

**Board of Directors Listing**

|  |                          |   |            |
|--|--------------------------|---|------------|
| Name                                       | CARBONE, ENESSA M        | Nominated By  | Ex-Officio |
| Chair of the Board                         | No                       | Appointed By  | Ex-Officio |
| If yes, Chair Designated by                |                          | Confirmed by Senate?  | N/A        |
| Term Start Date                            | 1/1/2024                 | Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?                     | Yes        |
| Term Expiration Date                       | Ex-Officio               | Complied with Training Requirement of Section 2824?   | No         |
| Title                                      | VICE PRESIDENT/TREASURER | Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?     | No         |
| Has the Board Member Appointed a Designee? | No                       | Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position? | Yes        |
| Designee Name                              |                          | Ex-Officio  | Yes        |

|  |                       |   |            |
|--|-----------------------|---|------------|
| Name                                       | FINEGAN, MARY         | Nominated By  | Ex-Officio |
| Chair of the Board                         | No                    | Appointed By  | Other      |
| If yes, Chair Designated by                |                       | Confirmed by Senate?  | No         |
| Term Start Date                            | 3/22/2024             | Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?                     | Yes        |
| Term Expiration Date                       | Pleasure of Authority | Complied with Training Requirement of Section 2824?   | No         |
| Title                                      |                       | Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?     | No         |
| Has the Board Member Appointed a Designee? |                       | Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position? | Yes        |
| Designee Name                              |                       | Ex-Officio  |            |

|  |                       |   |       |
|--|-----------------------|---|-------|
| Name                                       | FORD, BLAKE J         | Nominated By  | Other |
| Chair of the Board                         | No                    | Appointed By  | Other |
| If yes, Chair Designated by                |                       | Confirmed by Senate?  | N/A   |
| Term Start Date                            | 10/26/2000            | Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?                     | Yes   |
| Term Expiration Date                       | Pleasure of Authority | Complied with Training Requirement of Section 2824?   | No    |
| Title                                      |                       | Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?     | No    |
| Has the Board Member Appointed a Designee? |                       | Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position? | No    |
| Designee Name                              |                       | Ex-Officio  | No    |

|  |                       |   |            |
|--|-----------------------|---|------------|
| Name                                       | PICENTE, ANTHONY J    | Nominated By  | Ex-Officio |
| Chair of the Board                         | Yes                   | Appointed By  | Ex-Officio |
| If yes, Chair Designated by                | By Virtue of Position | Confirmed by Senate?  | N/A        |
| Term Start Date                            | 1/1/2007              | Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?                     | Yes        |
| Term Expiration Date                       | Ex-Officio            | Complied with Training Requirement of Section 2824?   | No         |
| Title                                      | PRESIDENT             | Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?     | No         |
| Has the Board Member Appointed a Designee? | No                    | Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position? | Yes        |
| Designee Name                              |                       | Ex-Officio  | Yes        |

|  |                       |   |       |
|--|-----------------------|---|-------|
| Name                                       | PRATT, MARY           | Nominated By  | Other |
| Chair of the Board                         | No                    | Appointed By  | Other |
| If yes, Chair Designated by                |                       | Confirmed by Senate?  | N/A   |
| Term Start Date                            | 3/12/2020             | Has the Board Member/Designee Signed the Acknowledgement of Fiduciary Duty?                     | Yes   |
| Term Expiration Date                       | Pleasure of Authority | Complied with Training Requirement of Section 2824?   | Yes   |
| Title                                      |                       | Does the Board Member/Designee also Hold an Elected or Appointed State Government Position?     | No    |
| Has the Board Member Appointed a Designee? |                       | Does the Board Member/Designee also Hold an Elected or Appointed Municipal Government Position? | Yes   |
| Designee Name                              |                       | Ex-Officio  |       |

Annual Report for Oneida Tobacco Asset Securitization Corporation

Fiscal Year Ending: 12/31/2025

Run Date: 03/31/2026  
Status: CERTIFIED  
Certified Date: 03/31/2026

**Staff Listing**

| Name   | Title | Group | Department/<br>Subsidiary | Union<br>Name | Bargaining<br>Unit | Full Time/<br>Part Time | Exempt<br>Base<br>Annualized<br>Salary | Actual<br>salary paid<br>to the<br>Individual | Overtime<br>paid by<br>Authority | Performance<br>Bonus | Extra Pay | Other<br>Compensa-<br>tion/<br>Allowanc-<br>es/<br>Adjust-<br>ments | Total<br>Compensa-<br>tion<br>paid<br>by<br>Authority | Individual<br>also paid<br>by another<br>entity to<br>perform the<br>work of the<br>Authority | if yes, Is<br>payment<br>made by a<br>State or<br>local<br>governme-<br>nt |
|--|-------|-------|---------------------------|---------------|--------------------|-------------------------|--|---|----------------------------------|----------------------|-----------|---|---|---|--|
| This Authority has indicated that it has no staff during the reporting period. |       |       |                           |               |                    |                         |  |   |                                  |                      |           |   |   |   |  |