <u>es while</u> you w <u>ere a pr</u> incipal owner or officer? |
| · |
| YES NO X If yes, provide an explanation of the circumstances and corrective a |
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| In the past 5 years, have you or this business, or any other affiliated business listed in response t |
| had any sanction imposed as a result of judicial or administrative proceedings with respect to any |
| license held? |
| YES NO X If yes, provide an explanation of the circumstances and corrective a |
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| | Ester Fuchs , hereby acknowledge that a materially false statement fully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|-----------------------|--|
| kno afto info | Ester Fuchs , hereby certify that I have read and understand all the ms contained in this form; that I supplied full and complete answers to each item therein to the best of my bwledge, information and belief; that I will notify the County in writing of any change in circumstances occurring er the submission of this form; and that all information supplied by me is true to the best of my knowledge, ormation and belief. I understand that the County will rely on the information supplied in this form as additional succement to enter into a contract with the submitting business entity. |
| A N QL WI MA | RTIFICATION MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS JESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE TH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON AKING THE FALSE STATEMENT TO CRIMINAL CHARGES. and for the City of New York, Inc. |
| | me of submitting business |
| | ectronically signed and certified at the date and time indicated by: ter Fuchs [EF@FCNY.ORG] |
| Vic | ee Chair |
| Titl | е |
| 11/ | /08/2021 04:46:39 PM |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| Date of birtl Home addre | ame: Dana Buchman | |
|---|--|-------|
| Home addr | | |
| | | 400/0 |
| City: | New York State/Province/Territory: NY Zip/Postal Code: | 10013 |
| Country: | US | |
| Business A | ddress: 121 Avenue of the Americas, 6th Floor | |
| City: | New York State/Province/Territory: NY Zip/Postal Code: | 10013 |
| Country | US | |
| Telephone: | 2129256675 | |
| Other prese | ent address(es): | |
| City: | State/Province/Territory: NY Zip/Postal Code: | |
| Country: | US States Formerly: | |
| Telephone: | | |
| | | |
| President Chairman of Chief Exec. | | |
| | | |
| | | |
| Chief Finan | | |
| Vice Presid | | |
| (Other) | | |
| Do you hav | re an equity interest in the business submitting the questionnaire? | |
| | NO X If Yes, provide details. | |
| YES | | |
| 169 | | |
| IEO | | |
| 169 | | |
| Are there a | ny outstanding loans, guarantees or any other form of security or lease or any other t | |
| Are there a | n made in whole or in part between you and the business submitting the questionnair | |
| Are there a | | |
| Are there and contribution | n made in whole or in part between you and the business submitting the questionnair | |
| Are there a | n made in whole or in part between you and the business submitting the questionnair | |
| Are there a | n made in whole or in part between you and the business submitting the questionnair | |
| Are there all contribution YES | made in whole or in part between you and the business submitting the questionnaire NO X If Yes, provide details. | e? |
| Are there as contribution YES | made in whole or in part between you and the business submitting the questionnaire NO X If Yes, provide details. Do ast 3 years, have you been a principal owner or officer of any business or notfor-pro | e? |
| Are there and contribution YES | made in whole or in part between you and the business submitting the questionnaire NO X If Yes, provide details. | e? |

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| 6. | Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer? | | | | | | | | |
|----------|--|-----------------------|---------------|------|-----------|---|--|--|--|
| | YES | IS WITHE | you we TNO | | a μπ Χ | If Yes, provide details. | | | |
| | 120 | | 110 | l . | | in 100, provide detaile. | | | |
| <u>-</u> | | | | | | | | | |
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| result | of any | action ta | aken by | / a | gove | uired below whether the sanction arose automatically, by operation of law, or as a rnment agency. Provide a detailed response to all questions checked "YES". If you propriate page and attach it to the questionnaire. | | | |
| 7. | | | | | | ou and/or any affiliated businesses or not-for-profit organizations listed in Section 5 incipal owner or officer: | | | |
| | a. | Been YES taken. | | ed I | | y government agency from entering into contracts with that agency? X If yes, provide an explanation of the circumstances and corrective action | | | |
| | | | | | | | | | |
| | b. | Boon | doclar | od i | n daf | ault and/or terminated for cause on any contract, and/or had any contracts | | | |
| | υ. | | lled for | | | ault and/or terminated for cause of any contract, and/or flad any contracts | | | |
| | | YES taken. | | N | 0 | X If yes, provide an explanation of the circumstances and corrective action | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | C. | | | | | rd of a contract and/or the opportunity to bid on a contract, including, but not | | | |
| | | YES taken. | | N | | neet pre-qualification standards? X If yes, provide an explanation of the circumstances and corrective action | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | d. | | ng that | | | any government agency from entering into any contract with it; and/or is any action rmally debar or otherwise affect such business's ability to bid or propose on | | | |
| | | YES taken. | | N | 0 | X If yes, provide an explanation of the circumstances and corrective action | | | |
| | | | | | | | | | |
| | | | | | | | | | |

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

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| ques | tionnaire.) |
|------|---|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crir an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

9.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

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| to Que | stion 5, been investigation | the subject by any gov | of a criminal inve | stigation and/or a civincluding but not limit | siness or organization il anti-trust investigatio ted to federal, state, a | on and/or any ot |
|--------|-----------------------------|---------------------------|-----------------------|---|--|-------------------|
| YES | NO | | • | | cumstances and correc | ctive action take |
| m me | pasi 5 years, | | | | usiness listed in respo | mse to Question |
| had ar | y sanction im held? | posed as a | result of judicial of | or administrative proc | eedings with respect t | o any professio |

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| I, Dana Buchman | , hereby acknowledge that a materially false statement |
|--|--|
| willfully or fraudulently made in connection with this form made | ay result in rendering the submitting business entity and/or |
| any affiliated entities non-responsible, and, in addition, may | |
| | , |
| I, Dana Buchman | , hereby certify that I have read and understand all the |
| items contained in this form; that I supplied full and complet | e answers to each item therein to the best of my |
| knowledge, information and belief; that I will notify the Cour | ity in writing of any change in circumstances occurring |
| after the submission of this form; and that all information su | pplied by me is true to the best of my knowledge, |
| information and belief. I understand that the County will rely | on the information supplied in this form as additional |
| inducement to enter into a contract with the submitting busi | ness entity. |
| | |
| CERTIFICATION | |
| A MATERIALLY FALSE STATEMENT WILLFULLY OR FR | |
| QUESTIONNAIRE MAY RESULT IN RENDERING THE SU | |
| WITH RESPECT TO THE PRESENT BID OR FUTURE BIL | |
| MAKING THE FALSE STATEMENT TO CRIMINAL CHARG | GES. |
| | |
| Fund for the City of New York | |
| Name of submitting business | |
| | |
| Electronically signed and certified at the date and time indic | ated by: |
| Dana Buchman [DB@FCNY.ORG] | |
| D 10 1 | |
| Board Secretary | |
| Title | |
| 09/20/2021 02·45·55 PM | |
| U3//U//U/ 1 U/ 40 00 EIVI | |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| ١. | Principal Name: | Georgia Boothe | | | | | |
|----|---------------------------------------|--|-----------------|---------------------------|-----------|-----------------------|--------------|
| | Date of birth: | 10/04/1969 | | | | | |
| | Home address: | 114 Washingotn Ave | | | | | |
| | City: Br | rooklyn | State/Provi | nce/Territory: 1 | NY | Zip/Postal Code: | 11205 |
| | Country: US | S | | · — | | | |
| | Business Addres | ss: 121 Aven | ue of the Ame | ricas, 6th Floor | | | |
| | · · · · · · · · · · · · · · · · · · · | ew York | State/Provi | nce/Territory: <u> </u> 1 | NY | Zip/Postal Code: | 10013 |
| | Country US | S | | | | | |
| | Telephone: 21 | 129256675 | | | | | |
| | Other present ac | ddress(es): | | | | | _ |
| | | | State/Provi | nce/Territory: | | Zip/Postal Code: | |
| | Country: | | | | | | |
| | Telephone: | | | | | | |
| | List of other add | lresses and telephone nu | mbers attache | ed | | | |
| | | ' | | | | | |
| • | Positions held in | n submitting business and | d starting date | of each (check a | all appli | cable) | |
| | President | | | Treasurer | 11/16 | 6/2020 | |
| | Chairman of Boa | ard | | Shareholder | | | |
| | Chief Exec. Office | cer | | Secretary | | | |
| | Chief Financial (| | | Partner | | | |
| | Vice President | - | | - | | | |
| | (Other) | | | _ | | | |
| | Do you have an | aquity interest in the bus | inaaa aubmitti | na tha ayaatiann | oiro? | | |
| • | | equity interest in the bus | /ide details. | ng the questionin | iaire? | | |
| | | 10 X 11 1 C3, prov | ride details. | | | | |
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| | | | | | | | |
| | Are there enviou | utatanding laana guarant | ooo or ony oth | or form of occur | itu or lo | aaa ar any athar tu | oo of |
| | • | utstanding loans, guarant de in whole or in part betv | • | | • | , , | |
| | | | - | ille busilless sur | ommung | the questionnaire | |
| | YES N | NO X If Yes, prov | /ide details. | | | | |
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| | | | | | | | |
| | 14001 | | | | | | |
| ı | | 3 years, have you been a | | er or officer of ar | ny busir | ness or nottor-profit | organization |
| | | ne submitting the questio | | | | | |
| | YES N | NO X If Yes, prov | vide details. | | | | |
| | • | | | | | | |

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| 6. | Has any governmental entity awarded any contracts to a business or organization listed in Section 5 in the past 3 years while you were a principal owner or officer? | | | | | | | |
|--------|--|-----------------------|---------------|------|------------------|--|--|--|
| | YES | IS WITHE | you we TNO | | <u>a μπ</u> Χ | If Yes, provide details. | | |
| | 120 | | 110 | | | in 100, provide details. | | |
| - | | | | | | | | |
| | | | | | | | | |
| result | of any | action ta | aken by | y a | gove | uired below whether the sanction arose automatically, by operation of law, or as a rnment agency. Provide a detailed response to all questions checked "YES". If you opropriate page and attach it to the questionnaire. | | |
| 7. | | | | | | ou and/or any affiliated businesses or not-for-profit organizations listed in Section 5 incipal owner or officer: | | |
| | a. | Been YES taken. | | ed I | | y government agency from entering into contracts with that agency? X If yes, provide an explanation of the circumstances and corrective action | | |
| | | | | | | | | |
| | b. | | | | | ault and/or terminated for cause on any contract, and/or had any contracts | | |
| | | YES taken. | lled for | N | | X If yes, provide an explanation of the circumstances and corrective action | | |
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| | | _ | | | | | | |
| | C. | | | | | ard of a contract and/or the opportunity to bid on a contract, including, but not neet pre-qualification standards? | | |
| | | YES taken. | |] N | | X If yes, provide an explanation of the circumstances and corrective action | | |
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| | d. | | ng that | | | any government agency from entering into any contract with it; and/or is any action rmally debar or otherwise affect such business's ability to bid or propose on | | |
| | | YES taken. | | N | 0 [| X If yes, provide an explanation of the circumstances and corrective action | | |
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| | | | | | | | | |

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

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| ques | tionnaire.) |
|------|---|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crir an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

9.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

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| to Que | stion 5, been investigation | the subject by any gov | of a criminal inve | stigation and/or a civincluding but not limit | siness or organization il anti-trust investigatio ted to federal, state, a | on and/or any ot |
|--------|-----------------------------|---------------------------|-----------------------|---|--|-------------------|
| YES | NO | | • | | cumstances and correc | ctive action take |
| m me | pasi 5 years, | | | | usiness listed in respo | mse to Question |
| had ar | y sanction im held? | posed as a | result of judicial of | or administrative proc | eedings with respect t | o any professio |

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| I, Georgia Booth , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|--|
| I, Georgia Booth , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. |
| Fund for the City of New York |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Georgia Boothe [GB@FCNY.ORG] |
| |
| Board Treasurer |
| Title |
| 09/20/2021 02:42:50 PM |

Date

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Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

| Date: | 08/28/2019 | |
|----------------|--|----------|
| 1) | Proposer's Legal Name: Fund for the City of New York | |
| 2) | Address of Place of Business:121 6th Avenue | |
| | City: New York State/Province/Territory: NY Zip/Postal Code: 10013 | |
| | Country: US | |
| Addre | ss: 520 8th Avenue, 18th Floor | |
| City: Count | New York State/Province/Territory: NY Zip/Postal Code: 10018 | |
| Start I | | |
| | | |
| • | | |
| 3) | Mailing Address (if different): 520 8th Avenue, 18th Floor | — |
| | City: New York State/Province/Territory: Zip/Postal Code: | |
| | Country: | |
| | Phone: (212) 925-6676 | |
| F | Does the business own or rent its facilities? Rent If other, please provide details: | |
| | 501(c)(3) | |
| | | |
| 4) | Dun and Bradstreet number: 07-3279945 | |
| 5) | Federal I.D. Number: 13-2612524 | |
| 6) | The proposer is a: Other (Describe) 501(c)(3) | |
| | | |
| 7) | Does this business share office space, staff, or equipment expenses with any other business? | |
| · [| YES NO X If yes, please provide details: | <u> </u> |
| | | |

8) Does this business control one or more other businesses?

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| | YES NO X If yes, please provide details: |
|-----|--|
| | |
| 9) | Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business? YES X NO If yes, please provide details: Affiliated with National Center for Civic Innovation and International Centre for Civic Innovation. |
| 10) | Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated? YES NO X If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract). |
| 11) | Has the proposer, during the past seven years, been declared bankrupt? YES NO X If yes, state date, court jurisdiction, amount of liabilities and amount of assets |
| 12) | In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business. YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| 13) | In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business. YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| | |
| 14) | Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business: a) Any felony charge pending? YES NO X If yes, provide details for each such investigation, an explanation of the |
| | circumstances and corrective action taken. |

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| b) Any misdemeanor charge pending? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
|--|
| |
| c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO X If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire. |
| |
| Conflict of Interest: a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists." (i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County. |
| No conflict exists. |
| (ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau |

15)

16)

17

County.

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| | | No conflict exists. |
|----------|---------------|--|
| | | |
| | | (iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County. |
| | | No conflict exists. |
| | b) | Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future. |
| | | The Fund's Board of Directors complete annual conflict of interest forms. |
| | | de a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive rience in your profession. Any prior similar experiences, and the results of these experiences, must be fied. |
| | Have YES | you previously uploaded the below information under in the Document Vault? NO X |
| | Is the YES | proposer an individual? NO X Should the proposer be other than an individual, the Proposal MUST include: |
| | | Date of formation; 02/01/1968 |
| | · _ | Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain. |
| | | No individuals with a financial interest in the company have been attached. |
| No indi | ividual | s with a financial interest in the company have been attached |
| | iii) | Name, address and position of all officers and directors of the company. If none, explain. |
| No offic | cers ai | nd directors from this company have been attached. |
| | | 1 File(s) Uploaded: Board List 7.2018.pdf |
| | iv) | State of incorporation (if applicable); NY |
| | v) | The number of employees in the firm; 899 |
| | vi) | Annual revenue of firm; 105389402 |
| | vii) | Summary of relevant accomplishments Summary of relevant accomplishments attached. |

1 File(s) Uploaded: Business History Form Attachment 1 (003).pdf

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Copies of all state and local licenses and permits. viii)

E-Mail Address driskell@robinhood.org

Fax #

| 50 | of years in business. | | | | |
|--|--|------------------------------------|-----------------------|--|--|
| 30 | _ | | | | |
| Provide any other | er information which would be approp | riate and helpful in determining | the Proposer's capa | | |
| | perform these services. | , , | ' ' | | |
| Attached. | | | | | |
| | | | | | |
| 1 File(s) Upload | ed: Business History Form Attachme | nt 2.pdf | | | |
| Drovido nomos o | and addresses for no fower than three | references for whom the Brane | soor had provided air | | |
| | and addresses for no fewer than three references for whom the Proposer has provided simil are qualified to evaluate the Proposer's capability to perform this work. | | | | |
| Services of who | are qualified to evaluate the Proposei | is capability to perform this work | ĸ. | | |
| Company | New York City Mayor's Office of Crir | minal Justice | | | |
| Contact Person | | | | | |
| Address | One Centre Street, Room 1012N | | | | |
| City | New York | State/Province/Territory | NY | | |
| Country | US | | - | | |
| Telephone | (646) 576-3471 | | | | |
| Fax # | (212) 312-0825 | | | | |
| E-Mail Address | GFoley@cityhall.nyc.gob | | | | |
| | | | | | |
| _ | | | | | |
| Company | New York STate Unified Court Syste | em - Red Hook Community Just | ice Center | | |
| Contact Person | Judge Alex Calabrese | | | | |
| Address | 88 Visitation Place | O (D | N 13 / | | |
| City | Brooklyn | State/Province/Territory | NY | | |
| Country | US | | | | |
| Telephone Fax # | (718) 923-8225 | | | | |
| Fax # E-Mail Address | and abra @ pyroqueta gov | | | | |
| E-IVIAII Address | acalabre@nycourts.gov | | | | |
| | | | | | |
| | | | | | |
| Company | Robin Hood Foundation | | | | |
| | Robin Hood Foundation Kwaku Driskell | | | | |
| Contact Person | Kwaku Driskell | | | | |
| Company Contact Person Address City | | State/Province/Territory | NY | | |

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| I, Alexandrea Lee willfully or fraudulently made in connection with any affiliated entities non-responsible, and, in a | , hereby acknowledge that a materially false statement this form may result in rendering the submitting business entity and/or addition, may subject me to criminal charges. |
|--|--|
| knowledge, information and belief; that I will not the submission of this form; and that all information | , hereby certify that I have read and understand all the and complete answers to each item therein to the best of my orify the County in writing of any change in circumstances occurring after ation supplied by me is true to the best of my knowledge, information y on the information supplied in this form as additional inducement to ses entity. |
| CERTIFICATION | |
| QUESTIONNAIRE MAY RESULT IN RENDER | JLLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS RING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON INAL CHARGES. |
| Name of submitting business: _Fund for | the City of New York |
| Electronically signed and certified at the date a Alexandrea Lee [ALEE1@NYCOURTS.GOV] | and time indicated by: |
| Development Manager | |
| Title | |
| 04/20/2021 11:44:30 AM | |
| Date | |

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Board of Directors

Michael Arad (Chair), Partner, Handel Architects LLP; Designer, World Trade Center Memorial.

Georgia Boothe (Treasurer), Executive Vice President, Children's Aid; former Executive President, Pathways to Housing NY.

Dana Buchman (Secretary), Fashion Designer; Chair, Promise Project; Author of "A Special Education: One Family's Journey Through the Maze of Learning Disabilities;" Member of the Council of Fashion Designers America.

Ester Fuchs (Vice Chair), Professor of International and Public Affairs and Political Science, and Director, Urban and Social Policy Program, Columbia University; former Special Advisor on Governance and Strategic Planning to Mayor Michael R. Bloomberg.

Linda Lausell Bryant, Master Teacher; Clinical Associate Professor; Katherine and Howard Aibel Executive-in Residence; former Executive Director, Inwood House; former Associate Commissioner, Office of Youth Development at the New York City Administration for Children's Services.

Lisette Nieves, President, Fund for the City of New York; Clinical Professor, Educational Leadership & Policy Studies, Steinhardt School of Culture, Education & Human Development, New York University; Belle Zeller Distinguished Visiting Professor in Public Policy, City University of New York (CUNY); former Executive Director, Year Up NYC; former Adjunct Professor, Brooklyn College; former Chief of Staff, NYC Department of Youth and Community Development; Director of Special Projects for The After School Corporation (TASC).

David Steinberger, President and CEO of Arcadia Publishing; Chairman of the National Book Foundation; former President and CEO, Perseus Books Group; former President, Adult Trade Group and Corporate Strategy and International at HarperCollins; Management Consultant, Booz Allen Hamilton and NYC Deputy Transportation Commissioner.

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

| Name of the Entity: Fund for the City of New York, Center for Court Innovation | | | | | | | |
|--|-------------|--|--|--|--|--|--|
| ddress: 520 8th Avenue, 18th Floor | | | | | | | |
| ity: New York State/Province/Territory: NY Zip/Postal Code: 10018 | | | | | | | |
| ountry: US | | | | | | | |
| Entity's Vendor Identification Number: 13-2612524 | | | | | | | |
| Type of Business: Other (specify) 501 c3 Nonprofit | | | | | | | |
| 4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary): | | | | | | | |
| File(s) uploaded Board List 05.2021.pdf | | | | | | | |
| | | | | | | | |
| irst Name Lisette Ast Name Nieves II Suffix ddress ity NEW YORK State/Province/Territory: NY Zip/Postal Code: 10013 | _ _ _ | | | | | | |
| ountry US | | | | | | | |
| osition President President | — | | | | | | |
| irst Name Courtney | | | | | | | |
| ast Name Bryan | | | | | | | |
| II Suffix Suffix ddress 121 Avenue of the Americas | | | | | | | |
| ity New York State/Province/Territory: NY Zip/Postal Code: 10013 | _ | | | | | | |
| ountry US osition Executive Director | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section. | | | | | | | |
| none, explain. one. | | | | | | | |
| UIIC. | | | | | | | |

No shareholders, members, or partners have been attached to this form.

6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract.

| None. | |
|--|---|
| | |
| "None." The t to influence - legislators or Commission. property subje | byists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter erm "lobbyist" means any and every person or organization retained, employed or designated by any client or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Such matters include, but are not limited to, requests for proposals, development or improvement of real ect to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, unsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties. |
| | Are there lobbyists involved in this matter? YES NO X |
| | (a) Name, title, business address and telephone number of lobbyist(s): |
| | None. |
| | (b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities. None. (c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State): None. |
| l | NOTIC. |
| signatory of th | ΓΙΟΝ: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a ne firm for the purpose of executing Contracts. ned affirms and so swears that he/she has read and understood the foregoing statements and they are, to |
| | edge, true and accurate. |
| | signed and certified at the date and time indicated by: an [BRYANC@COURTINNOVATION.ORG] |
| Dated: | 08/12/2021 09:48:12 AM |
| Title: | Executive Director |
| | |

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

AMENDMENT NO. 1

AMENDMENT (together with any appendices or exhibits hereto, this "<u>Amendment</u>") dated as of the date (the "<u>Effective Date</u>") that this Amendment is executed by Nassau County, between (<u>i</u>) Nassau County, a municipal corporation having its principal office at 1550 Franklin Avenue, Mineola, New York 11501 (the "<u>County</u>"), acting for and on behalf of the County Department of Probation, having its principal office at 400 County Seat Drive, Mineola, New York 11501 (the "<u>Department</u>"); and (<u>ii</u>) Fund for the City of New York, Center for Court Innovation, a New York State not-for-profit corporation, having its principal office at 520 8th Avenue, 18th Floor, New York, New York 10018 (the "<u>Contractor</u>").

WITNESSETH

WHEREAS, pursuant to County contract number CQPB20000011 between the County and the Contractor, executed on behalf of the County on January 15, 2021 (the "Original Agreement"), the Contractor provides a Youth Court Coordinator for the Nassau County Youth Court, which is more fully described in the Original Agreement (the services contemplated by the Original Agreement, the "Services"); and

WHEREAS, the term of the Original Agreement is from October 1, 2019 through September 30, 2020 with four (4) additional one (1) year options to renew, subject to early termination as provided for under the Original Agreement (the "Original Term"); and

WHEREAS, the maximum amount that the County agreed to reimburse the Contractor for Services under the Original Agreement, as full compensation for the Services, was Ninety Seven Thousand One Hundred Sixty Nine Dollars (\$97,169.00) (the "Maximum Amount"); and

WHEREAS, the County desires to exercise one (1) additional one (1) year renewal option by both extending the Original Term and increasing the Maximum Amount.

NOW, THEREFORE, in consideration of the promises and mutual covenants contained in this Amendment, the parties agree as follows:

- 1. Renewal of Term. The Original Agreement shall be renewed and thereby extended by one (1) year, so that the termination date of the Original Agreement, as amended by this Amendment (the "Amended Agreement"), shall be September 30, 2021, subject to early termination as provided for under this Amended Agreement.
- 2. <u>Maximum Amount</u>. The Maximum Amount in the Original Agreement shall be increased by Ninety Nine Thousand One Hundred Seventy-Eight Dollars (\$99,178.00), so that the maximum amount that the County shall pay to the Contractor as full consideration for all Services provided under the Amended Agreement shall not exceed One Hundred Ninety Six Thousand Three Hundred Forty-Seven Dollars (\$196,347.00) (the "<u>Amended Maximum Amount</u>").
- 3. <u>Payment</u>. The maximum amount increase provided under this Amendment shall be payable to the Contractor in accordance with the attached Budget, Attachment B.

All other payment provisions in the Original Agreement remain unchanged and are in full force and effect.

IN WITNESS WHEREOF, the parties have executed this Amendment as of the Effective Date.

| FUND FOR THE CITY OF NEW YORK, CENTER FOR COURT INNOVATION | | | | |
|---|--|--|--|--|
| By: Name: Courtney Bryan Title: Executive Director Date: 120 21 | | | | |
| NASSAU COUNTY | | | | |
| By: Name: | | | | |
| Title: County Executive | | | | |
| Deputy County Executive | | | | |
| Date: | | | | |

PLEASE EXECUTE IN **BLUE** INK

| STATE OF NEW YORK))ss.: |
|---|
| COUNTY OF NASSAU) |
| on the day of in the year 2021 before me personally came to me personally known, who, being by me duly sworn, did depose and say that he or she resides in the County of; that he or she is the ferein and which executed the above instrument; and that he or she signed his or her name thereto by authority of the board of directors of said corporation. |
| CHANTE C RAMSEY NOTARY PUBLIC Notary Public, State of New York NO. 01RA6417217 Qualified in Kings County Commission Expires 05/10/2025 |
| STATE OF NEW YORK) |
|)ss.: COUNTY OF NASSAU) |
| On the day of in the year 20 before me personally came to me personally known, who, being by me duly sworn, did depose and say that he or she resides in the County of; that he or she is a Deputy County Executive of the County of Nassau, the municipal corporation described herein and which executed the above instrument; and that he or she signed his or her name thereto pursuant to Section 205 of the County Government Law of Nassau County. |

NOTARY PUBLIC

ATTACHMENT B

Fund for the City of New York: Center for Court Innovation Nassau County Department of Probation Peer Diversion Program October 1, 2020 - September 20, 2021

| PERSONNEL | | | |
|---|-----------------|------|--------|
| Coordinator, Youth Court | Jasmin, Michael | 100% | 56,300 |
| Project Director, Queens Youth Justice Center | McSwain, Erika | 5% | 4,760 |
| Subtotal | | | 61,060 |
| Fringe @ 32% | | | 19,539 |
| TOTAL PERSONNEL | | | 80,599 |
| OTPS | | | |
| TRAVEL | | | 2,790 |
| CELL PHONE COSTS | | | 660 |
| INDIRECT COSTS @ 18% | | | 15,129 |
| TOTAL OTPS | | | 18,579 |
| TOTAL | | | 99,178 |



CERTIFICATE OF INSURANCE COVERAGE

DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

| PART 1. To be completed by Disability and Paid Family Leave Ben | efits Carrier or Licensed Insurance Agent of that Carrier | | | | | |
|---|---|--|--|--|--|--|
| 1a. Legal Name & Address of Insured (use street address only) | 1b. Business Telephone Number of Insured | | | | | |
| Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., Wrap-Up Policy) | 1c. Federal Employer Identification Number of Insured or Social Security Number | | | | | |
| Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) | 3a Name of Insurance Carrier | | | | | |
| | 3b Policy Number of Entity Listed in Box "1a" | | | | | |
| | 3c Policy effective period | | | | | |
| 4. Policy provides the following benefits: A. Both disability and paid family leave benefits. B. Disability benefits only. C. Paid family leave benefits only. 5. Policy covers: A. All of the employer's employees eligible under the NYS Disability and Paid Family Leave Benefits Law. B. Only the following class or classes of employer's employees: | | | | | | |
| Under penalty of perjury, I certify that I am an authorized representative or insured has NYS Disability and/or Paid Family Leave Benefits insurance of | licensed agent of the insurance carrier referenced above and that the named overage as described above. | | | | | |
| Date Signed Elizabeth Tello | | | | | | |
| (Signature of insurance | carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier) | | | | | |
| Telephone Number (212) 553-8074 Name and Title: Eliz | abeth Tello – Assistant Director, Statutory Services | | | | | |
| IMPORTANT: If Boxes 4A and 5A are checked, and this form is signed by the insurance carrier's authorized representative or NYS Licensed Insurance Agent of that carrier, this certificate is COMPLETE. Mail it directly to the certificate holder. | | | | | | |
| If Box 4B, 4C or 5B is checked, this certificate is NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS Disability and Paid Family Leave Benefits Law. It must be mailed for completion to the Workers' Compensation Board, Plans Acceptance Unit, PO Box 5200, Binghamton, NY 13902-5200. | | | | | | |
| PART 2. To be completed by the NYS Workers' Compensation Board (Only if Box 4C or 5B of Part 1 has been checked) | | | | | | |
| State of New York Workers' Compensation Board According to information maintained by the NYS Workers' Compensation Board, the above-named employer has complied with the NYS Disability and Paid Family Leave Benefits Law with respect to all of his/her employees. | | | | | | |
| Date Signed By | Signature of Authorized NYS Workers' Compensation Board Employee) | | | | | |
| Telephone Number Name and Title | | | | | | |

Please Note: Only insurance carriers licensed to write NYS disability and paid family leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1. Insurance brokers are NOT authorized to issue this form.



Additional Instructions for Form DB-120.1

By signing this form, the insurance carrier identified in Box 3 on this form is certifying that it is insuring the business referenced in box "1 a" for disability and/or paid family leave benefits under the New York State Disability and Paid Family Leave Benefits Law. The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed as the certificate holder in Box 2.

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is cancelled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from coverage indicated on this Certificate. (These notices my be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in Box 3c, whichever is earlier

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Disability and/or Paid Family Leave Benefits contract of insurance only while the underlying policy is in effect.

Please Note: Upon the cancellation of the disability and/or paid family leave benefits policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of NYS Disability and/or Paid Family Leave Benefits Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Disability and Paid Family Leave Benefits Law.

DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

§220. Subd. 8

- (a) The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in employment as defined in this article, and not withstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand and twenty-one, the payment of family leave benefits for all employees has been secured as provided by this article. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any disability benefits to any such employee if so employed.
- (b) The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in employment as defined in this article and notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand eighteen, the payment of family leave benefits for all employees has been secured as provided by this article.



CERTIFICATE OF NYS WORKERS' COMPENSATION INSURANCE COVERAGE

| 1a. Legal Name & Address of Insured (use street address only) | 1b. Business Telephone Number of Insured | | | | |
|---|--|--|--|--|--|
| Fund for the City of New York, Inc. 121 Avenue of the Americas, 6th Floor New York, NY 10013 | (212) 925-6675 1c. NYS Unemployment Insurance Employer Registration Number of Insured | | | | |
| New Fork, NT 10013 | 1d. Federal Employer Identification Number of Insured or Social Security Number | | | | |
| | 14. I ederal Employer identification Number of insured of Social Security Number | | | | |
| Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., a Wrap-Up Policy) | 13-2612524 | | | | |
| Name and Address of Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Holder) | 3a. Name of Insurance Carrier GuideOne Mutual Insurance Company (NAIC#: 15032) | | | | |
| Nassau County- Office of the District Attorney | 3b. Policy Number of Entity Listed in Box "1a" | | | | |
| 262 Old Country Rd | 01-0015-131 | | | | |
| Mineola, NY 11501 | 3c. Policy effective period February 3, 2021 to February 3, 2022 | | | | |
| | 3d. The Proprietor, Partners or Executive Officers areName of Insurance Carrier X included. (Only check box if all partners/officers included) all excluded or certain partners/officers excluded. | | | | |

This certifies that the insurance carrier indicated above in box "3" insures the business referenced above in box "1a" for workers' compensation under the New Yor State Workers' Compensation Law. (To use this form, New York (NY) must be listed under Item 3A on the INFORMATION PAGE of the workers' compensation insurance policy). The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed above as the certificate holder in box "2".

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on the Certificate. (These notices may be sent by regular mail) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Workers' Compensation contract of insurance only while the underlying policy is in effect.

Please Note: Upon cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirement of the New York State Workers' Compensation Las.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

| Approved by: | James R. Van Vonderen | |
|--------------|--|------------------|
| | (Print name of authorized representative or licensed agent of the in | surance carrier) |
| Approved by: | James B. Van Venderen | July 1, 2020 |
| (| (Signature) | (Date) |
| Title: | Workers' Compensation Underwriting Specialist - GuideOne | e Mutual Ins Co |

Telephone Number of authorized representative or licensed agent of insurance carrier:

Please Note: Only insurance carriers and their licensed agents are authorized to issue Form C-105.2. Insurance brokers are NOT authorized to issue it.

C-105.2 (9-17) www.wcb.ny.gov

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering into contracts unless compensation is secured.

1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and

notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.

2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.



CERTIFICATE OF LIABILITY INSURANCE

YANANTH

DATE (MM/DD/YYYY)

FUNDFOR-10

4/21/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER. AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on

| | | ertificate does not confer rights t | o the | cert | ificate holder in lieu of su | | . , , | | | | |
|-------------|---------------|--|-------------|----------------|--|-------------------|------------------------|----------------------------|---|-------|-------------|
| | | R License # 0C36861 | | | | | ст Suzanne | Orosz | 1 | | |
| | | k-Alliant Ins Svc Inc Ave 18th Fl | | | | PHONE (A/C, No | o, Ext): | | FAX (A/C, No): | | |
| | | k, NY 10178 | | | | E-MAIL ADDRE | _{ss:} sorosz@ | alliant.com | 1 | | |
| | | | | | | | INS | SURER(S) AFFOI | RDING COVERAGE | | NAIC # |
| | | | | | | INSURE | R A : Philade | lphia Inder | nnity Insurance Comp | any | 18058 |
| INSU | JRED | | | | | INSURE | R в : GuideO | ne Mutual | Insurance Company | | 15032 |
| | | Fund for the City of New Yo | rk. In | C | | INSURE | INSURER C: | | | | |
| | | 121 Avenue of the Americas | | | | INSURE | | | | | |
| | | New York, NY 10013 | | | | INSURE | | | | | |
| | | | | | | INSURE | | | | | |
| CO | VFR | AGES CER | TIFIC | CATE | NUMBER: | , | | | REVISION NUMBER: | | |
| | | S TO CERTIFY THAT THE POLICE | | | | HAVF B | FEN ISSUED | | | HF PO | LICY PERIOD |
| IN C | IDICA ERTI | ATED. NOTWITHSTANDING ANY F FICATE MAY BE ISSUED OR MAY JSIONS AND CONDITIONS OF SUCH | REQU PER | IREMI TAIN, | ENT, TERM OR CONDITIO THE INSURANCE AFFOR | N OF A | ANY CONTRAC | CT OR OTHER IES DESCRIB | R DOCUMENT WITH RESPE ED HEREIN IS SUBJECT T | CT TO | WHICH THIS |
| INSR LTR | | TYPE OF INSURANCE | ADDL | SUBR WVD | POLICY NUMBER | | POLICY EFF | POLICY EXP (MM/DD/YYYY) | LIMIT | s | |
| Α | Х | COMMERCIAL GENERAL LIABILITY | IIII | 1111 | | | (MINI/DD/1111) | (MINIODITITI) | EACH OCCURRENCE | \$ | 1,000,000 |
| | | CLAIMS-MADE X OCCUR | Х | | PHPK2233629 | | 2/3/2021 | 2/3/2022 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ | 100,000 |
| | | | ^ | | | | | | MED EXP (Any one person) | \$ | 5,000 |
| | | | | | | | | | PERSONAL & ADV INJURY | \$ | 1,000,000 |
| | GEN | J'L AGGREGATE LIMIT APPLIES PER: | | | | | | | GENERAL AGGREGATE | \$ | 3,000,000 |
| | | POLICY PRO- JECT X LOC | | | | | | | PRODUCTS - COMP/OP AGG | \$ | 3,000,000 |
| | | OTHER: | | | | | | | EBL AGGREGATE | \$ | 3,000,000 |
| Α | AUT | OMOBILE LIABILITY | | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ | 1,000,000 |
| | X | ANY AUTO | | | PHPK2233629 | | 2/3/2021 | 2/3/2022 | BODILY INJURY (Per person) | \$ | |
| | | OWNED SCHEDULED AUTOS | | | | | 7,5,252. | _,,,,_, | BODILY INJURY (Per accident) | \$ | |
| | | HIRED AUTOS ONLY NON-OWNED AUTOS ONLY | | | | | | | PROPERTY DAMAGE (Per accident) | \$ | |
| | | AUTOS ONLY AUTOS ONLY | | | | | | | (Per accident) | \$ | |
| Α | Х | UMBRELLA LIAB X OCCUR | | | | | | | EACH OCCURRENCE | \$ | 5,000,000 |
| | | EXCESS LIAB CLAIMS-MADE | | | PHUB755281 | | 2/3/2021 | 2/3/2022 | | \$ | 5,000,000 |
| | | DED X RETENTION \$ 10,000 | _ | | | | | | AGGREGATE | \$ | • • • |
| В | WOR | DED 21 RETERMONE / | | | | | | | X PER OTH- STATUTE ER | \$ | |
| | | KERS COMPENSATION EMPLOYERS' LIABILITY PROPRIETOR/PARTNER/EXECUTIVE | | 010015131 | | | 2/3/2021 | 2/3/2022 | STATUTE ER | \$ | 500,000 |
| | OFFI (Man | OF IT IN PARTICE / EXECUTIVE / N / A OF IT IN / A OF IT I | | | | | | 500,000 | | | |
| | | s, describe under CRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - EA EMPLOYEE | | 500,000 |
| | DES | CRIPTION OF OPERATIONS below | | | | | | | E.L. DISEASE - POLICY LIMIT | \$ | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| DEC | CDIDT | TON OF OPERATIONS / LOCATIONS / VEHIC | 1.56 / | A CODE | A04 Additional Demonto Cabado | | | | | | |
| | | ion of operations / Locations / Vehicau County Youth Court | LES (| ACORL | 7101, Additional Remarks Schedu | ile, may b | e attached if mor | e space is requi | rea) | | |
| Nas | sau (| County - Office of the District Attor | ney i | s incl | uded as Additional Insure | d where | required by | written contr | act. | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| <u> </u> | DTIC | TOATE HOLDER | | | | CANC | CLIATION | | | | |
| CE | KIIF | ICATE HOLDER | | | | CANC | CELLATION | | | | |

Nassau County - Office of the District Attorney 262 Old Country Road Mineola, NY 11501

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

LAURA CURRAN

JOHN PLACKIS

COUNTY EXECUTIVE

DIRECTOR



NASSAU COUNTY PROBATION DEPARTMENT

400 COUNTY SEAT DRIVE MINEOLA, NY 11501-4823

To: Robert Cleary, Chief Procurement Officer and Compliance Officer

From: Joseph Schiliro, Fiscal Officer

Date: September 2, 2021

Subject: Fund for the City of New York, Center for Court Innovation

Contract for Fund for the City of New York, Center for Court Innovation

This memorandum is respectfully submitted to provide information relating to a retroactive contract the Probation Department is seeking to have approved by the Legislature. This contract is between the County and Fund for the City of New York, Center for Court Innovation.

This contract is to provide funding for a Youth Court Coordinator compliant with Raise the Age (RTA). The Department of Probation received formal funding for the Raise the Age (RTA) 2020 – 2021 program in February 2021. There have been continued delays in obtaining the contract renewal documents and disclosures, partially due to continued difficulties resulting from the Covid-19 pandemic.

The Department is committed to moving forward with its contracts in a timely fashion.





Capital:

SERVICE: Peer Diversion Program

Contract ID #:CQPB20000011 NIFS Entry Date: 09-OCT-20 Term: from 01-OCT-19 to 30-SEP-20

| New |
|---------------------|
| Time Extension: |
| Addl. Funds: |
| Blanket Resolution: |
| RES# |

| 1) Mandated Program: | |
|--|---|
| 2) Comptroller Approval Form Attached: | Y |
| 3) CSEA Agmt. § 32 Compliance Attached: | Y |
| 4) Material Adverse Information Identified? (if yes, attach memo): | N |
| 5) Insurance Required | Y |

| Vendor Info: | |
|---------------------------------|--------------------------------|
| Name: Fund for the City of New | Vendor ID#: 13-2612524 |
| York, Center for Court | |
| Innovation | |
| Address: 520 Fifth Avenue, 18th | Contact Person: Alexandrea Lea |
| Floor New York, NY 10018 | |
| | Phone: 212-925-6676 |

| Department: |
|--|
| Contact Name: Dominick J. DiMaggio Jr. |
| Address: 400 County Seat Drive |
| Mineola, NY 11501 |
| Phone: 516-571-1513 |

Routing Slip

| Department | NIFS Entry: X | 16-OCT-20 JSCHILIRO |
|--------------|---------------------------|---------------------|
| Department | NIFS Approval: X | 20-OCT-20 JSCHILIRO |
| DPW | Capital Fund Approved: | |
| ОМВ | NIFA Approval: X | 20-OCT-20 IQURESHI |
| ОМВ | NIFS Approval: X | 20-OCT-20 SJACOB |
| County Atty. | Insurance Verification: X | 20-OCT-20 AAMATO |

| County Atty. | Approval to Form: X | 22-OCT-20 DGRIPPO |
|--------------|---------------------|---------------------|
| СРО | Approval: X | 27-OCT-20 KOHAGENCE |
| DCEC | Approval: X | 28-OCT-20 JCHIARA |
| Dep. CE | Approval: X | 05-NOV-20 TFOX |
| Leg. Affairs | Approval/Review: X | 30-NOV-20 JSCHANTZ |
| Legislature | Approval: X | 07-DEC-20 CALBERT |
| Comptroller | Deputy: X | 07-JAN-21 JSCHOEN |
| NIFA | NIFA Approval: | |

Contract Summary

Purpose: The Peer Diversion Court seeks to help teenage defendants avoid the legal and collateral consequences associated with criminal prosecution. The program ensures that adolescents ages 16 and 17 receive the benefit of developmentally appropriate services and reduce the likelihood of continuing a cycle of re-offending.

Method of Procurement: Sole Source

Procurement History: Fund for the City of New York, Center for Court Innovation has performed these services for the County for several years through the District Attorney's Office. There is no other entity with the expertise, experiences, and capacity to provide the services required under the contract.

Description of General Provisions: The Peer Diversion Court is an educational diversion program for young offenders coordinated through the Center for Court Innovation(CCI). This effort requires an on-site coordination staff to ensure that appropriate defendants are identified, referred to effective services and monitored appropriately. CCI staff reports to and allows project stakeholders to track progress, outcomes and case resolutions, as well as monitors compliance with the Peer Diversion Program dispositions.

Impact on Funding / Price Analysis: Program is 100% funded by NYS OCFS

Change in Contract from Prior Procurement: None

Recommendation: (approve as submitted) Approve as submitted

Advisement Information

| BUDGET CODES | | |
|--------------|---------|--|
| Fund: | GRT | |
| Control: | 79 | |
| Resp: | PB79-x9 | |
| Object: | DE500 | |
| Transaction: | | |
| Project #: | | |
| Detail: | | |

| RENEWAL | |
|----------|--|
| % | |
| Increase | |
| % | |
| Decrease | |
| Decrease | |

| FUNDING SOURCE | AMOUNT |
|-------------------|--------------|
| Revenue | |
| Contract: | |
| County | \$ 0.00 |
| Federal | \$ 0.00 |
| State | \$ 97,169.00 |
| Capital | \$ 0.00 |
| Other | \$ 0.00 |
| TOTAL | \$ 97,169.00 |

| LINE | INDEX/OBJECT CODE | AMOUNT |
|------|---------------------------|--------------|
| 1 | PBGRT79X1NYS- X9/DE500 | \$ 97,169.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | TOTAL | \$ 97,169.00 |



E-165-20

NIFS ID:CQPB20000011 Department: Probation

Capital:

SERVICE: Peer Diversion Program

Contract ID #:CQPB20000011 NIFS Entry Date: 09-OCT-20 Term: from 01-OCT-19 to 30-SEP-20

| New |
|---------------------|
| Time Extension: |
| Addl. Funds: |
| Blanket Resolution: |
| RES# |

| 1) Mandated Program: | |
|--|---|
| 2) Comptroller Approval Form Attached: | Y |
| 3) CSEA Agmt. § 32 Compliance Attached: | Y |
| 4) Material Adverse Information Identified? (if yes, attach memo): | N |
| 5) Insurance Required | Y |

| Vendor Info: | |
|---------------------------------|--------------------------------|
| Name: Fund for the City of New | Vendor ID#: 13-2612524 |
| York, Center for Court | |
| Innovation | |
| Address: 520 Fifth Avenue, 18th | Contact Person: Alexandrea Lee |
| Floor New York, NY 10018 | |
| | Phone: 212-925-6676 |

| Department: |
|--|
| Contact Name: Dominick J. DiMaggio Jr. |
| Address: 400 County Seat Drive |
| Mineola, NY 11501 |
| Phone: 516-571-1513 |

Routing Slip

| Department | NIFS Entry: X | 16-OCT-20 JSCHILIRO |
|--------------|---------------------------|---------------------|
| Department | NIFS Approval: X | 20-OCT-20 JSCHILIRO |
| DPW | Capital Fund Approved: | |
| OMB | NIFA Approval: X | 20-OCT-20 IQURESHI |
| OMB | NIFS Approval: X | 20-OCT-20 SJACOB |
| County Atty. | Insurance Verification: X | 20-OCT-20 AAMATO |

| County Atty. | Approval to Form: X | 22-OCT-20 DGRIPPO |
|--------------|---------------------|---------------------|
| СРО | Approval: X | 27-OCT-20 KOHAGENCE |
| DCEC | Approval: X | 28-OCT-20 JCHIARA |
| Dep. CE | Approval: X | 05-NOV-20 TFOX |
| Leg. Affairs | Approval/Review: X | 30-NOV-20 JSCHANTZ |
| Legislature | Approval: | |
| Comptroller | Deputy: | |
| NIFA | NIFA Approval: | |

Contract Summary

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Impact on Funding / Price Analysis: Program is 100% funded by NYS OCFS

Change in Contract from Prior Procurement: None

Recommendation: (approve as submitted) Approve as submitted

Advisement Information

| BUDGET CODES | |
|--------------|---------|
| Fund: | GRT |
| Control: | 79 |
| Resp: | PB79-x9 |
| Object: | DE500 |
| Transaction: | |
| Project #: | |
| Detail: | |

| | RENEWAL |
|----------|---------|
| % | |
| Increase | |
| % | |
| Decrease | |
| | |

| FUNDING SOURCE | AMOUNT |
|-------------------|--------------|
| Revenue | |
| Contract: | |
| County | \$ 0.00 |
| Federal | \$ 0.00 |
| State | \$ 97,169.00 |
| Capital | \$ 0.00 |
| Other | \$ 0.00 |
| TOTAL | \$ 97,169.00 |

| LINE | INDEX/OBJECT CODE | AMOUNT |
|------|---------------------------|--------------|
| 1 | PBGRT79X1NYS- X9/DE500 | \$ 97,169.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | | \$ 0.00 |
| | TOTAL | \$ 97,169.00 |

A RESOLUTION AUTHORIZING THE COUNTY EXECUTIVE TO EXECUTE A PERSONAL SERVICES AGREEMENT BETWEEN THE COUNTY OF NASSAU, ACTING ON BEHALF OF THE NASSAU COUNTY DEPARTMENT OF PROBATION, AND FUND FOR THE CITY OF NEW YORK, CENTER FOR COURT INNOVATION.

WHEREAS, the County has negotiated a personal services agreement with Fund for the City of New York, Center for Court Innovation to provide educational services for young offenders, a copy of which is on file with the Clerk of the Legislature; now, therefore, be it

RESOLVED, that the Rules Committee of the Nassau County Legislature authorizes the County Executive to execute the agreement with Fund for the City of New York, Center for Court Innovation.

Contract Approval Request Form (As of January 1, 2015)

| 1. Vendor: Fund for the City of New York, Center for Court Innovation | |
|---|--|
| 2. Dollar amount requiring NIFA approval: \$97169 | |
| Amount to be encumbered: \$97169 | |
| This is a New | |
| If new contract - \$ amount should be full amount of contract If advisement – NIFA only needs to review if it is increasing funds above th If amendment - \$ amount should be full amount of amendment only | e amount previously approved by NIFA |
| 3. Contract Term: 10/01/2019-09/30/2020 Has work or services on this contract commenced? Y | |
| If yes, please explain: | |
| 4. Funding Source: | |
| General Fund (GEN) X Grant Fund (GRT) Capital Improvement Fund (CAP) Other | Federal % 0 State % 100 County % 0 |
| Is the cash available for the full amount of the contract? If not, will it require a future borrowing? | Y N |
| Has the County Legislature approved the borrowing? | N/A |
| Has NIFA approved the borrowing for this contract? | N/A |
| 5. Provide a brief description (4 to 5 sentences) of the item for which | this approval is requested: |
| The Peer Diversion Court seeks to help teenage defendants avoid the legal and collateral consequences associated with criminal prosecution and receive the assistance they need to | pursue law-abiding futures. |
| 6. Has the item requested herein followed all proper procedures and | thereby approved by the: |
| Nassau County Attorney as to form Y | |
| Nassau County Committee and/or Legislature | |
| Date of approval(s) and citation to the resolution where approval for | or this item was provided: |

7. Identify all contracts (with dollar amounts) with this or an affiliated party within the prior 12 months:

Amount

Date

Contract ID

AUTHORIZATION

To the best of my knowledge, I hereby certify that the information contained in this Contract Approv al Request Form and any additional information submitted in connection with this request is true and accurate and that all expenditures that will be made in reliance on this authorization are in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan. I understand that NIFA will rely upon this information in its official deliberation s.

IQURESHI 20-OCT-20

<u>Authenticated User</u> <u>Date</u>

COMPTROLLER'S OFFICE

To the best of my knowledge, I hereby certify that the information listed is true and accurate and is in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan.

Regarding funding, please check the correct response:

_ I certify that the funds are available to be encumbered pending NIFA approval of this contract.

If this is a capital project:

I certify that the bonding for this contract has been approved by NIFA.

Budget is available and funds have been encumbered but the project requires NIFA bonding authorization

Authenticated User Date

NIFA

Amount being approved by NIFA: _

Payment is not guaranteed for any work commenced prior to this approval.

Authenticated User Date

NOTE: All contract submissions MUST include the County's own routing slip, current NIFS pri ntouts for all relevant accounts and relevant Nassau County Legislature communication docu ments and relevant supplemental information pertaining to the item requested herein.

NIFA Contract Approval Request Form MUST be filled out in its entirety before being submitted to NIFA for review.

NIFA reserves the right to request additional information as needed.

Jack Schnirman Comptroller



OFFICE OF THE COMPTROLLER

240 Old Country Road Mineola, New York 11501

COMPTROLLER APPROVAL FORM FOR PERSONAL, PROFESSIONAL OR HUMAN SERVICES CONTRACTS

Attach this form along with all personal, professional or human services contracts, contract renewals, extensions and amendments.

| CONTRACTOR NAME: Fund for the City of New York, Center for Court Innovation |
|---|
| CONTRACTOR ADDRESS: 520 8th Avenue, New York, NY 10018 |
| FEDERAL TAX ID #: 13-2612524 |
| <u>Instructions:</u> Please check the appropriate box ("\overline{\sigma}") after one of the following roman numerals, and provide all the requested information. |
| I. The contract was awarded to the lowest, responsible bidder after advertisement for sealed bids. The contract was awarded after a request for sealed bids was published in [newspaper] on [date]. The sealed bids were publicly opened on sealed bids were received and opened. [#] |
| II. The contractor was selected pursuant to a Request for Proposals. The Contract was entered into after a written request for proposals was issued of [date]. Potential proposers were made aware of the availability of the RFP advertisement in [newspaper], posting on industry websites, we email to interested parties and by publication on the County procurement website. Proposals were do on [date] [state #] proposals were received and evaluated. The evaluation committee consisted of: |
| committee and their respective departments). The proposals were scored and ranked. As a result of the scoring and ranking, the highest-ranking proposer was selected. |
| scoring and ranking, the highest-ranking proposer was selected. |

| III. This is a renewal, extension or amendment of an existing contract. The contract was originally executed by Nassau County on [date]. This is a renewal or extension pursuant to the contract, or an amendment within the scope of the contract or RFP (copies of the relevant pages are attached). The original contract was entered into after |
|--|
| procurement method, i.e., RFP, three proposals evaluated, etc.] Attach a copy of the most recent evaluation of the contractor's performance for any contract to be renewed or extended. If the contractor has not received a satisfactory evaluation, the department must explain why the contractor should nevertheless be permitted to continue to contract with the county. |
| IV. Pursuant to Executive Order No. 1 of 1993, as amended, at least three proposals were solicited and received. The attached memorandum from the department head describes the proposals received, along with the cost of each proposal. |
| ☐ A. The contract has been awarded to the proposer offering the lowest cost proposal; OR: |
| B. The attached memorandum contains a detailed explanation as to the reason(s) why the contract was awarded to other than the lowest-cost proposer. The attachment includes a specific delineation of the unique skills and experience, the specific reasons why a proposal is deemed superior, and/or why the proposer has been judged to be able to perform more quickly than other proposers. |
| V. ☐ Pursuant to Executive Order No. 1 of 1993 as amended, the attached memorandum from the department head explains why the department did not obtain at least three proposals. |
| A. There are only one or two providers of the services sought or less than three providers submitted proposals. The memorandum describes how the contractor was determined to be the sole source provider of the personal service needed or explains why only two proposals could be obtained. If two proposals were obtained, the memorandum explains that the contract was awarded to the lowest cost proposer, or why the selected proposer offered the higher quality proposal, the proposer's unique and special experience, skill, or expertise, or its availability to perform in the most immediate and timely manner. |
| ☐ B. The memorandum explains that the contractor's selection was dictated by the terms of a federal or New York State grant, by legislation or by a court order. (Copies of the relevant documents are attached). |
| C. Pursuant to General Municipal Law Section 104, the department is purchasing the services required through a New York State Office of General Services contract no, and the attached memorandum explains how the purchase is within the scope of the terms of that contract. |

| □ D. Pursuant to General Municipal Law Section 119-0, the department is purchasing the services required through an inter-municipal agreement. |
|---|
| VI. This is a human services contract with a not-for-profit agency for which a competitive process has not been initiated. Attached is a memorandum that explains the reasons for entering into this contract without conducting a competitive process, and details when the department intends to initiate a competitive process for the future award of these services. For any such contract, where the vendor has previously provided services to the county, attach a copy of the most recent evaluation of the vendor's performance. If the contractor has not received a satisfactory evaluation, the department must explain why the contractor should nevertheless be permitted to contract with the county. |
| In certain limited circumstances, conducting a competitive process and/or completing performance evaluations may not be possible because of the nature of the human services program, or because of a compelling need to continue services through the same provider. In those circumstances, attach an explanation of why a competitive process and/or performance evaluation is inapplicable. |
| VII. □ This is a public works contract for the provision of architectural, engineering or surveying services. The attached memorandum provides details of the department's compliance with Board of Supervisors' Resolution No. 928 of 1993, including its receipt and evaluation of annual Statements of Qualifications & Performance Data, and its negotiations with the most highly qualified firms. |
| Instructions with respect to Sections VIII, IX and X: All Departments must check the box for VIII. Then, check the box for either IX or X, as applicable. VIII. □ Participation of Minority Group Members and Women in Nassau County Contracts. The selected contractor has agreed that it has an obligation to utilize best efforts to hire MWBE sub-contractors. Proof of the contractual utilization of best efforts as outlined in Exhibit "EE" may be requested at any time, from time to time, by the Comptroller's Office prior to the approval of claim vouchers. |
| IX. Department MWBE responsibilities. To ensure compliance with MWBE requirements as outlined in Exhibit "EE", Department will require vendor to submit list of sub-contractor requirements prior to submission of the first claim voucher, for services under this contract being submitted to the Comptroller. |
| X. Vendor will not require any sub-contractors. |
| In addition, if this is a contract with an individual or with an entity that has only one or two employees: \[\begin{align*} \text{a review of the criteria set forth by the Internal Revenue Service, Revenue Ruling No. 87-41, 1987-1 C.B. 296, attached as Appendix A to the Comptroller's Memorandum, dated February 13, 2004, concerning independent contractors and employees indicates that the contractor would not be considered an employee for federal tax purposes. \[\begin{align*} \text{Department Head Signature} \end{align*} \] |
| 8 29 19 Date |



COUNTY OF NASSAU

POLITICAL CAMPAIGN CONTRIBUTION DISCLOSURE FORM

1. Has the vendor or any corporate officers of the vendor provided campaign contributions pursuant to the New York State Election Law in (a) the period beginning April 1, 2016 and ending on the date of this disclosure, or (b), beginning April 1, 2018, the period beginning two years prior to the date of this disclosure and ending on the date of this disclosure, to the campaign committees of any of the following Nassau County elected officials or to the campaign committees of any candidates for any of the following Nassau County elected offices: the County Executive, the County Clerk, the Comptroller, the District Attorney, or any County Legislator?

| YES NO X IT yes, to what campaigh comm | nitee? |
|--|---|
| | |
| | |
| 2. VERIFICATION: This section must be signed by a principal signatory of the firm for the purpose of executing Contracts. | of the consultant, contractor or Vendor authorized as a |
| The undersigned affirms and so swears that he/she has read his/her knowledge, true and accurate. | and understood the foregoing statements and they are, to |
| The undersigned further certifies and affirms that the contribut made freely and without duress, threat or any promise of a go remuneration. | |
| Electronically signed and certified at the date and time indicate Courtney Bryan [BRYANC@COURTINNOVATION.ORG] | ed by: |
| Dated: 08/28/2020 03:02:42 PM | /endor: Fund for the City of New York/Center for Court Innovation |

Title:

Executive Director

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COUNTY OF NASSAU

LOBBYIST REGISTRATION AND DISCLOSURE FORM

1. Name, address and telephone number of lobbyist(s)/lobbying organization. The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties.

| None. | |
|---|-----|
| | |
| | |
| 2. List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State | e): |
| None. | |
| | |
| | |
| 3. Name, address and telephone number of client(s) by whom, or on whose behalf, the lobbyist is retained, employed or designated: | ed |
| None. | |
| | |
| | |
| 4. Describe lobbying activity conducted, or to be conducted, in Nassau County, and identify client(s) for each activit listed. See the last page for a complete description of lobbying activities. | У |
| None. | |
| | |
| | |
| 5. The name of persons, organizations or governmental entities before whom the lobbyist expects to lobby: | |
| None. | |
| | |
| | |

6. If such lobbyist is retained or employed pursuant to a written agreement of retainer or employment, you must attach a copy of such document; and if agreement of retainer or employment is oral, attach a written statement of the substance thereof. If the written agreement of retainer or employment does not contain a signed authorization from the client by whom you have been authorized to lobby. separately attach such a written authorization from the client.

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| the New (b), begind this disclusion committee | he lobbyist/lobbying organization or any of its corporation or State Election Law in (a) the period beginning anning April 1, 2018, the period beginning two years osure, to the campaign committees of any of the forces of any candidates for any of the following Nasse Comptroller, the District Attorney, or any County | g April 1, 2016 and e prior to the date of t Illowing Nassau Cou au County elected of Legislator? | Inding on the date of this disclosure, or this disclosure and ending on the date of inty elected officials or to the campaign offices: the County Executive, the County |
|---|--|---|---|
| | | | |
| | | | |
| | and that copies of this form will be sent to the Nass d on the County's website. | sau County Departm | ent of Information Technology ("IT") to |
| | derstand that upon termination of retainer, employr within thirty (30) days of termination. | ment or designation l | must give written notice to the County |
| | ATION: The undersigned affirms and so swears thats and they are, to his/her knowledge, true and acc | | and understood the foregoing |
| | ersigned further certifies and affirms that the contribely and without duress. threat or any promise of a ation. | | |
| | cally signed and certified at the date and time indic Bryan [BRYANC@COURTINNOVATION.ORG] | ated by: | |
| Dated: | 08/28/2020 03:06:52 PM | Vendor: | Fund for the City of New York/Center for Court Innovation |
| | | Title: | Executive Director |
| | | | |

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.

The term "lobbying" or "lobbying activities" does not include: Persons engaged in drafting legislation, rules, regulations or rates; persons advising clients and rendering opinions on proposed legislation, rules, regulations or rates, where such professional services are not otherwise connected with legislative or executive action on such legislation or administrative action on such rules, regulations or rates; newspapers and other periodicals and radio and television stations and owners and employees thereof, provided that their activities in connection with proposed legislation, rules, regulations or rates are limited to the publication or broadcast of news items, editorials or other comment, or paid advertisements; persons who participate as witnesses. attorneys or other representatives in public rule-making or ratemaking proceedings of a County agency, with respect to all participation by such persons which is part of the public record thereof and all preparation by such persons for such participation; persons who attempt to influence a County agency in an adjudicatory proceeding, as defined by § 102 of the New York State Administrative Procedure Act.

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| Business Ad | droes! | 52 | 0 8th Ave | nuo. | | | | | |
|---|---|-----------|-------------|----------------|---|-----------|-------------|----------------|-------|
| City: | New York | JZ | O OUI AVE | | ince/Territory: | NY | Zip/Posta | al Code: | 10018 |
| Country | US | 0.4.00 | N | | | | | | |
| l elephone: | (646) 386- | 3100 | | | | | | | |
| Other prese | nt address(es | s): | | | | | | | |
| City: | | | | State/Prov | ince/Territory: | | _ Zip/Posta | al Code: | |
| Country: | | | | | | | | | |
| Telephone: | | | | | | | | | |
| Positions he | | | | bers attache | of each (checl | k all app | licable) | | |
| | eld in submitti f Board Officer cial Officer | ing busin | | starting date | | | licable) | | |
| President Chairman of Chief Exec. Chief Finance Vice Preside (Other) | eld in submitti f Board Officer cial Officer | ing busin | ess and s | starting date | of each (check Treasurer Shareholder Secretary | | Start | | |
| President Chairman of Chief Exec. Chief Finance Vice Preside (Other) | eld in submitti f Board Officer cial Officer | ing busin | ess and s | starting date | of each (check Treasurer Shareholder Secretary | | Start | Date 5/2020 | |
| President Chairman of Chief Exec. Chief Financ Vice Preside (Other) Type Other | eld in submitti f Board Officer cial Officer ent | ing busin | Description | on Director | of each (check Treasurer Shareholder Secretary | | Start | | |

| 5. | | the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization than the one submitting the questionnaire? NO X If Yes, provide details. |
|-----------|---------------|---|
| 6. | | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in the past |
| 94 | 3 year YES | s while you were a principal owner or officer? NO X If Yes, provide details. |
| Į | | |
| result of | of any a | irmative answer is required below whether the sanction arose automatically, by operation of law, or as a action taken by a government agency. Provide a detailed response to all questions checked "YES". If you cace, photocopy the appropriate page and attach it to the questionnaire. |
| 7. | | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 ch you have been a principal owner or officer: |
| | a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | b. | Been declared in default and/or terminated for cause on any contract, and/or had any contracts |
| | | cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | C. | Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | d | Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

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| YES all qu | s ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever ted? NO X If 'Yes', provide details for each such instance. (Provide a detailed response testions check "Yes". If you need more space, photocopy the appropriate page and attached it to the tionnaire.) |
|---------------|--|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective active taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other can element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective actio taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action |

| In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? |
|--|
| YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| |
| |
| In addition to the information provided, in the past 5 years has any business or organization listed in response |
| to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other |
| type of investigation by any government agency, including but not limited to federal, state, and local regulatory |
| agencies while you were a principal owner or officer? |
| YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| |
| For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| |
| |

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| I. Courtney Bryan , hereby acknowledge that a materially false statement |
|---|
| willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
| I, Courtney Bryan , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION |
| A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. |
| Fund for the City of New York |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Courtney Bryan [BRYANC@COURTINNOVATION.ORG] |
| Executive Director |
| Title |
| 06/24/2020 11:33:13 AM Date |
| Date |

PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

COMPLETE THIS QUESTIONNAIRE CAREFULLY AND COMPLETELY. FAILURE TO SUBMIT A COMPLETE QUESTIONNAIRE MAY MEAN THAT YOUR BID OR PROPOSAL WILL BE REJECTED AS NON-RESPONSIVE AND IT WILL NOT BE CONSIDERED FOR AWARD

| Date of birth | ıme: Dana | a Buchman | | | | | |
|--|---|--|--|-------------------------------------|------------------------|--|-------|
| _ 5.15 51 6111 | n: 11/23 | 3/1951 | | | | | |
| Home addre | ess: 55 N. | . Moore St. | | | | | |
| City: | New York | (| State/Prov | ince/Territory: | NY | Zip/Postal Code: | 10013 |
| Country: | US | | | | | <u> </u> | |
| Business Ad | ddress: | 121 Ave | enue of the Ame | ricas, 6th Floor | | | |
| City: | New York | | | ince/Territory: | | Zip/Postal Code: | 10013 |
| Country | US | | | | | _ 2.p/1 cotal code. | 10010 |
| Telephone: | | 375 | | | | | |
| Other prese | nt address(e | es): | | | | | |
| City: | | / | State/Prov | ince/Territory: | NY | Zip/Postal Code: | _ |
| Country: | US | | | | | _ =.p/: 0010: 0000: | |
| Telephone: | | | | | | | |
| President Chairman o | | | | _ Treasurer _ Shareholder | 05/ | 01/2018 | |
| Chief Exec. | | - | | Secretary | 05/ | 01/2018 | |
| Chief Finan | cial Officer | | | _ Partner ´ | | | |
| \/ B | | | | | - | | |
| Vice Preside | ent | | | _ | | | |
| | ent | | | | | | |
| (Other) | | nterest in the h | usiness suhmitti | ng the guestion | naire? | | |
| (Other) Do you have | e an equit <u>y i</u> | | usiness submitti ovide details. | ng the questior | naire? | | |
| (Other) | | | usiness submitti ovide details. | ng the questior | naire? | | |
| (Other) Do you have | e an equit <u>y i</u> | | | ng the questior | nnaire? | | |
| (Other) Do you have YES | e an equity in | X If Yes, pr | ovide details. | | | | |
| (Other) Do you have YES Are there ar | e an equity in NO | X If Yes, pr | ovide details. | ner form of secu | urity or I | lease or any other ty | |
| Other) Do you have YES Are there ar contribution | e an equity in NO | X If Yes, pr | ovide details. Intees or any otherween you and | ner form of secu | urity or I | lease or any other ty ng the questionnaire? | |
| Other) Do you have YES Are there ar | e an equity in NO | X If Yes, pr | ovide details. | ner form of secu | urity or I | , , , | |
| Other) Do you have YES Are there are contribution | e an equity in NO | X If Yes, pr | ovide details. Intees or any otherween you and | ner form of secu | urity or I | , , , | |
| Other) Do you have YES Are there are contribution | e an equity in NO | X If Yes, pr | ovide details. Intees or any otherween you and | ner form of secu | urity or I | , , , | |
| Other) Do you have YES Are there ar contribution | e an equity in NO | X If Yes, pr | ovide details. Intees or any otherween you and | ner form of secu | urity or I | , , , | |
| Other) Do you have YES Are there ar contribution YES | e an equity in NO NO NO NO | X If Yes, prong loans, guarandle or in part be X If Yes, pr | ovide details. Intees or any othetween you and Tovide details. | ner form of secu the business si | urity or l ubmittir | ng the questionnaire? | |
| Other) Do you have YES Are there ar contribution YES Within the p | e an equity in NO NO NO NO NO NO NO NO | X If Yes, prong loans, guarand lole or in part be X If Yes, prong the loans of the | ntees or any otherween you and rovide details. | ner form of secu the business si | urity or l ubmittir | , , , | |
| Other) Do you have YES Are there ar contribution YES Within the p | e an equity in NO NO NO NO NO NO NO NO | X If Yes, property of the state | ntees or any otherween you and rovide details. | ner form of secu the business si | urity or l ubmittir | ng the questionnaire? | |

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| 6. | | | | | | awarded any contracts to a business or organization listed in Section 5 in the past ncipal owner or officer? |
|--------|--------|-----------------------|---------------|------|------------------|--|
| | YES | IS WITHE | you we TNO | | <u>a μπ</u> Χ | If Yes, provide details. |
| | 120 | | 110 | | | in 100, provide details. |
| - | | | | | | |
| | | | | | | |
| result | of any | action ta | aken by | y a | gove | uired below whether the sanction arose automatically, by operation of law, or as a rnment agency. Provide a detailed response to all questions checked "YES". If you opropriate page and attach it to the questionnaire. |
| 7. | | | | | | ou and/or any affiliated businesses or not-for-profit organizations listed in Section 5 incipal owner or officer: |
| | a. | Been YES taken. | | ed I | | y government agency from entering into contracts with that agency? X If yes, provide an explanation of the circumstances and corrective action |
| | | | | | | |
| | b. | | | | | ault and/or terminated for cause on any contract, and/or had any contracts |
| | | YES taken. | lled for | N | | X If yes, provide an explanation of the circumstances and corrective action |
| | | | | | | |
| | | _ | | | | |
| | C. | | | | | ard of a contract and/or the opportunity to bid on a contract, including, but not neet pre-qualification standards? |
| | | YES taken. | |] N | | X If yes, provide an explanation of the circumstances and corrective action |
| | | | | | | |
| | | | | | | |
| | d. | | ng that | | | any government agency from entering into any contract with it; and/or is any action rmally debar or otherwise affect such business's ability to bid or propose on |
| | | YES taken. | | N | 0 | X If yes, provide an explanation of the circumstances and corrective action |
| | | | | | | |
| | | | | | | |

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever initiated?

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| ques | tionnaire.) |
|------|---|
| a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crir an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

9.

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5?

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| YES NO X If yes, provide an explanation of the circumstances and corrective In the past 5 years, have you or this business, or any other affiliated business listed in response had any sanction imposed as a result of judicial or administrative proceedings with respect to an | estigation by any | • | cluding but not limited | nti-trust investigation and/or a to federal, state, and local re | - |
|--|-------------------|------------------------------|-------------------------|---|---------|
| | NO X | If yes, provide an exp | lanation of the circum | stances and corrective action | n taker |
| license held? | anction imposed | as a result of judicial or a | administrative proceed | dings with respect to any prof | essior |
| YES NO X If yes, provide an explanation of the circumstances and corrective | NO X | If yes, provide an exp | lanation of the circum | stances and corrective action | n taker |

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| I, Dana Buchman , hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|---|
| I, Dana Buchman , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. |
| Fund for the City of New York |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Dana Buchman [DB@FCNY.ORG] |
| |
| Secretary |
| Title |
| 10/21/2020 03:11:41 PM |

Date

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PRINCIPAL QUESTIONNAIRE FORM

All questions on these questionnaires must be answered by all officers and any individuals who hold a ten percent (10%) or greater ownership interest in the proposer. Answers typewritten or printed in ink. If you need more space to answer any question, make as many photocopies of the appropriate page(s) as necessary and attach them to the questionnaire.

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| | Principal Name: Lisette Nieves | | | | | |
|----|---|--|--|--|--|--|
| | Date of birth: 07/02/1968 | | | | | |
| | Home address: 86 6th Ave. | | | | | |
| | City: Brooklyn State/Province/Territory: NY Zip/Postal Code: 10013 | | | | | |
| | Country: US | | | | | |
| | Business Address: 121 Avenue of the Americas, 6th Floor | | | | | |
| | City: New York State/Province/Territory: NY Zip/Postal Code: 10013 | | | | | |
| | Country US | | | | | |
| | Telephone: 2129256675 | | | | | |
| | Other present address(es): | | | | | |
| | City: State/Province/Territory: Zip/Postal Code: | | | | | |
| | Country: | | | | | |
| | Telephone: | | | | | |
| | List of other addresses and telephone numbers attached | | | | | |
| | Desitions held in submitting business and starting data of each (shock all applicable) | | | | | |
| | Positions held in submitting business and starting date of each (check all applicable) | | | | | |
| | PresidentTreasurer | | | | | |
| | Chairman of Board 05/01/2018 Shareholder | | | | | |
| | Chief Exec. Officer Secretary | | | | | |
| | Chief Financial Officer Partner | | | | | |
| | Vice President | | | | | |
| | (Other) | | | | | |
| 3. | Do you have an equity interest in the business submitting the questionnaire? | | | | | |
| | YES NO X If Yes, provide details. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Are there any outstanding loans, guarantees or any other form of security or lease or any other type of | | | | | |
| | contribution made in whole or in part between you and the business submitting the questionnaire? | | | | | |
| | YES NO X If Yes, provide details. | | | | | |
| | | | | | | |
| | | | | | | |
| | Within the past 3 years, have you been a principal owner or officer of any business or notfor-profit organization | | | | | |
| | other than the one submitting the questionnaire? | | | | | |
| | YES X NO If Yes, provide details. | | | | | |
| | Chair, Guttman Community College Fdn; Board Mbr, Stand for Children; Trustee, Edwin Gould Fdn; Board | | | | | |

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| | Mbr, N | NewSchools Venture Fund; Trustee, NYPL |
|--------|--------|---|
| | | |
| 6. | 3 year | ny governmental entity awarded any contracts to a business or organization listed in Section 5 in the past rs while you were a principal owner or officer? X NO If Yes, provide details. |
| | Line n | onprofit organizations listed have received contracts. |
| result | of any | firmative answer is required below whether the sanction arose automatically, by operation of law, or as a action taken by a government agency. Provide a detailed response to all questions checked "YES". If you bace, photocopy the appropriate page and attach it to the questionnaire. |
| 7 | | past (5) years, have you and/or any affiliated businesses or not-for-profit organizations listed in Section 5 ch you have been a principal owner or officer: |
| | a. | Been debarred by any government agency from entering into contracts with that agency? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | b | Been declared in default and/or terminated for cause on any contract, and/or had any contracts cancelled for cause? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | C. | Been denied the award of a contract and/or the opportunity to bid on a contract, including, but not limited to, failure to meet pre-qualification standards? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |
| | d. | Been suspended by any government agency from entering into any contract with it; and/or is any action pending that could formally debar or otherwise affect such business's ability to bid or propose on contract? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | | |

8. Have any of the businesses or organizations listed in response to Question 5 filed a bankruptcy petition and/or been the subject of involuntary bankruptcy proceedings during the past 7 years, and/or for any portion of the last 7 year period, been in a state of bankruptcy as a result of bankruptcy proceedings initiated more than 7 years ago and/or is any such business now the subject of any pending bankruptcy proceedings, whenever

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| | YES all qu ques | NO X If 'Yes', provide details for each such instance. (Provide a detailed response to lestions check "Yes". If you need more space, photocopy the appropriate page and attached it to the tionnaire.) |
|----|-----------------------|---|
| | | |
| 9. | a. | Is there any felony charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | b. | Is there any misdemeanor charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | C. | Is there any administrative charge pending against you? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | d. | In the past 10 years, have you been convicted, after trial or by plea, of any felony, or of any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? Y YES NOX If yes, provide an explanation of the circumstances and corrective action taken. |
| | e. | In the past 5 years, have you been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | f. | In the past 5 years, have you been found in violation of any administrative or statutory charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |

10. In addition to the information provided in response to the previous questions, in the past 5 years, have you

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initiated?

| | been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency and/or the subject of an investigation where such investigation was related to activities performed at, for, or on behalf of the submitting business entity and/or an affiliated business listed in response to Question 5? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
|-----|---|
| | |
| 11. | In addition to the information provided, in the past 5 years has any business or organization listed in response to Question 5, been the subject of a criminal investigation and/or a civil anti-trust investigation and/or any other type of investigation by any government agency, including but not limited to federal, state, and local regulatory agencies while you were a principal owner or officer? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| 12. | In the past 5 years, have you or this business, or any other affiliated business listed in response to Question 5 had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| | |
| 13. | For the past 5 tax years, have you failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO X If yes, provide an explanation of the circumstances and corrective action taken. |
| 1 | |

| I, Lisette Nieves, hereby acknowledge that a materially false statement willfully or fraudulently made in connection with this form may result in rendering the submitting business entity and/or any affiliated entities non-responsible, and, in addition, may subject me to criminal charges. |
|---|
| I, Lisette Nieves , hereby certify that I have read and understand all the items contained in this form; that I supplied full and complete answers to each item therein to the best of my knowledge, information and belief; that I will notify the County in writing of any change in circumstances occurring after the submission of this form; and that all information supplied by me is true to the best of my knowledge, information and belief. I understand that the County will rely on the information supplied in this form as additional inducement to enter into a contract with the submitting business entity. |
| CERTIFICATION A MATERIALLY FALSE STATEMENT WILLFULLY OR FRAUDULENTLY MADE IN CONNECTION WITH THIS QUESTIONNAIRE MAY RESULT IN RENDERING THE SUBMITTING BUSINESS ENTITY NOT RESPONSIBLE WITH RESPECT TO THE PRESENT BID OR FUTURE BIDS, AND, IN ADDITION, MAY SUBJECT THE PERSON MAKING THE FALSE STATEMENT TO CRIMINAL CHARGES. |
| Fund for the City of Ne York |
| Name of submitting business |
| Electronically signed and certified at the date and time indicated by: Lisette Nieves [LN@FCNY.ORG] |
| Board Chair |
| Title |
| 06/05/2020 11:04:18 AM |
| Date |

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Business History Form

The contract shall be awarded to the responsible proposer who, at the discretion of the County, taking into consideration the reliability of the proposer and the capacity of the proposer to perform the services required by the County, offers the best value to the County and who will best promote the public interest.

In addition to the submission of proposals, each proposer shall complete and submit this questionnaire. The questionnaire shall be filled out by the owner of a sole proprietorship or by an authorized representative of the firm, corporation or partnership submitting the Proposal.

NOTE: All questions require a response, even if response is "none" or "not-applicable." No blanks.

(USE ADDITIONAL SHEETS IF NECESSARY TO FULLY ANSWER THE FOLLOWING QUESTIONS).

| Date: | 08/28/2019 | |
|----------------|--|----------|
| 1) | Proposer's Legal Name: Fund for the City of New York | |
| 2) | Address of Place of Business:121 6th Avenue | |
| | City: New York State/Province/Territory: NY Zip/Postal Code: 10013 | |
| | Country: US | |
| Addre | ss: 520 8th Avenue, 18th Floor | |
| City: Count | New York State/Province/Territory: NY Zip/Postal Code: 10018 | |
| Start I | | |
| | | |
| • | 74 W 4 H 4 W 7 W 7 W 7 W 7 W 7 W 7 W 7 W 7 W 7 W | |
| 3) | Mailing Address (if different): 520 8th Avenue, 18th Floor | — |
| | City: New York State/Province/Territory: Zip/Postal Code: | |
| | Country: | |
| | Phone: (212) 925-6676 | |
| F | Does the business own or rent its facilities? Rent If other, please provide details: | |
| | 501(c)(3) | |
| | | |
| 4) | Dun and Bradstreet number: 07-3279945 | |
| 5) | Federal I.D. Number: 13-2612524 | |
| 6) | The proposer is a: Other (Describe) 501(c)(3) | |
| | | |
| 7) | Does this business share office space, staff, or equipment expenses with any other business? | |
| · | YES NO X If yes, please provide details: | <u> </u> |
| | | |

8) Does this business control one or more other businesses?

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| | YES NO X If yes, please provide details: |
|-----|--|
| | |
| 9) | Does this business have one or more affiliates, and/or is it a subsidiary of, or controlled by, any other business? YES X NO If yes, please provide details: Affiliated with National Center for Civic Innovation and International Centre for Civic Innovation. |
| 10) | Has the proposer ever had a bond or surety cancelled or forfeited, or a contract with Nassau County or any other government entity terminated? YES NO X If yes, state the name of bonding agency, (if a bond), date, amount of bond and reason for such cancellation or forfeiture: or details regarding the termination (if a contract). |
| 11) | Has the proposer, during the past seven years, been declared bankrupt? YES NO X If yes, state date, court jurisdiction, amount of liabilities and amount of assets |
| 12) | In the past five years, has this business and/or any of its owners and/or officers and/or any affiliated business, been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency? And/or, in the past 5 years, have any owner and/or officer of any affiliated business been the subject of a criminal investigation and/or a civil anti-trust investigation by any federal, state or local prosecuting or investigative agency, where such investigation was related to activities performed at, for, or on behalf of an affiliated business. YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| 13) | In the past 5 years, has this business and/or any of its owners and/or officers and/or any affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies? And/or, in the past 5 years, has any owner and/or officer of an affiliated business been the subject of an investigation by any government agency, including but not limited to federal, state and local regulatory agencies, for matters pertaining to that individual's position at or relationship to an affiliated business. YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| | |
| 14) | Has any current or former director, owner or officer or managerial employee of this business had, either before or during such person's employment, or since such employment if the charges pertained to events that allegedly occurred during the time of employment by the submitting business, and allegedly related to the conduct of that business: a) Any felony charge pending? YES NO X If yes, provide details for each such investigation, an explanation of the |
| | circumstances and corrective action taken. |

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| b) Any misdemeanor charge pending? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
|--|
| |
| c) In the past 10 years, you been convicted, after trial or by plea, of any felony and/or any other crime, an element of which relates to truthfulness or the underlying facts of which related to the conduct of business? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| d) In the past 5 years, been convicted, after trial or by plea, of a misdemeanor? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| e) In the past 5 years, been found in violation of any administrative, statutory, or regulatory provisions? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| In the past (5) years, has this business or any of its owners or officers, or any other affiliated business had any sanction imposed as a result of judicial or administrative proceedings with respect to any professional license held? YES NO X If yes, provide details for each such investigation, an explanation of the circumstances and corrective action taken. |
| |
| For the past (5) tax years, has this business failed to file any required tax returns or failed to pay any applicable federal, state or local taxes or other assessed charges, including but not limited to water and sewer charges? YES NO X If yes, provide details for each such year. Provide a detailed response to all questions checked 'YES'. If you need more space, photocopy the appropriate page and attach it to the questionnaire. |
| |
| Conflict of Interest: a) Please disclose any conflicts of interest as outlined below. NOTE: If no conflicts exist, please expressly state "No conflict exists." (i) Any material financial relationships that your firm or any firm employee has that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County. |
| No conflict exists. |
| (ii) Any family relationship that any employee of your firm has with any County public servant that may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau |

15)

16)

17

County.

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| | | No conflict exists. |
|----------|---------------|--|
| | | |
| | | (iii) Any other matter that your firm believes may create a conflict of interest or the appearance of a conflict of interest in acting on behalf of Nassau County. |
| | | No conflict exists. |
| | b) | Please describe any procedures your firm has, or would adopt, to assure the County that a conflict of interest would not exist for your firm in the future. |
| | | The Fund's Board of Directors complete annual conflict of interest forms. |
| | | de a resume or detailed description of the Proposer's professional qualifications, demonstrating extensive rience in your profession. Any prior similar experiences, and the results of these experiences, must be fied. |
| | Have YES | you previously uploaded the below information under in the Document Vault? NO X |
| | Is the YES | proposer an individual? NO X Should the proposer be other than an individual, the Proposal MUST include: |
| | | Date of formation; 02/01/1968 |
| | · _ | Name, addresses, and position of all persons having a financial interest in the company, including shareholders, members, general or limited partner. If none, explain. |
| | | No individuals with a financial interest in the company have been attached. |
| No indi | ividual | s with a financial interest in the company have been attached |
| | iii) | Name, address and position of all officers and directors of the company. If none, explain. |
| No offic | cers ai | nd directors from this company have been attached. |
| | | 1 File(s) Uploaded: Board List 7.2018.pdf |
| | iv) | State of incorporation (if applicable); NY |
| | v) | The number of employees in the firm; 899 |
| | vi) | Annual revenue of firm; 105389402 |
| | vii) | Summary of relevant accomplishments Summary of relevant accomplishments attached. |

1 File(s) Uploaded: Business History Form Attachment 1 (003).pdf

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viii) Copies of all state and local licenses and permits.

826 Broadway, 9th Floor

New York

(212) 844-3574

US

E-Mail Address driskell@robinhood.org

Address

Country

Fax #

Telephone

City

| | perform these services. | | the Proposer's capac |
|------------------|--------------------------------------|--|----------------------|
| Attached. | | | |
| 1 File(s) Upload | led: Business History Form At | ttachment 2.pdf | |
| | | nan three references for whom the Propo Proposer's capability to perform this wor | • |
| Company | New York City Mayor's Offic | e of Criminal Justice | |
| Contact Person | | | |
| Address | One Centre Street, Room 10 | 012N | |
| City | New York | State/Province/Territory | NY |
| Country | US | | |
| Telephone | (646) 576-3471 | | |
| Fax # | (212) 312-0825 | | |
| E-Mail Address | | | |
| _ | | | |
| Company | | urt System - Red Hook Community Just | ice Center |
| Contact Person | Judge Alex Calabrese | | |
| Address | 88 Visitation Place | | |
| City | Brooklyn | State/Province/Territory | NY |
| Carratar | US | | |
| Country | | | |
| Telephone | (718) 923-8225 | | |
| • | (718) 923-8225 acalabre@nycourts.gov | | |

State/Province/Territory

NY

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| I, Alexandrea Lee | , hereby acknowledge that a materially false statement |
|---|--|
| willfully or fraudulently made in connection with this form m | |
| any affiliated entities non-responsible, and, in addition, may | subject me to criminal charges. |
| I, Alexandrea Lee items contained in this form; that I supplied full and comple knowledge, information and belief; that I will notify the Court the submission of this form; and that all information supplie and belief. I understand that the County will rely on the info enter into a contract with the submitting business entity. | nty in writing of any change in circumstances occurring after d by me is true to the best of my knowledge, information |
| CERTIFICATION | |
| A MATERIALLY FALSE STATEMENT WILLFULLY OR FR QUESTIONNAIRE MAY RESULT IN RENDERING THE SU WITH RESPECT TO THE PRESENT BID OR FUTURE BID MAKING THE FALSE STATEMENT TO CRIMINAL CHARG | JBMITTING BUSINESS ENTITY NOT RESPONSIBLE DS, AND, IN ADDITION, MAY SUBJECT THE PERSON |
| Name of submitting business: Fund for the City of N | ew York |
| Electronically signed and certified at the date and time indic Alexandrea Lee [ALEE1@NYCOURTS.GOV] | cated by: |
| Development Manager | |
| Title | |
| 10/21/2020 02:28:53 PM | |
| Date | |

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Board of Directors

Lisette Nieves (Chair), Clinical Professor, Educational Leadership & Policy Studies, Steinhardt School of Culture, Education & Human Development, New York University; Former Belle Zeller Distinguished Visiting Professor in Public Policy, City University of New York (CUNY); Executive Director, Year Up NYC; Adjunct Professor, Brooklyn College; former Chief of Staff, NYC Department of Youth and Community Development; Director of Special Projects for The After School Corporation (TASC).

Robert Abrams, Partner at Stroock & Stroock & Lavan LLP; former Attorney General of the State of New York; member of the New York State Assembly; Bronx Borough President.

Maggie Boepple (Vice Chair), President and Director, Performing Arts Center at World Trade Center; former President, Lower Manhattan Cultural Council; Senior Advisor to the Commissioner of Transport for London; President, Maggie Boepple Associates; Director of Government Relations, MTA; Vice Chancellor of the City University of New York for Government Relations; Director of Government Relations, Legislative Representative for the City of New York; Lobbyist.

Dana Buchman (Secretary), Fashion Designer; Chair, Promise Project; Author of "A Special Education: One Family's Journey Through the Maze of Learning Disabilities;" Member of the Council of Fashion Designers America.

Ester Fuchs, Professor of International and Public Affairs and Political Science, Columbia University; former Special Advisor on Governance and Strategic Planning to Mayor Michael R. Bloomberg.

Mary McCormick, President, Fund for the City of New York.

David Steinberger, Former President and CEO, Perseus Books Group; former President, Adult Trade Group and Corporate Strategy and International at HarperCollins; Management Consultant, Booz Allen Hamilton and NYC Deputy Transportation Commissioner.

Robert Tierney, Former Chairman, New York City Landmarks Preservation Commission.

Business History Form Attachment Center for Court Innovation: Summary of relevant accomplishments

The Center for Court Innovation seeks to help create a more effective and humane justice system by designing and implementing operating programs, performing original research, and providing reformers around the world with the tools they need to launch new strategies. Founded as a public/private partnership between the New York State Unified Court System and the Fund for the City of New York, the Center creates operating programs to test new ideas and solve problems. The Center's projects include community-based violence prevention projects, alternatives to incarceration, reentry initiatives, court-based programs that seek to promote positive individual and family change, and many others. The Center's operating programs have achieved tangible results like safer streets, reduced incarceration, and improved neighborhood perceptions of justice.

The Center has received numerous awards for its efforts, including:

World Justice Challenge Finalist

Red Hook Community Justice Center was selected as a finalist in the World Justice Challenge 2019 for its work to address the underlying issues, such as poverty, unemployment, and substance abuse, that bring people into the justice system. The Justice Center's work will be showcased at the World Justice Forum in the Hague, Netherlands.

Vera Institute of Justice Best of 2018

Two Center for Court Innovation efforts—our New Thinking podcast and Start Here: A Road Map to Reducing Mass Incarceration—were honored by the Vera Institute of Justice in its Best of 2018 review.

Brooklyn Community Foundation's Spark Prize

Red Hook Community Justice Center was selected to receive the Brooklyn Community Foundation's annual \$100,000 Spark Prize, celebrating pioneering organizations advancing equity in the borough.

2018 Innovations in American Government Award

New York City's <u>Supervised Release Program</u>, which the Center operates in Brooklyn, Staten Island, and the Bronx, was recognized as one of Harvard University's 2018 Innovations in American Government Award Top 25 Programs. The Center for Court Innovation was previously honored with this award in 2002 and 1998.

W³ Award

The Center for Court Innovation website earned Silver in the 2018 W³ Awards in the Non-Profit and User Experience categories. The W³ Awards celebrate digital excellence by honoring outstanding websites and other digital content.

Goddard Riverside Book Prize Finalist

<u>Start Here: A Road Map to Reducing Mass Incarceration</u>, by Greg Berman, director of the Center for Court Innovation, and Julian Adler, the Center's director of policy and research, was shortlisted for the 2018 Goddard Riverside Stephan Russo Book Prize for Social Justice. The list

was chosen by a slate of judges, including Paul Krugman, the columnist for *The New York Times* and Nobel Prize winner.

Hester Street Honors Brownsville Community Justice Center

The Brownsville Community Justice Center was honored in June 2018 at the Hester Street Annual Benefit for its innovative projects to promote economic development and community well-being, including the <u>Belmont Avenue Neighborhood Incubator Project</u> and <u>neighborhood activation studies</u>.

2017 Best Shorts Award

Two videos created by the Center for Court Innovation's Tribal Justice Exchange received Awards of Merit from the Best Shorts Competition. The videos—A Day at Puyallup GREAT Camp and What Does Reintegration Mean to You?—highlight the work of exemplary justice programs in Indian country.

2017 Official Selection of the American Indian Film Festival

The American Indian Film Institute selected *What Does Reintegration Mean to You?* for inclusion in the for the 42nd annual American Indian Film Festival. The film introduces viewers to the Muscogee (Creek) Reintegration Program through interviews with clients, staff and partners. The film was also nominated for the festival's Public Service Award.

2016 Center for Active Design Excellence Award

The Brownsville Community Justice Center's Belmont Revitalization Project was recognized for its efforts to transform Belmont Avenue in Brownsville, Brooklyn into a thriving business district and public space.

2016 Association for Conflict Resolution Achievement Award

The Center for Court Innovation was honored for its work to advance creative solutions to conflict in New York, including its efforts in Red Hook, Harlem, and Crown Heights.

2015 Justi Award

The Harlem Community Justice Center's Parole Reentry Court was honored with a Justi Award by Northepointe for its work to reduce recidivism for recently incarcerated individuals returning to Harlem. The Justi Award recognizes organizations for developing programs, practices, and technology initiatives that make the justice system more effective.

2015 Innovation in Criminal Justice Award

The Association of Prosecuting Attorneys presented the Red Hook Peacemaking Program with an award at the 2015 Innovations in Criminal Justice Summit, which recognizes cutting-edge criminal justice programs that can serve as national models for reducing crime and unnecessary incarceration. The award also honors the Native American mentors and advisors who assisted in planning, training, and implementation for the Peacemaking Program.

2014 Groundswell Award

In 2014, the Center for Court Innovation was honored by Groundswell, a public arts organization, for its work to engage young people in neighborhoods like Red Hook, Brownsville,

and Crown Heights in mural projects designed to transform symbols of disorder into works of art.

2013 Robin Hood Heroes Awards

The Robin Hood Foundation honored the Center for Court Innovation for creating a number of innovative programs designed to reduce recidivism and help people get their lives back on track. The Red Hook Community Justice Center and Judge Alex Calabrese were spotlighted as exemplary of the Center's success.

NYC Innovative Nonprofit Award

In 2013, the Center for Court Innovation was one of ten nonprofits honored by New York City Mayor Michael Bloomberg as part of the Center for Economic Opportunity's NYC Innovative Nonprofit Awards. The Center was recognized for its work to reduce poverty in Red Hook by offering meaningful alternatives to incarceration.

PASS Awards

The National Council on Crime and Delinquency honored the Center for Court Innovation with three separate PASS Awards for 2011: one for its film Testing New Ideas, one for its podcast series New Thinking, and one for its comic book guide to criminal justice reform Learning by Doing. In 2010, the Center for Court Innovation was awarded a PASS Award for Daring to Fail, its book of interviews with criminal justice leaders, and for I Got Arrested! Now What?, its comic book guide to the juvenile justice system.

The Martin Luther King Jr. Award

The Fellowship of Reconciliation, one of the oldest and most storied civil rights organizations, has awarded the Center for Court Innovation's Save Our Streets Crown Heights project their Martin Luther King Jr. peace award for 2011. The award honors those who make a significant contribution to advancing the cause of nonviolence.

Serving Youth Opportunity Award

Midtown Community Court has won the 2010 Serving Youth Opportunity Award given by the New York City Employment & Training Coalition. The award honors Midtown's Times Square Youth program, which provides basic job skills and employment assistance to troubled young people.

Peter F. Drucker Award for Non-Profit Innovation

The Center for Court Innovation was selected as the winner of the 2009 award, which honors the influential management theorist. More than 600 organizations applied for the distinction.

National Criminal Justice Association

The Red Hook Community Justice Center received the Outstanding Criminal Justice Award from the National Criminal Justice Association in August 2008.

National Association of Drug Court Professionals

In June 2007, the National Association of Drug Court Professionals honored the Center for Court Innovation with its National Leadership Award, in recognition of New York State's efforts to "go

to scale" with drug courts. Also honored were New York State Chief Judge Judith Kaye (Ret.) and the New York State Association of Drug Treatment Court Professionals.

American Bar Association

The American Bar Association presented the 2006 "Organizational Lawyer as Problem Solver Award" to the Red Hook Community Justice Center. Recipients are acknowledged for their use or promotion of collaboration, negotiation, mediation, counseling, decision-making and problem-solving skills to help parties resolve a problem in a creative and novel way.

Citizens Budget Commission

The Citizens Budget Commission awarded its Prize for Public Service Innovation to the Center for Court Innovation in 2004. The Citizens Budget Commission is a nonpartisan, nonprofit civic organization devoted to influencing constructive change in New York City and New York State government. Through its Prize for Public Service Innovation, the commission seeks to identify and highlight a New York City or State government agency that demonstrates an innovative approach to providing government services.

Innovations in American Government

The Center for Court Innovation received the Innovations in American Government Award from the Ford Foundation, the Kennedy School of Government at Harvard University and the Council for Excellence in Government. The Innovations in American Government Awards are given to "exemplary achievements in government problem solving." The award, considered to be among the nation's most prestigious public service honors, recognized the Center for its unique role in fostering court innovation in New York State and nationally. In 2002, the Center for Court Innovation was named one of the top 15 innovations in the history of the Innovations in American Government Award.

Bruner Foundation

The Red Hook Community Justice Center received the 2003 Rudy Bruner Silver Award for Urban Excellence. The Rudy Bruner Award seeks to discover and celebrate urban places that are developed with such vision and imagination that they transform urban problems into creative solutions.

National Association for Court Management

The National Association for Court Management, the largest organization of court management professionals in the world, awarded its 1994 Justice Achievement Award to the Midtown Community Court. NACM's Justice Achievement Award recognizes "exemplary court and individual performance in the improvement of judicial administration."

National Association of Drug Court Professionals

The Brooklyn Treatment Court was selected by the National Association of Drug Court Professionals as a Mentor Court in 1999. The Mentor Drug Court Network is based on the premise that local drug courts are the best place to educate and train drug court practitioners planning or implementing new drug courts in other jurisdictions.

Kings County District Attorney's Office

The Crown Heights Community Mediation Center received the Jewish Heritage Award in 1999. Given by the Kings County (Brooklyn) District Attorney's Office, the Jewish Heritage Award recognizes people and organizations whose work benefits the Jewish community.

Business History Form Attachment The Center for Court Innovation's capacity and reliability to perform these services

Adolescent Diversion Part

In 2011, then New York State Chief Judge Jonathan Lippman announced his support for legislation that would raise the age of criminal majority, bringing New York in step with the rest of the nation. As part of the Raise the Age initiative, in 2012 Judge Lippman and the Center for Court Innovation created the Adolescent Diversion Program (ADP), establishing pilot courts in selected counties throughout the state in which the cases of 16- and 17-year-olds are assigned to specially-trained judges who have access to an expanded array of dispositional options, including age-appropriate services. These specialized court parts allow teenage defendants to avoid the legal and collateral consequences associated with criminal prosecution – and receive the assistance they need to pursue law-abiding, productive futures.

The Center for Court Innovation (the Center) provides staffing at the five ADP sites (Manhattan, Brooklyn, the Bronx, and Staten Island) overseen by the Center, as well an evaluation of the ADP initiative conducted by Center research staff. Significant research findings included:

- In the Bronx, ADP participation significantly reduced jail sentences and consistently reduced both felony and violent felony re-arrests.
- ADP did not jeopardize public safety. The one-year re-arrest rate year was statistically identical between ADP and comparison cases, and the number of crime-free days prior to first re-arrest was statistically identical over an even longer tracking period.
- ADP participants were significantly less likely than individuals in the comparison group to have a felony re-arrest and a violent felony re-arrest over six months.
- Among the *highest-risk* defendants, ADP participants were re-arrested significantly *less* than individuals in the comparison group after one year.

The Center continues to help operate ADP parts – and to work with judges, attorneys, and others to improve the process on behalf of 16- and 17-year-olds.

Youth Court

The Center's youth courts train teenagers to serve as jurors, judges and advocates, handling real-life cases involving their peers. The goal of youth court is to use positive peer pressure to ensure that young people who have committed minor offenses learn accountability and repair the harm caused by their actions. Youth courts direct lower level cases from the formal justice system. A variety of justice agencies refer cases to youth courts with the goal of preventing further involvement in the juvenile or criminal justice systems. Youth courts can also be an integral part of a school's disciplinary process, serving as an alternative to traditional disciplinary measures such as suspension and detention. The Center launched its first youth court in 1998 as part of the Red Hook Community Justice Center.

The Center currently operates youth courts in the Brownsville and Red Hook neighborhoods of Brooklyn, in Harlem, Queens, Staten Island, and in Newark, New Jersey. In addition to operating several youth courts, the Center provides technical assistance to communities and schools that are interested in launching a new or improving an existing youth court program.

COUNTY OF NASSAU

CONSULTANT'S, CONTRACTOR'S AND VENDOR'S DISCLOSURE FORM

| 1. Name of the Entity:Fund for the City of New York, Center for Court Innovation | |
|--|--|
| Address: 520 8th Avenue, 18th Floor | |
| City: New York State/Province/Territory: NY Zip/Postal Code: 10018 | |
| Country: US | |
| 2. Entity's Vendor Identification Number: 13-2612524 | |
| 3. Type of Business: Other (specify) 501 c3 Nonprofit | |
| 4. List names and addresses of all principals; that is, all individuals serving on the Board of Directors or comparable body, all partners and limited partners, all corporate officers, all parties of Joint Ventures, and all members and officers of limited liability companies (attach additional sheets if necessary): | |
| 1 File(s) uploaded Board List 7.2018.pdf | |
| No principals have been attached to this form. | |
| 5. List names and addresses of all shareholders, members, or partners of the firm. If the shareholder is not an individual, list the individual shareholders/partners/members. If a Publicly held Corporation, include a copy of the 10K in lieu of completing this section. If none, explain. | |
| None. | |
| No shareholders, members, or partners have been attached to this form. 6. List all affiliated and related companies and their relationship to the firm entered on line 1. above (if none, enter "None"). Attach a separate disclosure form for each affiliated or subsidiary company that may take part in the performance of this contract. Such disclosure shall be updated to include affiliated or subsidiary companies not previously disclosed that participate in the performance of the contract. | |
| None. | |
| 7. List all lobbyists whose services were utilized at any stage in this matter (i.e., pre-bid, bid, post-bid, etc.). If none, enter "None." The term "lobbyist" means any and every person or organization retained, employed or designated by any client to influence - or promote a matter before - Nassau County, its agencies, boards, commissions, department heads, legislators or committees, including but not limited to the Open Space and Parks Advisory Committee and Planning Commission. Such matters include, but are not limited to, requests for proposals, development or improvement of real property subject to County regulation, procurements. The term "lobbyist" does not include any officer, director, trustee, employee, counsel or agent of the County of Nassau, or State of New York, when discharging his or her official duties. | |
| Are there lobbyists involved in this matter? YES NO X | |
| (a) Name, title, business address and telephone number of lobbyist(s): None. | |
| (b) Describe lobbying activity of each lobbyist. See below for a complete description of lobbying activities. None. | |

(c) List whether and where the person/organization is registered as a lobbyist (e.g., Nassau County, New York State):

None.

8. VERIFICATION: This section must be signed by a principal of the consultant, contractor or Vendor authorized as a signatory of the firm for the purpose of executing Contracts.

The undersigned affirms and so swears that he/she has read and understood the foregoing statements and they are, to his/her knowledge, true and accurate.

Electronically signed and certified at the date and time indicated by: Courtney Bryan [BRYANC@COURTINNOVATION.ORG]

Dated:

08/28/2020 03:04:52 PM

Title:

Executive Director

The term lobbying shall mean any attempt to influence: any determination made by the Nassau County Legislature, or any member thereof, with respect to the introduction, passage, defeat, or substance of any local legislation or resolution; any determination by the County Executive to support, oppose, approve or disapprove any local legislation or resolution, whether or not such legislation has been introduced in the County Legislature; any determination by an elected County official or an officer or employee of the County with respect to the procurement of goods, services or construction, including the preparation of contract specifications, including by not limited to the preparation of requests for proposals, or solicitation, award or administration of a contract or with respect to the solicitation, award or administration of a grant, loan, or agreement involving the disbursement of public monies; any determination made by the County Executive, County Legislature, or by the County of Nassau, its agencies, boards, commissions, department heads or committees, including but not limited to the Open Space and Parks Advisory Committee, the Planning Commission, with respect to the zoning, use, development or improvement of real property subject to County regulation, or any agencies, boards, commissions, department heads or committees with respect to requests for proposals, bidding, procurement or contracting for services for the County; any determination made by an elected county official or an officer or employee of the county with respect to the terms of the acquisition or disposition by the county of any interest in real property, with respect to a license or permit for the use of real property of or by the county, or with respect to a franchise, concession or revocable consent; the proposal, adoption, amendment or rejection by an agency of any rule having the force and effect of law; the decision to hold, timing or outcome of any rate making proceeding before an agency; the agenda or any determination of a board or commission; any determination regarding the calendaring or scope of any legislature oversight hearing; the issuance, repeal, modification or substance of a County Executive Order; or any determination made by an elected county official or an officer or employee of the county to support or oppose any state or federal legislation, rule or regulation, including any determination made to support or oppose that is contingent on any amendment of such legislation, rule or regulation, whether or not such legislation has been formally introduced and whether or not such rule or regulation has been formally proposed.



Board of Directors

Lisette Nieves (Chair), Clinical Professor, Educational Leadership & Policy Studies, Steinhardt School of Culture, Education & Human Development, New York University; Former Belle Zeller Distinguished Visiting Professor in Public Policy, City University of New York (CUNY); Executive Director, Year Up NYC; Adjunct Professor, Brooklyn College; former Chief of Staff, NYC Department of Youth and Community Development; Director of Special Projects for The After School Corporation (TASC).

Robert Abrams, Partner at Stroock & Stroock & Lavan LLP; former Attorney General of the State of New York; member of the New York State Assembly; Bronx Borough President.

Maggie Boepple (Vice Chair), President and Director, Performing Arts Center at World Trade Center; former President, Lower Manhattan Cultural Council; Senior Advisor to the Commissioner of Transport for London; President, Maggie Boepple Associates; Director of Government Relations, MTA; Vice Chancellor of the City University of New York for Government Relations; Director of Government Relations, Legislative Representative for the City of New York; Lobbyist.

Dana Buchman (Secretary), Fashion Designer; Chair, Promise Project; Author of "A Special Education: One Family's Journey Through the Maze of Learning Disabilities;" Member of the Council of Fashion Designers America.

Ester Fuchs, Professor of International and Public Affairs and Political Science, Columbia University; former Special Advisor on Governance and Strategic Planning to Mayor Michael R. Bloomberg.

Mary McCormick, President, Fund for the City of New York.

David Steinberger, Former President and CEO, Perseus Books Group; former President, Adult Trade Group and Corporate Strategy and International at HarperCollins; Management Consultant, Booz Allen Hamilton and NYC Deputy Transportation Commissioner.

Robert Tierney, Former Chairman, New York City Landmarks Preservation Commission.

CONTRACT FOR SERVICES

| THIS AGREEMENT, dated as of | , 20 | _(together with |
|---|---------------|----------------------------|
| the schedules, appendices, attachments and exhibits, if any, this "A | Agreement' | '), is entered into |
| by and between (i) Nassau County, a municipal corporation having | | |
| Franklin Avenue, Mineola, New York 11501 (the "County"), acting of | on behalf of | f the County |
| Department of the Probation, having its principal office at 400 Cour | | |
| New York 11501 (the "Department"), and (ii) Fund for the City of New | ew York, C | enter for Court |
| Innovation, a New York State not-for-profit corporation, having its p | rincipal offi | ice at 520 8 th |
| Avenue, 18th Floor, New York, New York 10018 (the "Contractor"). | | |

WITNESSETH:

WHEREAS, the County desires to hire the Contractor to perform the services described in this Agreement; and

WHEREAS, this is a personal service contract within the intent and purview of Section 2206 of the County Charter; and

WHEREAS, the Contractor desires to perform the services described in this Agreement.

NOW, THEREFORE, in consideration of the premises and mutual covenants contained in this Agreement, the parties agree as follows:

- 1. <u>Term.</u> This Agreement shall commence on October 1, 2019 and terminate on September 30, 2020, unless sooner terminated in accordance with the provisions of this Agreement.
 - (a) The Agreement may be renewed, at the discretion of the County, for four (4) additional one (1) year terms.
- 2. <u>Services</u>. (a) The services to be provided by the Contractor under this Agreement shall consist of providing a youth court coordinator for the Nassau County Youth Court, which is more fully described in Attachment A ("Services").
- (b) The Parties shall mutually agree to exact days the Services under this Agreement shall be provided for.
- (c) The Contractor shall submit to the Department quarterly progress reports in such format approved by the Department which provides, at a minimum, the following information:
 - (1) Number of cases.
 - (2) What social services were utilized?
 - (3) Where were clients referred?
- 3. <u>Payment</u>. (a) <u>Amount of Consideration</u>. The amount to be paid to the Contractor as full consideration for the Contractor's Services under this Agreement shall be Ninety Seven Thousand One Hundred Sixty Nine dollars (\$97,169.00) (the "Maximum Amount"), payable in accordance with the attached Budget, Attachment B.
- (b) <u>Vouchers; Voucher Review, Approval and Audit</u>. Payments shall be made to the Contractor in arrears and shall be contingent upon (i) the Contractor submitting a claim voucher (the "Voucher") in a form satisfactory to the County, that (a) states with reasonable specificity the

services provided and the payment requested as consideration for such services, (b) certifies that the services rendered and the payment requested are in accordance with this Agreement, and (c) is accompanied by documentation satisfactory to the County supporting the amount claimed, and (ii) review, approval and audit of the Voucher by the Department and/or the County Comptroller or his or her duly designated representative (the "Comptroller").

- (c) <u>Timing of Payment Claims</u>. The Contractor shall submit claims no later than three (3) months following the County's receipt of the services that are the subject of the claim and no more frequently than once a month.
- (d) <u>No Duplication of Payments</u>. Payments under this Agreement shall not duplicate payments for any work performed or to be performed under other agreements between the Contractor and any funding source including the County.
- (e) <u>Payments in Connection with Termination or Notice of Termination</u>. Unless a provision of this Agreement expressly states otherwise, payments to the Contractor following the termination of this Agreement shall not exceed payments made as consideration for services that were (<u>i</u>) performed prior to termination, (<u>ii</u>) authorized by this Agreement to be performed, and (<u>iii</u>) not performed after the Contractor received notice that the County did not desire to receive such services.
- (f) Reallocation Among Line Items: The Contractor may reallocate monies within the budget, <u>provided however</u>, that the Contractor shall not reallocate more than ten percent (10%) of the amount allocated to any line item to another line item nor add or subtract a line item, without the prior written consent of the Department, Clause 10 notwithstanding.
- 4. <u>Independent Contractor</u>. The Contractor is an independent contractor of the County. The Contractor shall not, nor shall any officer, director, employee, servant, agent or independent contractor of the Contractor (a "<u>Contractor Agent</u>"), be (<u>i</u>) deemed a County employee, (<u>ii</u>) commit the County to any obligation, or (<u>iii</u>) hold itself, himself, or herself out as a County employee or Person with the authority to commit the County to any obligation. As used in this Agreement the word "<u>Person</u>" means any individual person, entity (including partnerships, corporations and limited liability companies), and government or political subdivision thereof (including agencies, bureaus, offices and departments thereof).
- 5. No Arrears or Default. The Contractor is not in arrears to the County upon any debt or contract and it is not in default as surety, contractor, or otherwise upon any obligation to the County, including any obligation to pay taxes to, or perform services for or on behalf of, the County.
- 6. Compliance with Law. (a) Generally. The Contractor shall comply with any and all applicable Federal, State and local Laws, including, but not limited to those relating to conflicts of interest, discrimination, a living wage, disclosure of information, and vendor registration, in connection with its performance under this Agreement. If the Contractor is or becomes a "Business Associate" as defined in the Health Insurance Portability and Accountability Act ("HIPAA") pursuant to 45 CFR Section 160.103, with respect to any of the Services under this Agreement, then the Contractor shall comply with and enter into a Business Associate Agreement with the Department. In furtherance of the foregoing, the Contractor is bound by and shall comply with the terms of Appendix EE attached hereto and with the County's vendor registration protocol. As used in this Agreement the word "Law" includes any and all statutes, local laws, ordinances, rules, regulations, applicable orders, and/or decrees, as the same may be amended from time to time, enacted, or adopted.

- (b) Nassau County Living Wage Law. Pursuant to LL 1-2006, as amended, and to the extent that a waiver has not been obtained in accordance with such law or any rules of the County Executive, the Contractor agrees as follows:
 - (i) Contractor shall comply with the applicable requirements of the Living Wage Law, as amended;
 - (ii) Failure to comply with the Living Wage Law, as amended, may constitute a material breach of this Agreement, the occurrence of which shall be determined solely by the County. Contractor has the right to cure such breach within thirty days of receipt of notice of breach from the County. In the event that such breach is not timely cured, the County may terminate this Agreement as well as exercise any other rights available to the County under applicable law.
 - (iii) It shall be a continuing obligation of the Contractor to inform the County of any material changes in the content of its certification of compliance, attached as Appendix L, and shall provide to the County any information necessary to maintain the certification's accuracy.
- (c) Records Access. The parties acknowledge and agree that all records, information, and data ("Information") acquired in connection with performance or administration of this Agreement shall be used and disclosed solely for the purpose of performance and administration of the contract or as required by law. The Contractor acknowledges that Contractor Information in the County's possession may be subject to disclosure under Article 6 of the New York State Public Officer's Law ("Freedom of Information Law" or "FOIL"). In the event that such a request for disclosure is made, the County shall make reasonable efforts to notify the Contractor of such request prior to disclosure of the Information so that the Contractor may take such action as it deems appropriate.
- (d) <u>Protection of Client Information</u>. The Contractor acknowledges and agrees that all information that the Contractor acquires in connection with performance under this Agreement is strictly confidential, shall be held in the strictest confidence and shall be used solely for the purpose of performing services for or on behalf of the County. Such confidential information shall not be disclosed to third parties except (i) as permitted under this Agreement, or (ii) with the written consent of the County (and then only to the extent of the consent) or (iii) upon legal compulsion. The provisions of this section shall survive the termination of this Agreement and any breach of these provisions shall be cause for immediate termination of this Agreement.
- (e) <u>Prohibition of Gifts</u>. In accordance with County Executive Order 2-2018, the Contractor shall not offer, give, or agree to give anything of value to any County employee, agent, consultant, construction manager, or other person or firm representing the County (a "County Representative"), including members of a County Representative's immediate family, in connection with the performance by such County Representative of duties involving transactions with the Contractor on behalf of the County, whether such duties are related to this Agreement or any other County contract or matter. As used herein, "anything of value" shall include, but not be limited to, meals, holiday gifts, holiday baskets, gift cards, tickets to golf outings, tickets to sporting events, currency of any kind, or any other gifts, gratuities, favorable opportunities or preferences. For purposes of this subsection, an immediate family member shall include a spouse, child, parent, or sibling. The Contractor shall include the provisions of this subsection

in each subcontract entered into under this Agreement.

- (f) <u>Disclosure of Conflicts of Interest</u>. In accordance with County Executive Order 2-2018, the Contractor has disclosed as part of its response to the County's Business History Form, or other disclosure form(s), any and all instances where the Contractor employs any spouse, child, or parent of a County employee of the agency or department that contracted or procured the goods and/or services described under this Agreement. The Contractor shall have a continuing obligation, as circumstances arise, to update this disclosure throughout the term of this Agreement.
- 7. <u>Minimum Service Standards</u>. Regardless of whether required by Law: (a) The Contractor shall, and shall cause Contractor Agents to, conduct its, his or her activities in connection with this Agreement so as not to endanger or harm any Person or property.
- (b) The Contractor shall deliver services under this Agreement in a professional manner consistent with the best practices of the industry in which the Contractor operates. The Contractor shall take all actions necessary or appropriate to meet the obligation described in the immediately preceding sentence, including obtaining and maintaining, and causing all Contractor Agents to obtain and maintain, all approvals, licenses, and certifications ("Approvals") necessary or appropriate in connection with this Agreement.
- 8. <u>Indemnification; Defense; Cooperation</u>. (a) The Contractor shall be solely responsible for and shall indemnify and hold harmless the County, the Department and its officers, employees, and agents (the "<u>Indemnified Parties</u>") from and against any and all liabilities, losses, costs, expenses (including, without limitation, attorneys' fees and disbursements) and damages ("<u>Losses</u>"), arising out of or in connection with any acts or omissions of the Contractor or a Contractor Agent, regardless of whether due to negligence, fault, or default, including Losses in connection with any threatened investigation, litigation or other proceeding or preparing a defense to or prosecuting the same; <u>provided</u>, <u>however</u>, that the Contractor shall not be responsible for that portion, if any, of a Loss that is caused by the negligence of the County.
- (b) The Contractor shall, upon the County's demand and at the County's direction, promptly and diligently defend, at the Contractor's own risk and expense, any and all suits, actions, or proceedings which may be brought or instituted against one or more Indemnified Parties for which the Contractor is responsible under this Section, and, further to the Contractor's indemnification obligations, the Contractor shall pay and satisfy any judgment, decree, loss or settlement in connection therewith.
- (c) The Contractor shall, and shall cause Contractor Agents to, cooperate with the County and the Department in connection with the investigation, defense or prosecution of any action, suit or proceeding in connection with this Agreement, including the acts or omissions of the Contractor and/or a Contractor Agent in connection with this Agreement.
 - (d) The provisions of this Section shall survive the termination of this Agreement.
- 9. <u>Insurance</u>. (a) <u>Types and Amounts</u>. The Contractor shall obtain and maintain throughout the term of this Agreement, at its own expense: (<u>i</u>) one or more policies for commercial general liability insurance, which policy(ies) shall name "Nassau County" as an additional insured and have a minimum single combined limit of liability of not less than one million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) aggregate coverage, (<u>ii</u>) if contracting in whole or part to provide professional services, one or more

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policies for professional liability insurance, which policy(ies) shall have a minimum single combined limit liability of not less than one million dollars (\$1,000,000) per occurrence, (<u>iii</u>) compensation insurance for the benefit of the Contractor's employees ("<u>Workers' Compensation Insurance</u>"), which insurance is in compliance with the New York State Workers' Compensation Law, and (<u>iv</u>) such additional insurance as the County may from time to time specify.

- (b) Acceptability; Deductibles; Subcontractors. All insurance obtained and maintained by the Contractor pursuant to this Agreement shall be (i) written by one or more commercial insurance carriers licensed to do business in New York State and acceptable to the County, and which is (ii) in form and substance acceptable to the County. The Contractor shall be solely responsible for the payment of all deductibles to which such policies are subject. The Contractor shall require any subcontractor hired in connection with this Agreement to carry insurance with the same limits and provisions required to be carried by the Contractor under this Agreement.
- (c) <u>Delivery: Coverage Change; No Inconsistent Action.</u> Prior to the execution of this Agreement, copies of current certificates of insurance evidencing the insurance coverage required by this Agreement shall be delivered to the Department. Not less than thirty (30) days prior to the date of any expiration or renewal of, or actual, proposed or threatened reduction or cancellation of coverage under, any insurance required hereunder, the Contractor shall provide written notice to the Department of the same and deliver to the Department renewal or replacement certificates of insurance. The Contractor shall cause all insurance to remain in full force and effect throughout the term of this Agreement and shall not take or omit to take any action that would suspend or invalidate any of the required coverages. The failure of the Contractor to maintain Workers' Compensation Insurance shall render this contract void and of no effect. The failure of the Contractor to maintain the other required coverages shall be deemed a material breach of this Agreement upon which the County reserves the right to consider this Agreement terminated as of the date of such failure.
- 10. Assignment; Amendment; Waiver; Subcontracting. This Agreement and the rights and obligations hereunder may not be in whole or part (i) assigned, transferred or disposed of, (ii) amended, (iii) waived, or (iv) subcontracted, without the prior written consent of the County Executive or his or her duly designated deputy (the "County Executive"), and any purported assignment, other disposal or modification without such prior written consent shall be null and void. The failure of a party to assert any of its rights under this Agreement, including the right to demand strict performance, shall not constitute a waiver of such rights.
- 11. <u>Termination</u>. (a) <u>Generally</u>. This Agreement may be terminated (i) <u>for any reason</u> by the County upon thirty (30) days' written notice to the Contractor, (<u>ii</u>) for "Cause" by the County immediately upon the receipt by the Contractor of written notice of termination, (<u>iii</u>) upon mutual written Agreement of the County and the Contractor, and (<u>iv</u>) in accordance with any other provisions of this Agreement expressly addressing termination.

As used in this Agreement the word "<u>Cause</u>" includes: (i) a breach of this Agreement; (<u>ii</u>) the failure to obtain and maintain in full force and effect all Approvals required for the services described in this Agreement to be legally and professionally rendered; and (<u>iii</u>) the termination or impending termination of federal or state funding for the services to be provided under this Agreement.

(b) <u>By the Contractor</u>. This Agreement may be terminated by the Contractor if performance becomes impracticable through no fault of the Contractor, where the impracticability relates to the Contractor's ability to perform its obligations and not to a judgment as to convenience or the desirability of continued performance. Termination under this

subsection shall be effected by the Contractor delivering to the commissioner or other head of the Department (the "Commissioner"), at least sixty (60) days prior to the termination date (or a shorter period if sixty days' notice is impossible), a notice stating (i) that the Contractor is terminating this Agreement in accordance with this subsection, (ii) the date as of which this Agreement will terminate, and (iii) the facts giving rise to the Contractor's right to terminate under this subsection. A copy of the notice given to the Commissioner shall be given to the Deputy County Executive who oversees the administration of the Department (the "Applicable DCE") on the same day that notice is given to the Commissioner.

- (c) <u>Contractor Assistance upon Termination</u>. In connection with the termination or impending termination of this Agreement the Contractor shall, regardless of the reason for termination, take all actions reasonably requested by the County (including those set forth in other provisions of this Agreement) to assist the County in transitioning the Contractor's responsibilities under this Agreement. The provisions of this subsection shall survive the termination of this Agreement.
- 12. Accounting Procedures; Records. The Contractor shall maintain and retain, for a period of six (6) years following the later of termination of or final payment under this Agreement, complete and accurate records, documents, accounts and other evidence, whether maintained electronically or manually ("Records"), pertinent to performance under this Agreement. Records shall be maintained in accordance with Generally Accepted Accounting Principles and, if the Contractor is a non-profit entity, must comply with the accounting guidelines set forth in the federal Office of Management & Budget Circular A-122, "Cost Principles for Non-Profit Organizations." Such Records shall at all times be available for audit and inspection by the Comptroller, the Department, any other governmental authority with jurisdiction over the provision of services hereunder and/or the payment therefore, and any of their duly designated representatives. The provisions of this Section shall survive the termination of this Agreement.
- 13. <u>Limitations on Actions and Special Proceedings against the County</u>. No action or special proceeding shall lie or be prosecuted or maintained against the County upon any claims arising out of or in connection with this Agreement unless:
- (a) Notice. At least thirty (30) days prior to seeking relief the Contractor shall have presented the demand or claim(s) upon which such action or special proceeding is based in writing to the Applicable DCE for adjustment and the County shall have neglected or refused to make an adjustment or payment on the demand or claim for thirty (30) days after presentment. The Contractor shall send or deliver copies of the documents presented to the Applicable DCE under this Section to each of (i) the Department and the (ii) the County Attorney (at the address specified above for the County) on the same day that documents are sent or delivered to the Applicable DCE. The complaint or necessary moving papers of the Contractor shall allege that the above-described actions and inactions preceded the Contractor's action or special proceeding against the County.
- (b) <u>Time Limitation</u>. Such action or special proceeding is commenced within the earlier of (<u>i</u>) one (1) year of the first to occur of (<u>A</u>) final payment under or the termination of this Agreement, and (<u>B</u>) the accrual of the cause of action, and (<u>ii</u>) the time specified in any other provision of this Agreement.
- 14. Work Performance Liability. The Contractor is and shall remain primarily liable for the successful completion of all work in accordance this Agreement irrespective of whether the Contractor is using a Contractor Agent to perform some or all of the work contemplated by this

Agreement, and irrespective of whether the use of such Contractor Agent has been approved by the County.

- 15. Consent to Jurisdiction and Venue; Governing Law. Unless otherwise specified in this Agreement or required by Law, exclusive original jurisdiction for all claims or actions with respect to this Agreement shall be in the Supreme Court in Nassau County in New York State and the parties expressly waive any objections to the same on any grounds, including venue and forum non conveniens. This Agreement is intended as a contract under, and shall be governed and construed in accordance with, the Laws of New York State, without regard to the conflict of laws provisions thereof.
- or made in connection with this Agreement shall be (a) in writing, (b) delivered or sent (i) by hand delivery, evidenced by a signed, dated receipt, (ii) postage prepaid via certified mail, return receipt requested, or (iii) overnight delivery via a nationally recognized courier service, (c) deemed given or made on the date the delivery receipt was signed by a County employee, three (3) business days after it is mailed or one (1) business day after it is released to a courier service, as applicable, and (d)(i) if to the Department, to the attention of the Commissioner at the address specified above for the Department, (ii) if to an Applicable DCE, to the attention of the Applicable DCE (whose name the Contractor shall obtain from the Department) at the address specified above for the County, (iii) if to the Comptroller, to the attention of the Comptroller at 240 Old Country Road, Mineola, NY 11501, and (iv) if to the Contractor, to the attention of the person who executed this Agreement on behalf of the Contractor at the address specified above for the Contractor, or in each case to such other persons or addresses as shall be designated by written notice.
- 17. All Legal Provisions Deemed Included; Severability; Supremacy. (a) Every provision required by Law to be inserted into or referenced by this Agreement is intended to be a part of this Agreement. If any such provision is not inserted or referenced or is not inserted or referenced in correct form then (i) such provision shall be deemed inserted into or referenced by this Agreement for purposes of interpretation and (ii) upon the application of either party this Agreement shall be formally amended to comply strictly with the Law, without prejudice to the rights of either party.
- (b) In the event that any provision of this Agreement shall be held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions shall not in any way be affected or impaired thereby.
- (c) Unless the application of this subsection will cause a provision required by Law to be excluded from this Agreement, in the event of an actual conflict between the terms and conditions set forth above the signature page to this Agreement and those contained in any schedule, exhibit, appendix, or attachment to this Agreement, the terms and conditions set forth above the signature page shall control. To the extent possible, all the terms of this Agreement should be read together as not conflicting.
- (d) Each party has cooperated in the negotiation and preparation of this Agreement. Therefore, in the event that construction of this Agreement occurs, it shall not be construed against either party as drafter.

- 18. <u>Section and Other Headings</u>. The section and other headings contained in this Agreement are for reference purposes only and shall not affect the meaning or interpretation of this Agreement.
- 19. <u>Entire Agreement</u>. This Agreement represents the full and entire understanding and agreement between the parties with regard to the subject matter hereof and supersedes all prior agreements (whether written or oral) of the parties relating to the subject matter of this Agreement.
 - 20. Executory Clause. Notwithstanding any other provision of this Agreement:
- (a) <u>Approval and Execution</u>. The County shall have no liability under this Agreement (including any extension or other modification of this Agreement) to any Person unless (<u>i</u>) all County approvals have been obtained, including, if required, approval by the County Legislature, and (<u>ii</u>) this Agreement has been executed by the County Executive (as defined in this Agreement).
- (b) Availability of Funds. The County shall have no liability under this Agreement (including any extension or other modification of this Agreement) to any Person beyond funds appropriated or otherwise lawfully available for this Agreement, and, if any portion of the funds for this Agreement are from the state and/or federal governments, then beyond funds available to the County from the state and/or federal governments.

IN WITNESS WHEREOF, the Contractor and the County have executed this Agreement as of the date first above written.

FUND FOR THE CITY OF NEW YORK, CENTER FOR COURT INNOVATION

By:

Name: Courtney Bryan

Title: Executive Director

Date: 7/21/20

NASSAU COUNTY

Name: Tatum J. Fox
Title: County Executive

Deputy County Executive

PLEASE EXECUTE IN BLUE INK

| STATE OF NEW YORK) | |
|--|--|
| COUNTY OF NASSAU) | |
| | nd that he or she signed his or her name |
| NOTARY PUBLIC JUANA F. ROSARI Notary Public - State of N NO. 01R0610795; Qualified in Queens C, My Commission Expires | lew York 2 |
| STATE OF NEW YORK) | |
|)ss.: COUNTY OF NASSAU) | |
| | orporation described herein and which igned his or her name thereto pursuant to |
| NOTARY PUBLIC | Sanfu Cart |
| | TANYA L CARTER Notary Public, State of New York No. 01CA6072855 Qualified in Nassau County Commission Expires April 15, 2022 |

ATTACHMENT A

Project Description

The Nassau County Peer Diversion Program is a groundbreaking partnership spearheaded by the Nassau County Probation Department in partnership with the Office of Court Administration, the Center for Court Innovation, and numerous service providers in Nassau County.

The Nassau County Peer Diversion Program is an educational diversion program for young offenders, to ensure that adolescents ages 16 and 17 years old receive the benefit of developmentally appropriate services and reduce the likelihood that they will be trapped in a cycle of re-offending. In order to achieve these goals, the Center for Court Innovation provides a trained on-site coordination staff to ensure that appropriate defendants are identified, referred to effective services and monitored appropriately. The prosecutor, defense counsel and the court must receive timely and accurate updates on their participation in those services in order to come up with an appropriate disposition. For those defendants that are referred to the Nassau County Peer Diversion Program, CCI staff assists the Probation Department in conducting hearings staffed by high school students, making linkages to appropriate community service sites and pro-social activities. CCI staff reports to and allows project stakeholders to track progress, outcomes and case resolutions, as well as monitors compliance with the Peer Diversion Program dispositions and reports to the project stakeholders.

ATTACHMENT B

BUDGET SUMMARY

Fund for the City of New York: Center for Court Innovation

Nassau County Youth Court Programs October 1, 2019 - September 30, 2020

| | | TOTAL |
|--|---------------|--------|
| | : | BUDGET |
| Personnel * | | 59,770 |
| Fringe ** | 32% | 19,126 |
| • | | 78,896 |
| Expenses for Youth Court | | |
| Conferences (Travel/Meals/ Registration/ Lodging) | | 2,790 |
| Cell phone Costs | | 660 |
| Administrative fee | 18% | 14,823 |
| | | |
| PROJECT TOTAL | | 97,169 |

* Notes regarding Personnel Line:

- Parties shall mutually agree to exact days the Services under this Agreement shall be provided.
- Reimbursement of Personnel costs will include reimbursement for any leave time taken each pay period up to the maximum salary stated in this contract budget.

** Notes regarding Fringe Benefits Line:

• Fringe Line does not include reimbursement of leave time taken (see Notes regarding Personnel Line).

Appendix EE Equal Employment Opportunities for Minorities and Women

The provisions of this Appendix EE are hereby made a part of the document to which it is attached.

The Contractor shall comply with all federal, State and local statutory and constitutional anti-discrimination provisions. In addition, Local Law No. 14-2002, entitled "Participation by Minority Group Members and Women in Nassau County Contracts," governs all County Contracts as defined herein and solicitations for bids or proposals for County Contracts. In accordance with Local Law 14-2002:

- (a) The Contractor shall not discriminate against employees or applicants for employment because of race, creed, color, national origin, sex, age, disability or marital status in recruitment, employment, job assignments, promotions, upgradings, demotions, transfers, layoffs, terminations, and rates of pay or other forms of compensation. The Contractor will undertake or continue existing programs related to recruitment, employment, job assignments, promotions, upgradings, transfers, and rates of pay or other forms of compensation to ensure that minority group members and women are afforded equal employment opportunities without discrimination.
- (b) At the request of the County contracting agency, the Contractor shall request each employment agency, labor union, or authorized representative of workers with which it has a collective bargaining or other agreement or understanding, to furnish a written statement that such employment agency, union, or representative will not discriminate on the basis of race, creed, color, national origin, sex, age, disability, or marital status and that such employment agency, labor union, or representative will affirmatively cooperate in the implementation of the Contractor's obligations herein.
- (c) The Contractor shall state, in all solicitations or advertisements for employees, that, in the performance of the County Contract, all qualified applicants will be afforded equal employment opportunities without discrimination because of race, creed, color, national origin, sex, age, disability or marital status.
- (d) The Contractor shall make best efforts to solicit active participation by certified minority or women-owned business enterprises ("Certified M/WBEs") as defined in Section 101 of Local Law No. 14-2002, for the purpose of granting of Subcontracts.
- (e) The Contractor shall, in its advertisements and solicitations for Subcontractors, indicate its interest in receiving bids from Certified M/WBEs and the requirement that Subcontractors must be equal opportunity employers.
- (f) Contractors must notify and receive approval from the respective Department Head prior to issuing any Subcontracts and, at the time of requesting such authorization, must submit a signed Best Efforts Checklist.
- (g) Contractors for projects under the supervision of the County's Department of Public Works shall also submit a utilization plan listing all proposed Subcontractors so that, to the greatest extent feasible, all Subcontractors will be approved prior to commencement of work. Any additions or changes to the list of subcontractors under the utilization plan shall be approved by the Commissioner of the Department of Public Works when made. A copy of the utilization plan any additions or changes thereto shall be submitted by the Contractor to the Office of Minority Affairs simultaneously with the submission to the Department of Public Works.

- (h) At any time after Subcontractor approval has been requested and prior to being granted, the contracting agency may require the Contractor to submit Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises. In addition, the contracting agency may require the Contractor to submit such documentation at any time after Subcontractor approval when the contracting agency has reasonable cause to believe that the existing Best Efforts Checklist may be inaccurate. Within ten working days (10) of any such request by the contracting agency, the Contractor must submit Documentation.
- (i) In the case where a request is made by the contracting agency or a Deputy County Executive acting on behalf of the contracting agency, the Contractor must, within two (2) working days of such request, submit evidence to demonstrate that it employed Best Efforts to obtain Certified M/WBE participation through proper documentation.
- (j) Award of a County Contract alone shall not be deemed or interpreted as approval of all Contractor's Subcontracts and Contractor's fulfillment of Best Efforts to obtain participation by Certified M/WBEs.
- (k) A Contractor shall maintain Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises for a period of six (6) years. Failure to maintain such records shall be deemed failure to make Best Efforts to comply with this Appendix EE, evidence of false certification as M/WBE compliant or considered breach of the County Contract.
- (I) The Contractor shall be bound by the provisions of Section 109 of Local Law No. 14-2002 providing for enforcement of violations as follows:
 - a. Upon receipt by the Executive Director of a complaint from a contracting agency that a County Contractor has failed to comply with the provisions of Local Law No. 14-2002, this Appendix EE or any other contractual provisions included in furtherance of Local Law No. 14-2002, the Executive Director will try to resolve the matter.
 - b. If efforts to resolve such matter to the satisfaction of all parties are unsuccessful, the Executive Director shall refer the matter, within thirty days (30) of receipt of the complaint, to the American Arbitration Association for proceeding thereon.
 - c. Upon conclusion of the arbitration proceedings, the arbitrator shall submit to the Executive Director his recommendations regarding the imposition of sanctions, fines or penalties. The Executive Director shall either (i) adopt the recommendation of the arbitrator (ii) determine that no sanctions, fines or penalties should be imposed or (iii) modify the recommendation of the arbitrator, provided that such modification shall not expand upon any sanction recommended or impose any new sanction, or increase the amount of any recommended fine or penalty. The Executive Director, within ten days (10) of receipt of the arbitrators award and recommendations, shall file a determination of such matter and shall cause a copy of such determination to be served upon the respondent by personal service or by certified mail return receipt requested. The award of the arbitrator, and the fines and penalties imposed by the Executive Director, shall be final determinations and may only

be vacated or modified as provided in the civil practice law and rules ("CPLR").

(m) The contractor shall provide contracting agency with information regarding all subcontracts awarded under any County Contract, including the amount of compensation paid to each Subcontractor and shall complete all forms provided by the Executive Director or the Department Head relating to subcontractor utilization and efforts to obtain M/WBE participation.

Failure to comply with provisions (a) through (m) above, as ultimately determined by the Executive Director, shall be a material breach of the contract constituting grounds for immediate termination. Once a final determination of failure to comply has been reached by the Executive Director, the determination of whether to terminate a contract shall rest with the Deputy County Executive with oversight responsibility for the contracting agency.

Provisions (a), (b) and (c) shall not be binding upon Contractors or Subcontractors in the performance of work or the provision of services or any other activity that are unrelated, separate, or distinct from the County Contract as expressed by its terms.

The requirements of the provisions (a), (b) and (c) shall not apply to any employment or application for employment outside of this County or solicitations or advertisements therefor or any existing programs of affirmative action regarding employment outside of this County and the effect of contract provisions required by these provisions (a), (b) and (c) shall be so limited.

The Contractor shall include provisions (a), (b) and (c) in every Subcontract in such a manner that these provisions shall be binding upon each Subcontractor as to work in connection with the County Contract.

As used in this Appendix EE the term "Best Efforts Checklist" shall mean a list signed by the Contractor, listing the procedures it has undertaken to procure Subcontractors in accordance with this Appendix EE.

As used in this Appendix EE the term "County Contract" shall mean (i) a written agreement or purchase order instrument, providing for a total expenditure in excess of twenty-five thousand dollars (\$25,000), whereby a County contracting agency is committed to expend or does expend funds in return for labor, services, supplies, equipment, materials or any combination of the foregoing, to be performed for, or rendered or furnished to the County; or (ii) a written agreement in excess of one hundred thousand dollars (\$100,000), whereby a County contracting agency is committed to expend or does expend funds for the acquisition, construction, demolition, replacement, major repair or renovation of real property and improvements thereon. However, the term "County Contract" does not include agreements or orders for the following services: banking services, insurance policies or contracts, or contracts with a County contracting agency for the sale of bonds, notes or other securities.

As used in this Appendix EE the term "County Contractor" means an individual, business enterprise, including sole proprietorship, partnership, corporation, not-for-profit corporation, or any other person or entity other than the County, whether a contractor, licensor, licensee or any other party, that is (i) a party to a County Contract, (ii) a bidder in connection with the award of a County Contract, or (iii) a proposed party to a County Contract, but shall not include any Subcontractor.

As used in this Appendix EE the term "County Contractor" shall mean a person or firm who will manage and be responsible for an entire contracted project.

As used in this Appendix EE "Documentation Demonstrating Best Efforts to Obtain Certified Minority or Women-owned Business Enterprises" shall include, but is not limited to the following:

- a. Proof of having advertised for bids, where appropriate, in minority publications, trade newspapers/notices and magazines, trade and union publications, and publications of general circulation in Nassau County and surrounding areas or having verbally solicited M/WBEs whom the County Contractor reasonably believed might have the qualifications to do the work. A copy of the advertisement, if used, shall be included to demonstrate that it contained language indicating that the County Contractor welcomed bids and quotes from M/WBE Subcontractors. In addition, proof of the date(s) any such advertisements appeared must be included in the Best Effort Documentation. If verbal solicitation is used, a County Contractor's affidavit with a notary's signature and stamp shall be required as part of the documentation.
- b. Proof of having provided reasonable time for M/WBE Subcontractors to respond to bid opportunities according to industry norms and standards. A chart outlining the schedule/time frame used to obtain bids from M/WBEs is suggested to be included with the Best Effort Documentation
- c. Proof or affidavit of follow-up of telephone calls with potential M/WBE subcontractors encouraging their participation. Telephone logs indicating such action can be included with the Best Effort Documentation
- d. Proof or affidavit that M/WBE Subcontractors were allowed to review bid specifications, blue prints and all other bid/RFP related items at no charge to the M/WBEs, other than reasonable documentation costs incurred by the County Contractor that are passed onto the M/WBE.
- e. Proof or affidavit that sufficient time prior to making award was allowed for M/WBEs to participate effectively, to the extent practicable given the timeframe of the County Contract.
- f. Proof or affidavit that negotiations were held in good faith with interested M/WBEs, and that M/WBEs were not rejected as unqualified or unacceptable without sound business reasons based on (1) a thorough investigation of M/WBE qualifications and capabilities reviewed against industry custom and standards and (2) cost of performance The basis for rejecting any M/WBE deemed unqualified by the County Contractor shall be included in the Best Effort Documentation
- g. If an M/WBE is rejected based on cost, the County Contractor must submit a list of all sub-bidders for each item of work solicited and their bid prices for the work.
- h. The conditions of performance expected of Subcontractors by the County Contractor must also be included with the Best Effort Documentation

i. County Contractors may include any other type of documentation they feel necessary to further demonstrate their Best Efforts regarding their bid documents.

As used in this Appendix EE the term "Executive Director" shall mean the Executive Director of the Nassau County Office of Minority Affairs; provided, however, that Executive Director shall include a designee of the Executive Director except in the case of final determinations issued pursuant to Section (a) through (I) of these rules.

As used in this Appendix EE the term "Subcontract" shall mean an agreement consisting of part or parts of the contracted work of the County Contractor.

As used in this Appendix EE, the term "Subcontractor" shall mean a person or firm who performs part or parts of the contracted work of a prime contractor providing services, including construction services, to the County pursuant to a county contract. Subcontractor shall include a person or firm that provides labor, professional or other services, materials or supplies to a prime contractor that are necessary for the prime contractor to fulfill its obligations to provide services to the County pursuant to a county contract. Subcontractor shall not include a supplier of materials to a contractor who has contracted to provide goods but no services to the County, nor a supplier of incidental materials to a contractor, such as office supplies, tools and other items of nominal cost that are utilized in the performance of a service contract.

Provisions requiring contractors to retain or submit documentation of best efforts to utilize certified subcontractors and requiring Department head approval prior to subcontracting shall not apply to inter-governmental agreements. In addition, the tracking of expenditures of County dollars by not-for-profit corporations, other municipalities, States, or the federal government is not required.

Appendix L

Certificate of Compliance

In compliance with Local Law 1-2006, as amended (the "Law"), the Contractor hereby certifies the following:

| 1. | The chief executive officer of the Contractor is: | |
|----|---|---|
| | Mary McCormick | (Name) |
| | 121 6th Avenue, 6th Floor. New York, NY 10013 | (Address) |
| | (212) 925-6675 | (Telephone Number) |
| 2. | The Contractor agrees to either (1) comply with the requirements of the Law. In the event that the contractor establishes to the satisfaction of the Department of this agreement, it had a reasonable certainty that it woon the Law and Rules pertaining to waivers, the County contract without imposing costs or seeking damages again. | the requirements of the Law ontractor does not comply with quirements of the Law, and such ent that at the time of execution ould receive such waiver based will agree to terminate the |
| 3. | In the past five years, Contractor has _X_ has government agency to have violated federal, state, or lowages or benefits, labor relations, or occupational safety been assessed against the Contractor, describe below: | cal laws regulating payment of |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| 4. | initiated judicial action has _ the Contractor in connection with fe wages or benefits, labor relations, of | ative proceeding, investigation, or government body— X has not been commenced against or relating to ederal, state, or local laws regulating payment of or occupational safety and health. If such a has been commenced, describe below: |
|---------|---|---|
| | | |
| | * | |
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| | | |
| | ¥ | |
| | | |
| 5. | authorized County representatives | to work sites and relevant payroll records by for the purpose of monitoring compliance with the employee complaints of noncompliance. |
| belief, | by certify that I have read the foregoing it is true, correct and complete. Any the and true as of the date stated below. | ing statement and, to the best of my knowledge and statement or representation made herein shall be low. |
| 8 Dated | 25/20 | Signature of Chief Executive Officer |
| | | Mary McCormick |
| | | Name of Chief Executive Officer |
| | | |
| Sworn | to before me this | |
| 25/12 | day of August, 2020. | |
| Notary | Public F. Rosario | |
| 3 | JUANA F. ROSARIO otary Public - State of New York NO. 01R06107952 Qualified in Queens County commission Expires | 10 |



CERTIFICATE OF INSURANCE COVERAGE

DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

| PART 1. To be completed by Disability and Paid Family Leave Be | nefits Carrier or Licensed Insurance Agent of that Carrier |
|--|---|
| 1a. Legal Name & Address of Insured (use street address only) | 1b. Business Telephone Number of Insured |
| FUND FOR THE CITY OF NEW YORK 121 AVENUE OF THE AMERICAS, 6TH FLOOR NEW YORK, NY 10013 Work Location of Insured (Only required if coverage is specifically limited to certain locations in New York State, i.e., Wrap-Up Policy) | 212-925-6675 1c. Federal Employer Identification Number of Insured or Social Security Number 132612524 |
| 2. Name and Address of Entity Requesting Proof of | 3a Name of Insurance Carrier |
| Coverage (Entity Being Listed as the Certificate Holder) | HARTFORD LIFE AND ACCIDENT |
| Nassau County Department of Probation 400 County Seat Drive | 3b Policy Number of Entity Listed in Box "1a" |
| Mineola, NY 11501 | LNY727447 |
| | 3c Policy effective period |
| | 07-01-2020 to 06-30-2021 |
| ✓ A. Both disability and paid family leave benefits. ☐ B. Disability benefits only. ☐ C. Paid family leave benefits only. 5. Policy covers: ✓ A. All of the employer's employees eligible under the NYS Disa ☐ B. Only the following class or classes of employer's employees | |
| insured has NYS Disability and/or Paid Family Leave Benefits insurance of | r licensed agent of the insurance carrier referenced above and that the named coverage as described above. South Tello |
| Date Signed | e carrier's authorized representative or NYS Licensed Insurance Agent of that insurance carrier) |
| | zabeth Tello – Assistant Director, Statutory Services |
| | signed by the insurance carrier's authorized representative or NYS rtificate is COMPLETE. Mail it directly to the certificate holder. |
| | s NOT COMPLETE for purposes of Section 220, Subd. 8 of the NYS It must be mailed for completion to the Workers' Compensation nghamton, NY 13902-5200. |
| PART 2. To be completed by the NYS Workers' Compensation | ation Board (Only if Box 4C or 5B of Part 1 has been checked) |
| | |
| | (Signature of Authorized NYS Workers' Compensation Board Employee) |
| Telephone Number Name and Title | |
| | |

Please Note: Only insurance carriers licensed to write NYS disability and paid family leave benefits insurance policies and NYS licensed insurance agents of those insurance carriers are authorized to issue Form DB-120.1. Insurance brokers are NOT authorized to issue this form.



Additional Instructions for Form DB-120.1

By signing this form, the insurance carrier identified in Box 3 on this form is certifying that it is insuring the business referenced in box "1 a" for disability and/or paid family leave benefits under the New York State Disability and Paid Family Leave Benefits Law. The Insurance Carrier or its licensed agent will send this Certificate of Insurance to the entity listed as the certificate holder in Box 2.

The insurance carrier must notify the above certificate holder and the Workers' Compensation Board within 10 days IF a policy is cancelled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from coverage indicated on this Certificate. (These notices my be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in Box 3c, whichever is earlier

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

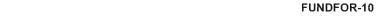
This certificate may be used as evidence of a Disability and/or Paid Family Leave Benefits contract of insurance only while the underlying policy is in effect.

Please Note: Upon the cancellation of the disability and/or paid family leave benefits policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of NYS Disability and/or Paid Family Leave Benefits Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Disability and Paid Family Leave Benefits Law.

DISABILITY AND PAID FAMILY LEAVE BENEFITS LAW

§220. Subd. 8

- (a) The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in employment as defined in this article, and not withstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand and twenty-one, the payment of family leave benefits for all employees has been secured as provided by this article. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any disability benefits to any such employee if so employed.
- (b) The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in employment as defined in this article and notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that the payment of disability benefits and after January first, two thousand eighteen, the payment of family leave benefits for all employees has been secured as provided by this article.



SBENNETT

DATE (MM/DD/YYYY) 2/21/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

CERTIFICATE OF LIABILITY INSURANCE

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed.

| Crys 32 C | DUCER Stal IBC, LLC DId Slip 29th FI v York, NY 10005 | | | CONTACT Shalinda NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: Shalinda | .bennett@ | | | 700 |
|--------------------|--|----------------------------------|--|--|---|---|--------|-----------------|
| | | | | | | RDING COVERAGE | | NAIC# |
| | | | | | | nnity Insurance Com | pany | 18058 |
| INSU | RED | | | Water Carlo | ne Mutual | Insurance Company | _ | 15032 |
| | Fund for the City of New Yor 121 Avenue of the Americas | | | INSURER C : | | | | |
| | New York, NY 10013 | | | INSURER D : | | | | |
| | 11300 1311, 110 13313 | | | INSURER E : | | | | |
| ~~ | VERAGES CER | TIFIC | TE NUMBER: | INSURER F : | | REVISION NUMBER: | | |
| TI IN C E | HIS IS TO CERTIFY THAT THE POLICIE DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH | S OF EQUIR PERT/ POLICI | INSURANCE LISTED BELOW EMENT, TERM OR CONDITI NN, THE INSURANCE AFFO ES, LIMITS SHOWN MAY HAV | ON OF ANY CONTRA PRDED BY THE POLIC /E BEEN REDUCED BY | CT OR OTHEI IES DESCRIE PAID CLAIMS | RED NAMED ABOVE FOR T R DOCUMENT WITH RESPI BED HEREIN IS SUBJECT T | ECT TO | WHICH THIS |
| NSR LTR | | ADDL SI | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMIT | s | 4 000 000 |
| Α | X COMMERCIAL GENERAL LIABILITY | | | | | EACH OCCURRENCE | S | 1,000,000 |
| | CLAIMS-MADE X OCCUR | Х | PHPK2091010 | 2/3/2020 | 2/3/2021 | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ | 1,000,000 |
| | | | | | | MED EXP (Any one person) | S | 20,000 |
| | | | | | | PERSONAL & ADV INJURY | 5 | 1,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | GENERAL AGGREGATE | 5 | 3,000,000 |
| | POLICY PRO X LOC | | | | | PRODUCTS - COMP/OP AGG EBL AGGREGATE | S | 3,000,000 |
| _ | OTHER: | | | | | | \$ | 1,000,000 |
| Α | AUTOMOBILE LIABILITY | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ | 1,000,000 |
| | X ANY AUTO OWNED AUTOS ONLY AUTOS AUTOS AUTOS AUTOS AUTOS AUTOS AUTOS AUTOS AUTOS | | PHPK2091010 | 2/3/2020 | 2/3/2021 | BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE | He. | |
| | AUTOS ONLY NON-OWNED AUTOS ONLY | | | | | PROPERTY DAMAGE (Per accident) | 5 | |
| Α | X UMBRELLA LIAB OCCUR | | | | | | S | 5,000,000 |
| ^ | X UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE | | PHUB709585 | 2/3/2020 | 2/3/2021 | EACH OCCURRENCE | S | 5,000,000 |
| | DED X RETENTION\$ 10,000 | | | | | AGGREGATE | S | 0,000,000 |
| В | THE STATE OF THE S | | | | | PER OTH- STATUTE ER | S | |
| _ | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPERTORY OF PARTY FOR THE PARTY F | | 010015131 | 2/3/2020 | 2/3/2021 | E.L. EACH ACCIDENT | s | 500,000 |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) | N/A | | | | E.L. DISEASE - EA EMPLOYEE | | 500,000 |
| | If yes, describe under | | | | | | | 500,000 |
| | DÉSCRIPTION OF OPERATIONS below | | | | | E.L. DISEASE - POLICY LIMIT | ā | 222223111123334 |
| | | | | | | | | |
| | | | | | | | | |



CERTIFICATE OF

| Board N13 VVO | RRERS COMPENSATION INSURANCE COVERAGE |
|---|--|
| 1a. Legal Name and address of Insured (use street addre FUND FOR THE CITY OF NEW YORK 121 AVE OF THE AMERICAS NEW YORK NY 10013 | 1b. Business Telephone Number of Insured 1c. NYS Unemployment Insurance Employer Registration Number of Insured |
| Work Location of Insured (Only required if coverage is spe limited to certain locations in New York State, i.e. a Wrap- | |
| Name and Address of the Entity Requesting Proof of Coverage (Entity Being Listed as the Certificate Hold | 3a. Name of Insurance Carrier er) Guide One Mutual Insurance Co. |
| Nassau County – Office of the District Attorn Attn: Tracy Niedfeld 262 Old Country Road Mineola, NY 11501 | 3c. Policy effective period: 2/3/2020 to 2/3/2021 3d. The Proprietor, Partners or Executive Officers are |
| | Included. (Only check box if all partners/officers included) all excluded or certain partners/officers excluded. |
| workers' compensation under the New York State Wobe listed under Item 3A on the INFORMATION insurance Carrier or its licensed agent will send this molder in box "2". | ve in box "3" insures the business referenced above in box "1a" for rkers' Compensation Law. (To use this form, New York (NY) must PAGE of the workers' compensation insurance policy). The Certificate of Insurance to the entity listed above as the certificate |

policy is canceled due to nonpayment of premiums or within 30 days IF there are reasons other than nonpayment of premiums that cancel the policy or eliminate the insured from the coverage indicated on this Certificate. (These notices may be sent by regular mail.) Otherwise, this Certificate is valid for one year after this form is approved by the insurance carrier or its licensed agent, or until the policy expiration date listed in box "3c", whichever is earlier.

This certificate is issued as a matter of information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policy listed, nor does it confer any rights or responsibilities beyond those contained in the referenced policy.

This certificate may be used as evidence of a Worker's Compensation contract of insurance only while the underlying policy is in effect.

Please Note: Upon cancellation of the workers' compensation policy indicated on this form, if the business continues to be named on a permit, license or contract issued by a certificate holder, the business must provide that certificate holder with a new Certificate of Workers' Compensation Coverage or other authorized proof that the business is complying with the mandatory coverage requirements of the New York State Workers' Compensation Law.

Under penalty of perjury, I certify that I am an authorized representative or licensed agent of the insurance carrier referenced above and that the named insured has the coverage as depicted on this form.

| | rance carrier) |
|----------------|----------------|
| (Signature) | > |
| Account - Exec | |
| | N |

Te

Please Note: Only insurance carriers and their licensed agents are authorized to Issue Form C-105.2. Insurance brokers are NOT authorized to issue it.

C-105.2 (9-17) Form WC 88 31 21 F Printed in U.S.A.

Workers' Compensation Law

Section 57. Restriction on issue of permits and the entering into contracts unless compensation is secured.

- 1. The head of a state or municipal department, board, commission or office authorized or required by law to issue any permit for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, and notwithstanding any general or special statute requiring or authorizing the issue of such permits, shall not issue such permit unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter. Nothing herein, however, shall be construed as creating any liability on the part of such state or municipal department, board, commission or office to pay any compensation to any such employee if so employed.
- 2. The head of a state or municipal department, board, commission or office authorized or required by law to enter into any contract for or in connection with any work involving the employment of employees in a hazardous employment defined by this chapter, notwithstanding any general or special statute requiring or authorizing any such contract, shall not enter into any such contract unless proof duly subscribed by an insurance carrier is produced in a form satisfactory to the chair, that compensation for all employees has been secured as provided by this chapter.

LAURA CURRAN

JOHN PLACKIS

COUNTY EXECUTIVE

DIRECTOR



NASSAU COUNTY PROBATION DEPARTMENT

400 COUNTY SEAT DRIVE MINEOLA, NY 11501-4823

To: Robert Cleary, Chief Procurement Officer

From: Dominick DiMaggio Jr., Attorney III

Date: October 27, 2020

Subject: Fund for the City of New York, Center for Court Innovation

Contract for Fund for the City of New York, Center for Court Innovation

This memorandum is respectfully submitted to provide information relating to a retroactive contract the Probation Department is seeking to have approved by the Legislature. This contract is between the County and Fund for the City of New York, Center for Court Innovation.

This contract is to provide funding for Youth Court Coordinator compliant with Raise the Age (RTA). The following is a timeline outlining why this contract is retroactive. The Department of Probation received formal funding for the Raise the Age (RTA) program in March 2020. Due to the difficulties of the Covid-19 pandemic. There were delays in the ability to communicate during this time, various procurement documents and signatures on the contract itself became stale, all contributing to this contract being processed retroactively.

The Department is committed to moving forward with its contracts in a timely fashion.

Contract Approval Request Form (As of January 1, 2015)

| 1. Vendor: Fund for the City of New York, Center fo | r Court Innovation | | |
|---|--|-----------------------------------|--|
| 2. Dollar amount requiring NIFA approval: \$9917 | 8 | | |
| Amount to be encumbered: \$99178 | | | |
| This is a Amendment | | | |
| If new contract - \$ amount should be full amount of of advisement ?NIFA only needs to review if it is increased in the same of | easing funds above the | e amount pre | eviously approved by NIFA |
| 3. Contract Term: 10/01/2020-09/30/2021 Has work or services on this contract commence | d? Y | | |
| If yes, please explain: Grant Program | | | |
| 4. Funding Source: | | | |
| General Fund (GEN) Capital Improvement Fund (CAP) Other | X Grant Fund (GRT) | Federal % State % County % | 100 |
| Is the cash available for the full amount of the contra | act? | Υ | |
| If not, will it require a future borrowing? | | N | |
| Has the County Legislature approved the borrowing | ? | N/A | |
| Has NIFA approved the borrowing for this contract? | | N/A | |
| 5. Provide a brief description (4 to 5 sentences) | of the item for which | this approv | al is requested: |
| The Peer Diversion Court seeks to help teenage defendants avensures that adolescents ages 16 and 17 receive the benefit of offending. | oid the legal and collateral co developmentally appropriate | onsequences as services and re | sociated with criminal prosecution. The program educe the likelihood of continuing a cycle of re- |
| 6. Has the item requested herein followed all pro | oper procedures and | thereby ap | proved by the: |
| Nassau County Attorney as to form | | | |
| Nassau County Committee and/or Legislature | | | |
| Date of approval(s) and citation to the resolut | ion where approval f | or this item | was provided: |

7. Identify all contracts (with dollar amounts) with this or an affiliated party within the prior 12 months:

Amount

Date

Contract ID

AUTHORIZATION

To the best of my knowledge, I hereby certify that the information contained in this Contract Approv al Request Form and any additional information submitted in connection with this request is true an d accurate and that all expenditures that will be made in reliance on this authorization are in confor mance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan. I understand that NIFA will rely upon this information in its official deliberation s.

IQURESHI 15-SEP-21

Authenticated User Date

COMPTROLLER'S OFFICE

To the best of my knowledge, I hereby certify that the information listed is true and accurate and is in conformance with the Nassau County Approved Budget and not in conflict with the Nassau County Multi-Year Financial Plan.

Regarding funding, please check the correct response:

_ I certify that the funds are available to be encumbered pending NIFA approval of this contract.

If this is a capital project:

I certify that the bonding for this contract has been approved by NIFA.

Budget is available and funds have been encumbered but the project requires NIFA bonding authorization

Authenticated User Date

NIFA

Amount being approved by NIFA: _

Payment is not guaranteed for any work commenced prior to this approval.

Authenticated User Date

NOTE: All contract submissions MUST include the County's own routing slip, current NIFS pri ntouts for all relevant accounts and relevant Nassau County Legislature communication docu ments and relevant supplemental information pertaining to the item requested herein.

NIFA Contract Approval Request Form MUST be filled out in its entirety before being submitted to NIFA for review.

NIFA reserves the right to request additional information as needed.