

# Mohawk Valley Library System

## Annual Report for Library Systems - 2015 (Public Library Systems 2015)

CURRENT YEAR

### 1. General System Information

1.1	SEDCODE	530600700012
1.2	System Name	Mohawk Valley Library System
1.3	Beginning Reporting Year	1/1/2015
1.4	Ending Reporting Year	12/31/2015
1.5	Street Address	858 Duanesburg Rd.
1.6	City	Schenectady
1.7	Zip Code	12306
1.8	Four-Digit Zip Code Extension (enter N/A if unknown)	1057
1.9	Mailing Address	858 Duanesburg Rd.
1.10	City	Schenectady
1.11	Zip Code	12306
1.12	Four-Digit Zip Code Extension (enter N/A if unknown)	1057
1.13	Library System Telephone Number (enter 10 digits only and hit the Tab key)	(518) 355-2010
1.14	Fax Number (enter 10 digits only)	(518) 355-0674
1.15	System Home Page URL	www.mvls.info
1.16	URL of the system's complete Plan of Service	http://www.mvls.info/wp-content/uploads/2014/05/BTColl
1.17	Population Chartered to Serve (2010 Census)	293,226
1.18	Area Chartered to Serve (square miles)	1725
1.19	Federal Employer Identification Number	141458888
1.20	County	Schenectady
1.21	County (Counties) Served	Fulton, Montgomery, Schenectady, Schoharie
1.22	School District	Schalmont Central School District
1.23	Title of System Director: (drop-down): Mr., Mrs., Ms., Miss, Dr.	Mr.
1.24	First Name of System Director	Eric
1.25	Last Name of System Director	Trahan
1.26	NYS Public Librarian Certification Number of the Director of Public Library System, and Reference and Research Library Resources System.	16164
1.31	Telephone Number of the System Director, including area code and extension (enter digits only, field will automatically format with extension)	(518) 355-2010 Ext.223
1.32	E-Mail Address of the System Director	etrahan@mvls.info
1.33	Fax Number of the System Director (enter 10 digits only and hit the Tab key)	(518) 355-0674
1.34	Name of Outreach Coordinator	Lois Gordon
1.48	Does the reporting system have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter N Y for Yes, N for No. If yes, please complete one repeating group for each co	

1.	Name of Contracting Municipality or District	N/A
2.	Is this a written contract? (Enter Y for Yes, N for No)	N/A
3.	Population of the geographic area served by this contract	N/A
4.	Dollar amount of contract	N/A
5.	Indicate "Full" or "Partial" range of services provided by this contract (Select one)	N/A
1.49	For the reporting year, has the system experienced any unusual circumstance(s) that affected the statistics and/or information reported (e.g. natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? Indicate Y for Yes, N for No	N

## 2. Personnel Information

2.1	FTE (Full-Time Equivalent Calculation) The number of hours per work week used to compute FTE for all budgeted positions.	35
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### BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

(enter to two decimal places; enter decimal point)

2.4	Public Library System Director per CR 90.3(f) - Filled Position FTE	1
2.5	Public Library System Director per CR 90.3(f) - Vacant Position FTE	0
2.10	Librarians - Filled Position(s) FTE	2
2.11	Librarians - Vacant Position(s) FTE	0
2.12	Outreach Coordinator (certified) per CR 90.3 (1)(2)(iii) - Filled Position FTE	1
2.13	Outreach Coordinator (certified) per CR 90.3 (1)(2)(iii) - Vacant Position FTE	0
2.14	<b>Total Certified Librarians - Filled Position(s) FTE (total questions 2.4 + 2.6 + 2.8 + 2.10 + 2.12)</b>	4.00
2.15	<b>Total Certified Librarians - Vacant Position(s) FTE (total questions 2.5 + 2.7 + 2.9 + 2.11 + 2.13)</b>	0.00
2.16	Total Other Professional Staff - Filled Position(s) FTE	0
2.17	Total Other Professional Staff - Vacant Position(s) FTE	0
2.18	Total Other Staff - Filled Position(s) FTE	2.1
2.19	Total Other Staff - Vacant Position(s) FTE	0
2.20	<b>Total Paid Staff - Filled Position(s) FTE (total questions 2.14 + 2.16 + 2.18)</b>	6.10
2.21	<b>Total Paid Staff - Vacant Position(s) FTE (total questions 2.15 + 2.17 + 2.19)</b>	0.00

### SALARY INFORMATION

2.22	Entry-Level Librarian (certified) FTE	0
2.23	Entry-Level Librarian (certified) Current Annual Salary	\$47,969
2.24	System Director FTE	1
2.25	System Director Current Annual Salary	\$90,300

## 3. System Membership, Outlets and Governance

### PUBLIC SERVICE OUTLETS

3.9	Number of member libraries	14
3.15	Main Library/System Headquarters	1

3.16	Branches	0
3.17	Bookmobiles	0
3.18	Reading Centers	0
3.19	Other Outlets	0
3.20	<b>Total Public Service Outlets (total questions 3.15 through 3.19)</b>	1
3.21	Name of Central Library/Co-Central Libraries	Schenectady County Public Library

#### BOARD/COUNCIL MEETINGS

3.22	Total number of public library system/3Rs board meetings or school library system council meetings held during reporting year	8
3.24	Number of <u>voting</u> positions on system board/council	13
3.25	Term length for system board/council members	5 years

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.**

3.26	Board/Council Selection - Enter Board/Council Selection Code (select one; drop-down). If O is selected, please use the State note to explain how members were named to the Board/Council.	E
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#### SYSTEM BOARD/COUNCIL

Public Library Systems - enter information for the period January 1, 2016, through December 31, 2016.

School Library Systems and 3Rs Systems - enter information for the period July 1, 2016, through June 30, 2017

#### President/Council Chair

3.27	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
3.28	First Name	Sarah
3.29	Last Name	Beekman
3.30	Institutional Affiliation	Middleburgh Public Library
3.31	Professional Title	Trustee
3.32	Mailing Address	737 Lawton Hollow Rd.
3.33	City	Middleburgh
3.34	Zip Code (enter five digits only)	12122
3.35	Telephone for the Board President (enter 10 digits only and hit the Tab key)	(518) 827-6348
3.36	E-mail Address	sarahbeekman@yahoo.com
3.37	Term Begins - Month	June
3.38	Term Begins - Year (yyyy)	2015
3.39	Term Expires - Month or N/A	June
3.40	Term Expires - Year (YYYY) or N/A	2020
3.41	Is this trustee serving a full term? If No, add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
3.42	The date the board president took the Oath of Office (mm/dd/yyyy)	5/24/2010
3.43	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	5/28/2010
3.44	Is this a brand new trustee?	N

Board/Council Member - complete one record for each Board/Council Member. For each vacant position, select "Vacant" in qt

be 5 to 11 (no less than five and no more than 11).

- |     |  |                                   |
|-----|--|-----------------------------------|
| 1.  | Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant  | Mr.                               |
| 2.  | First Name   | Bernard                           |
| 3.  | Last Name  | Allanson                          |
| 4.  | Institutional Affiliation  | Schenectady County Public Library |
| 5.  | Professional Title   | N/A                               |
| 6.  | Mailing Address  | 1193 Oxford Place                 |
| 7.  | City   | Schenectady                       |
| 8.  | Zip Code (enter five digits only)  | 12308                             |
| 9.  | Term Begins - Month  | June                              |
| 10. | Term Begins - Year (yyyy)  | 2015                              |
| 11. | Term Expires - Month or N/A  | June                              |
| 12. | Term Expires - Year (YYYY) or N/A  | 2020                              |
| 13. | What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | 5 Years                           |
| 14. | The date the trustee took the Oath of Office (mm/dd/yyyy)  | 6/22/2015                         |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | 6/23/2015                         |
| 16. | Is this a brand new trustee?   | N                                 |
| 1.  | Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant  | Vacant                            |
| 2.  | First Name   | N/A                               |
| 3.  | Last Name  | N/A                               |
| 4.  | Institutional Affiliation  | N/A                               |
| 5.  | Professional Title   | N/A                               |
| 6.  | Mailing Address  | N/A                               |
| 7.  | City   | N/A                               |
| 8.  | Zip Code (enter five digits only)  | N/A                               |
| 9.  | Term Begins - Month  | N/A                               |
| 10. | Term Begins - Year (yyyy)  | N/A                               |
| 11. | Term Expires - Month or N/A  | N/A                               |
| 12. | Term Expires - Year (YYYY) or N/A  | N/A                               |
| 13. | What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | N/A                               |
| 14. | The date the trustee took the Oath of Office (mm/dd/yyyy)  | N/A                               |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | N/A                               |
| 16. | Is this a brand new trustee?   | N                                 |
| 1.  | Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant  | Ms.                               |
| 2.  | First Name   | Rebecca Sokol                     |

3.	Last Name	
4.	Institutional Affiliation	Margaret Reaney Memorial Library
5.	Professional Title	N/A
6.	Mailing Address	140 Allen Heights
7.	City	St. Johnsville
8.	Zip Code (enter five digits only)	13452
9.	Term Begins - Month	September
10.	Term Begins - Year (yyyy)	2014
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2018
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	3 years, 9 months
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	9/29/2014
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	10/14/2014
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Marion
3.	Last Name	Grimes
4.	Institutional Affiliation	Schenectady County Public Library
5.	Professional Title	N/A
6.	Mailing Address	1020 Tomahawk Trail
7.	City	Scotia
8.	Zip Code (enter five digits only)	12302
9.	Term Begins - Month	April
10.	Term Begins - Year (yyyy)	2016
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2020
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	4 years 10 months
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	4/7/2016
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	4/11/2016
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Jane
3.	Last Name	Borrelli
4.	Institutional Affiliation	Northville Public Library
5.	Professional Title	N/A
6.	Mailing Address	PO Box 1311
7.	City	Northville
8.	Zip Code (enter five digits only)	12134

9.	Term Begins - Month	June
10.	Term Begins - Year (yyyy)	2012
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2017
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	5 years
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	5/21/2012
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	5/24/2012
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Bonnie
3.	Last Name	Kerr
4.	Institutional Affiliation	None
5.	Professional Title	N/A
6.	Mailing Address	12 Goodrich Ave
7.	City	Fort Plain
8.	Zip Code (enter five digits only)	13339
9.	Term Begins - Month	June
10.	Term Begins - Year (yyyy)	2012
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2017
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	5 years
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	6/18/2012
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	7/9/2012
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Barbara
3.	Last Name	Madonna
4.	Institutional Affiliation	Gloversville Public Library
5.	Professional Title	Director
6.	Mailing Address	58 East Fulton St.
7.	City	Gloversville
8.	Zip Code (enter five digits only)	12078
9.	Term Begins - Month	June
10.	Term Begins - Year (yyyy)	2015
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2020

13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	5 years
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	5/19/2015
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	5/29/2015
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Vacant
2.	First Name	N/A
3.	Last Name	N/A
4.	Institutional Affiliation	N/A
5.	Professional Title	N/A
6.	Mailing Address	N/A
7.	City	N/A
8.	Zip Code (enter five digits only)	N/A
9.	Term Begins - Month	N/A
10.	Term Begins - Year (yyyy)	N/A
11.	Term Expires - Month or N/A	N/A
12.	Term Expires - Year (YYYY) or N/A	N/A
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	N/A
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	N/A
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Mary
3.	Last Name	Salluzzo
4.	Institutional Affiliation	N/A
5.	Professional Title	N/A
6.	Mailing Address	204 South William St.
7.	City	Johnstown
8.	Zip Code (enter five digits only)	12095
9.	Term Begins - Month	September
10.	Term Begins - Year (yyyy)	2015
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2016
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	10 months
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	9/30/2015
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	10/7/2015

16.	Is this a brand new trustee?	Y
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Vacant
2.	First Name	N/A
3.	Last Name	N/A
4.	Institutional Affiliation	N/A
5.	Professional Title	N/A
6.	Mailing Address	N/A
7.	City	N/A
8.	Zip Code (enter five digits only)	N/A
9.	Term Begins - Month	N/A
10.	Term Begins - Year (yyyy)	N/A
11.	Term Expires - Month or N/A	N/A
12.	Term Expires - Year (YYYY) or N/A	N/A
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	N/A
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	N/A
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Mr.
2.	First Name	Anthony
3.	Last Name	Gaddy
4.	Institutional Affiliation	Schenectady County Public Library
5.	Professional Title	Trustee
6.	Mailing Address	2044 State St., Apt C
7.	City	Schenectady
8.	Zip Code (enter five digits only)	12304
9.	Term Begins - Month	June
10.	Term Begins - Year (yyyy)	2014
11.	Term Expires - Month or N/A	June
12.	Term Expires - Year (YYYY) or N/A	2019
13.	What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	5 years
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	7/21/2014
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	7/24/2014
16.	Is this a brand new trustee?	N
1.	Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Mr.
2.	First Name	Keith
3.	Last Name	Seeber



- |     |  |                         |
|-----|--|-------------------------|
| 4.  | Institutional Affiliation  | Fort Plain Free Library |
| 5.  | Professional Title   | President               |
| 6.  | Mailing Address  | 6930 St. Hwy. 5S        |
| 7.  | City   | Fort Plain              |
| 8.  | Zip Code (enter five digits only)  | 13339                   |
| 9.  | Term Begins - Month  | March                   |
| 10. | Term Begins - Year (yyyy)  | 2014                    |
| 11. | Term Expires - Month or N/A  | June                    |
| 12. | Term Expires - Year (YYYY) or N/A  | 2016                    |
| 13. | What is the length of this trustee's term? Please add a State Note if this trustee's term is not a full term (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). | 2 years 3 months        |
| 14. | The date the trustee took the Oath of Office (mm/dd/yyyy)  | 3/24/2014               |
| 15. | The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)   | 3/31/2014               |
| 16. | Is this a brand new trustee?   | N                       |

**COORDINATED OUTREACH COUNCIL**

- |      |   |   |
|------|---|---|
| 3.45 | Has the Coordinated Outreach Council met at least two times during the calendar year per CR 90.3 (j)(2)(iv)? (Enter Y for Yes, N for No). | Y |
|------|---|---|

Coordinated Outreach Council Members - complete one record for each Council Member for the period January 1, 2016, through 2-5 of the repeating group. The number of council members must be 5 to 11 (no less than five and no more than 11).

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.**

- |    |   |                              |
|----|---|------------------------------|
| 1. | Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Mr.                          |
| 2. | First Name  | Barry                        |
| 3. | Last Name   | Finley                       |
| 4. | Institutional Affiliation   | N/A                          |
| 5. | Professional Title  | N/A                          |
| 1. | Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Ms.                          |
| 2. | First Name  | Lois                         |
| 3. | Last Name   | Gordon                       |
| 4. | Institutional Affiliation   | Mohaek Valley Library system |
| 5. | Professional Title  | Outreach Coordinator         |
| 1. | Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Ms.                          |
| 2. | First Name  | Marion                       |
| 3. | Last Name   | Grimes                       |
| 4. | Institutional Affiliation   | N/A                          |
| 5. | Professional Title  | N/A                          |
| 1. | Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant | Ms.                          |
| 2. | First Name  | Linda                        |
| 3. | Last Name   | Burns                        |

4.	Institutional Affiliation	CASA at Centro Civico
5.	Professional Title	Manager
1.	Title (drop down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), Vacant	Ms.
2.	First Name	Sarah
3.	Last Name	Beekman
4.	Institutional Affiliation	N/A
5.	Professional Title	N/A

#### 4. Public Library System Transactions and Collections

4.1	Number of registered system borrowers	260
4.2	Total system circulation	1,264
4.3	System Visits	1,621

#### GENERAL SYSTEM HOLDINGS

4.4	Total Cataloged Book Holdings	43,417
4.5	Uncataloged Book Holdings	0
4.6	Total Print Serial Holdings	26
4.7	All Other Print Materials Holdings	94
4.8	Total Number of NOVELNY Databases	10
4.9	Total Electronic Holdings	8,653
4.10	Other Non-Electronic Materials	5,030
4.11	<b>Grand Total Holdings (total questions 4.4 through 4.10)</b>	57,230

#### ROTATING COLLECTIONS/BOOK LOANS

4.12	Does the system have rotating collections/bulk loans? (Enter Y for Yes, N for No)	Y
4.13	Number of collections	241
4.14	Average number of items per collection	36

#### 5. System Services

##### TECHNOLOGY AND RESOURCE SHARING

##### INTEGRATED LIBRARY SYSTEM (ILS)

5.1	Does the system provide an integrated library automation system (ILS) for its member libraries? (Enter Y for Yes, N for No)	Y
5.2	Indicate which modules of the system's ILS have been implemented (check all that apply):	
a.	Circulation	Yes
b.	Public Access Catalog	Yes
c.	Cataloging	Yes
d.	Acquisitions	Yes
e.	Inventory	Yes
f.	Serials Control	Yes
g.	Media Booking	No
h.	Community Information	No
i.	Electronic Resource Management	No
j.	Digital Collections Management	No
5.3	Identify ILS system vendor	III Polaris

5.4	How many member libraries fully participate in the ILS?	2
5.5	% of member libraries participating (calculated field)	14.29%
5.6	How many member libraries participate in some ILS modules?	12
5.7	Indicate features of the system's ILS (check all that apply):	
a.	ILS shared with other library systems	Yes
b.	ILS software permits patron-initiated ILL	Yes
c.	ILL feature implemented and used	Yes
5.8	Number of titles in the ILS bibliographic database	673,731
5.9	Number of new titles added by the system in the reporting year	1,000
5.10	Number of Central Library Aid titles added in the reporting year	3,219
5.11	Number of new titles added by the members in the reporting year	14,741
5.12	Total new titles (total questions 5.9 through 5.11)	18,960

### UNION CATALOG OF RESOURCES

5.13	How many libraries participate in (or submit records for) the union catalog?	14
5.14	Is the system's union catalog shared with any other library system(s)? (Enter Y for Yes, N for No)	Y
5.15	Number of titles in the system's union catalog	671,773
5.16	Number of holdings in the system's union catalog	704,567
5.17	Number of new titles added in the last year	17,033
5.18	Number of holdings added in the last year	47,649

### UNION LIST OF SERIALS

5.19	Does the system have a union list of serials? (Enter Y for Yes, N for No. If No, enter zero (0) on question 5.20.)	Y
5.20	How many libraries participate in (or submit records for) the union list of serials?	12

### COMBINED SYSTEM UNION CATALOG AND UNION LIST OF SERIALS

5.21	Does the system's union catalog contain both books and serials? (Enter Y for Yes, N for No, or N/A)	Y
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### VIRTUAL CATALOG

5.22	Does the system provide a virtual catalog for member libraries? (Enter Y for Yes, No for No, or N/A)	N
5.23	How many Internet-accessible member library catalogs are included in the virtual catalog?	0
5.24	How many member libraries have holdings included in a database that serves as a link of the virtual catalog?	0
5.25	Indicate the features of the system's virtual catalog (check all that apply):	
a.	Non-member catalogs are included (if checked, please name non-member catalogs using the State note)	No
b.	Non-library catalogs are included (if checked, please name non-library catalogs using the State note)	No
c.	Patron-initiated ILL available and used through this catalog	No
d.	N/A	No

5.26 Does the library system provide access to member library catalogs which are not Internet accessible through the virtual catalog? (Enter Y for Yes, N for No) If yes, please describe using the State note. N

**VISITS TO THE SYSTEM'S WEB SITE**

5.27 Annual number of visits to the system's web site 57,696

**STATEWIDE INTERNET LIBRARIES (FORMERLY NOVEL NY- READY LIBRARIES)**

5.28 How many of the system's member libraries have achieved Basic Statewide Internet Library-ready status? 0

5.29 How many of the system's member libraries have achieved Advanced Statewide Internet Library-ready status? 14

5.30 How many of the system's member libraries have achieved Leader Statewide Internet Library-ready status? 0

5.31 **Total Statewide Internet Library-Ready Libraries (total questions 5.28 through 5.30)** 14

**SYSTEM INTERLIBRARY LOAN ACTIVITY**

5.32 Total items provided (loaned) 1,407

5.33 Total items received (borrowed) 606

5.34 Total requests provided (loaned) unfilled 0

5.35 Total requests received (borrowed) unfilled 0

5.36 **Total interlibrary loan activity (total questions 5.32 through 5.35)** 2,013

**DELIVERY**

5.38 Indicate delivery methods used by the system (check all that apply):

**Note: For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl**

- a. System courier (on the System's payroll) No
- b. Other system's courier No
- d. Contracted service (paid by System - not on payroll) Yes
- e. U.S. Mail Yes
- f. Commercial carrier (e.g., UPS, DHL, etc.) No
- g. Other (specify using the State note) No

5.39 Number of stops (pick-up and delivery sites per week) 116

**CONTINUING EDUCATION/STAFF DEVELOPMENT Workshops/Meetings/Training Sessions**

**Resource sharing (ILL, collection development, etc.)**

5.40 Number of sessions 1

5.41 Number of participants 16

**Technology**

5.42 Number of sessions 5

5.43 Number of participants 53

**Digitization**

5.44 Number of sessions 1

5.45 Number of participants 12

**Leadership**

5.46 Number of sessions 2

5.47 Number of participants 23

**Management & Supervisory**

5.48	Number of sessions	0
5.49	Number of participants	0

**Planning and Evaluation**

5.50	Number of sessions	8
5.51	Number of participants	79

**Awareness and Advocacy**

5.52	Number of sessions	3
5.53	Number of participants	62

**Trustee/Council Training**

5.54	Number of sessions	3
5.55	Number of participants	75

**Special Client Populations**

5.56	Number of sessions	1
5.57	Number of participants	14

**Children's Services/Birth to Kindergarten**

5.58	Number of sessions	1
5.59	Number of participants	48

**Children's Services/Elementary Grade Levels**

5.60	Number of sessions	1
5.61	Number of participants	63

**Young Adult Services/Middle and High School Grade Levels**

5.62	Number of sessions	1
5.63	Number of participants	27

**General Adult Services**

5.64	Number of sessions	0
5.65	Number of participants	0

5.66 **Other:** Does the system provide other Workshops/Meetings/Training Sessions not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic; if No, enter N/A for questions 1, 2 and 3 of one repeating group. N

1.	Topic	N/A
2.	Number of sessions	N/A
3.	Number of participants	N/A

5.67 **Grand Total Sessions** (total questions 5.40, 5.42, 5.44, 5.46, 5.48, 5.50, 5.52, 5.54, 5.56, 5.58, 5.60, 5.62, 5.64 and total of question #2 of Repeating Group #5) 27

5.68 **Grand Total Participants** (total questions 5.41, 5.43, 5.45, 5.47, 5.49, 5.51, 5.53, 5.55, 5.57, 5.59, 5.61, 5.63, 5.65 and total of question #3 of Repeating Group #5) 472

**COORDINATED SERVICES**

5.69 Indicate which services the system provides (check all that apply):

**Note:** For questions which include a choice of "Other", please add a State Note of explanation when "Other" is chosen. Also pl

a.	Coordinated purchase of print materials	Yes
b.	Coordinated purchase of non-print materials	Yes
c.	Negotiated pricing for licensed electronic collection purchases (not purchasing)	Yes
d.	Cataloging	Yes

e.	Materials processing	Yes
f.	Coordinated purchase of office supplies	Yes
g.	Coordinated computer services/purchases	Yes
h.	Virtual reference	No
i.	Other (describe using the State note)	No
j.	N/A	No

### CONSULTING AND TECHNICAL ASSISTANCE SERVICES

5.70	Number of contacts - Consulting with member libraries on grants, and state and federal funding	585
5.71	Number of contacts - Consulting with member libraries on funding and governance	590
5.72	Number of contacts - Consulting with member libraries on charter and registration work	13
5.73	Number of contacts - Consulting with member libraries on automation and technology	3,010
5.74	Number of contacts - Consulting with member libraries on youth services	19,801
5.75	Number of contacts - Consulting with member libraries on adult services	692
5.76	Number of contacts - Consulting with member libraries on physical plant needs	517
5.77	Number of contacts - Consulting with member libraries on personnel and management issues	306
5.78	Number of contacts - Consulting with state and county correctional facilities	92
5.79	Number of contacts - Providing information to local, county, and state legislators and their staffs	89
5.80	Number of contacts - Providing system and member library information to the media	25
5.81	Number of contacts - Providing website development and maintenance for member libraries	118
5.82	Does the system provide other Consulting and Technical Assistance Services not listed above? Enter Y for Yes, N for No. If Yes, complete one record for each topic. If No, enter N/A for questions 1 and 2 of one repeating group.	Y
1.	Topic	Outreach
2.	Number of contacts (all types)	63
1.	Topic	ILL
2.	Number of contacts (all types)	1,110
5.83	<b>Total other contacts</b> (total of question #2 of Repeating Group #6)	1,173
5.84	<b>Total number of contacts</b> (total of questions 5.70 through 5.81 and 5.83)	27,011

### REFERENCE SERVICES

5.85	Total Reference Transactions	145
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### SERVICES TO SPECIAL CLIENTS (Direct and Contractual)

5.86 Indicate services the system provides to special clients (check all that apply):

a.	Services for patrons with disabilities	Yes
b.	Services for patrons who are educationally disadvantaged	Yes

c.	Services for patrons who are aged	Yes
d.	Services for patrons who are geographically isolated	Yes
e.	Services for patrons who are members of ethnic or minority groups in need of special library services	No
f.	Services to patrons who are in institutions	Yes
g.	Services for unemployed and underemployed individuals	No
i.	N/A	No
5.87	Number of BOOKS BY MAIL loans	0
5.88	Number of member libraries with Job/Education Information Centers or collections	5
5.89	Number of State Correctional Facilities libraries served	1
5.90	Number of County Jails libraries served	3
5.91	Number of institutions served other than jails or correctional facilities	3
5.92	Does the system provide other special client services not listed above? If yes, complete one record for each service provided. If no, enter N/A in questions 1 and 2 of one repeating group.	Y
1.	Service provided	Lip reading software
2.	Number of facilities/institutions served	21
5.93	Does the system charge fees for any program or service? Enter Y for Yes; N for No. If yes, briefly describe using the text box below; if no, enter N/A in Question 5.92.	Y
5.94	Description of fees	A small fee is charged for occasional CE programs

## 6. Operating Funds Receipts

### LOCAL PUBLIC FUNDS

6.1	Does the system receive county funding? Enter Y for Yes, N for No. If yes, please complete one record for each county. If No, enter N/A on questions 1 through 4 of one repeating group.	N
1.	County Name	N/A
2.	Amount	N/A
3.	Subject to Public Vote (Enter Y for Yes, N for No, or N/A)	N/A
4.	Written Contract (Enter Y for Yes, N for No, or N/A)	N/A
6.2	<b>Total County Funding</b>	\$0
6.3	All Other Local Public Funds	\$0
6.4	<b>Total Local Public Funds</b> (total questions 6.2 and 6.3)	\$0

### STATE AID RECEIPTS

6.5	Adult Literacy Library Services Grants	\$424
6.6	Central Library Development Aid	\$94,184
6.7	Central Book Aid	\$64,133
6.8	Conservation/Preservation Grants	\$0
6.9	Construction for Public Libraries Aid	\$0
6.10	Coordinated Outreach Services Aid	\$72,762
6.11	Correctional Facilities Library Aid	\$6,024
6.12	County Jails Library Aid	\$3,798
6.14	Family Literacy Grants	\$8,028
	Local Library Services Aid	



6.18	Kept at System Headquarters	\$0
6.19	Distributed to members	\$75,315
6.20	<b>Total LLSA (total questions 6.18 and 6.19)</b>	\$75,315
6.21	Local Services Support Aid	\$61,814
6.22	Local Consolidated Systems Aid	\$0
6.26	Public Library System Basic Aid	\$688,313

Regional Bibliographic Data Bases (RBDB) Aid

6.31	Regional Bibliographic Data Bases (RBDB) Grant(s) from 3Rs	\$0
6.35	Special Legislative Grants and Member Items	\$72,500
6.36	Supplementary System Aid	\$110,257
6.37	The New York Public Library - The Research Libraries	\$0
6.38	The New York Public Library, Andrew Heiskell Library for the Blind and Physically Handicapped Aid	\$0
6.39	The New York Public Library, City University of New York	\$0
6.40	The New York Public Library, Schomburg Center for Research in Black Culture Library Aid	\$0
6.41	The New York Public Library, Science, Industry and Business Library	\$0
6.42	Does the system receive state funding from other sources? Enter Y for Yes, N for No. (Report Special Legislative Grants and Member Items on Q 6.35).	Y

Complete one record for each grant. If the system does not receive other state aid, enter N/A on questions 1 and 2 of one repeating group.

1.	Funding Source	NYSCA
2.	Amount	\$5,000
6.43	<b>Total Other State Aid (total question #2 of Repeating Group #9 above)</b>	\$5,000
6.44	<b>Total State Aid Receipts (total questions 6.5 through 6.14, question 6.17, questions 6.20 through 6.22, questions 6.25 through 6.27, questions 6.30 through 6.41, and question 6.43)</b>	\$1,262,552

**FEDERAL AID**

6.45	Library Services and Technology Act (LSTA)	\$0
6.46	Does the system receive any other Federal Aid (specify Act and Title) e.g., NEH, NEA, etc.? Enter Y for Yes, N for No.	N

Complete one record for each grant. If the system does not receive other federal aid, enter N/A on questions 1 and 2 of one repeating group.

1.	Funding Source	N/A
2.	Amount	\$0
6.47	<b>Total Other Federal Aid (total questions #2 of Repeating Group #10 above)</b>	\$0
6.48	<b>Total Federal Aid (total questions 6.45 and 6.47)</b>	\$0

**CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE**

6.49	Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No.	N
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Complete one record for each contract. If the system does not contract, enter N/A on questions 1, 2 and 3 of one repeating group.

1.	Contracting Agency	N/A
2.	Contracted Service	N/A
3.	Total Contract Amount	\$0



6.50 **Total Contracts** (total question #3 of Repeating Group #11 above) \$0

**MISCELLANEOUS RECEIPTS**

6.51 Gifts, Endowments, Fundraising, Foundations (include Gates Grants here; specify project number(s) and dollar amount using the state note) \$8,883

6.53 Income from Investments \$3,229  
Proceeds from Sale of Property

6.54 Real Property \$0

6.55 Equipment \$0

6.56 Does the system have other miscellaneous receipts in categories not listed in questions 6.51 through 6.55? Enter Y for Yes, N for No. Y

Complete one record for each income category. If the system does not have other miscellaneous receipts, enter N/A on question:

- 1. Receipt category Annual Dinner
- 2. Amount \$736
- 1. Receipt category Computer Equipment Reimbursable
- 2. Amount \$71,920
- 1. Receipt category Electronic Materials Reimbursable
- 2. Amount \$59,624
- 1. Receipt category Member Fees (ILS-JA) Reimbursable
- 2. Amount \$215,163
- 1. Receipt category Miscellaneous - Other Income
- 2. Amount \$860
- 1. Receipt category Programs / Workshops Reimbursable
- 2. Amount \$1,761
- 1. Receipt category Materials Reimbursable
- 2. Amount \$2,950
- 1. Receipt category Office & Libraries Supplies Reimbursable
- 2. Amount \$644

6.57 **Total Other Miscellaneous Receipts** (total question #2 of Repeating Group #12 above) \$353,658

6.58 **Total Miscellaneous Receipts** (total questions 6.51 through 6.55 and question 6.57) \$365,770

6.59 **TOTAL OPERATING FUND RECEIPTS - Total Local Public Funds, Total State Aid, Total Federal Aid, Total Contracts, and Total Miscellaneous Receipts** (total questions 6.4, 6.44, 6.48, 6.50, and 6.58) \$1,628,322

6.60 **BUDGET LOANS** \$0

**TRANSFERS**

6.61 From Capital Fund (Same as question 9.6) \$0

6.62 From Other Funds \$0

6.63 **Total Transfers** (total questions 6.61 and 6.62) \$0

6.64 CASH BALANCE - Beginning of Current Fiscal Reporting Year:  
Public Library Systems - January 1, 2015; 3Rs - July 1, 2015. (Same as closing cash balance at the end of previous fiscal reporting year: Public Library Systems - December 31, 2014; 3Rs - June 30, 2015.) \$735,277

6.67	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS, AND BALANCE/ROLLOVER (Public Library Systems and 3Rs - total questions 6.59, 6.60, 6.63 and 6.64 - must agree with question 7.83) (School Library Systems - total questions 6.59, 6.65 and 6.66 - must agree with question 7.83)	\$2,363,599
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## 7. Operating Fund Disbursements

### STAFF EXPENDITURES

#### Salaries

7.1	System Director and Librarians	\$310,819
7.2	Other Staff	\$89,808
7.3	<b>Total Salary and Wages Expenditures</b> (total questions 7.1 and 7.2)	\$400,627
7.4	Employee Benefits Expenditures	\$144,564
7.5	<b>Total Staff Expenditures</b> (total questions 7.3 and 7.4)	\$545,191

### COLLECTION EXPENDITURES

7.6	Print Materials Expenditures	\$64,010
7.7	Electronic Materials Expenditures	\$61,749
7.8	Other Materials Expenditures	\$2,426
7.9	<b>Total Collection Expenditures</b> (total questions 7.6 through 7.8)	\$128,185

### GRANTS TO MEMBER LIBRARIES

#### Cash Grants Paid From

7.10	Local Library Services Aid (LLSA)	\$75,315
7.11	Central Library Aid (CLDA/CBA)	\$89,010
7.15	Other State Aid/Grants (e.g., Construction, Special Legislative or Member Grants)	\$79,797
7.16	Federal Aid	\$0
7.17	Other cash grants paid from system funds	\$6,125
7.18	<b>Total Cash Grants</b> (total questions 7.10 through 7.17)	\$250,247
7.19	Book/Library Materials Grants	\$5,871
7.20	Other Non-Cash Grants	\$0
7.21	<b>Total Grants to Member Libraries</b> (total questions 7.18 through 7.20)	\$256,118

### CAPITAL EXPENDITURES FROM OPERATING FUNDS

7.22	Bookmobile	\$0
7.23	Other Vehicles	\$0
7.24	Computer Equipment	\$2,532
7.25	Furniture/Furnishings	\$0
7.26	Other Capital Expenditures	\$318
7.27	<b>Total Capital Expenditures from Operating Fund</b> (total questions 7.22 through 7.26)	\$2,850

### TOTAL CAPITAL EXPENDITURES BY SOURCE OF FUNDS

7.28	From Local Public Funds (71PF)	\$0
7.29	From Other Funds (71OF)	\$2,850
7.30	<b>Total Capital Expenditures by Source</b> (total questions 7.28 and 7.29; same as question 7.27)	\$2,850

### OPERATION AND MAINTENANCE OF BUILDINGS

Repairs To Buildings and Building Equipment by Source of Funds

7.31	From Local Public Funds (72PF)	\$0
7.32	From Other Funds (72OF)	\$7,238
7.33	<b>Total Repairs to Buildings and Building Equipment</b> (total questions 7.31 and 7.32)	\$7,238
7.34	Other Building & Maintenance Expenses	\$19,905
7.35	<b>Total Operation and Maintenance of Buildings</b> (total questions 7.33 and 7.34)	\$27,143

**MISCELLANEOUS EXPENSES**

7.36	Total Operation & Maintenance of Bookmobiles and Other Vehicles	\$725
7.37	Office and Library Supplies	\$7,026
7.38	Telecommunications	\$2,370
7.39	Binding Expenses	\$0
7.40	Postage and Freight	\$619
7.41	Publicity and Printing	\$0
7.42	Travel	\$6,403
7.43	Fees for Consultants and Professionals - Please include a State Note with the consultants' or vendors' names and a brief description of the service(s) provided.	\$21,659
7.44	Membership Dues - Please include a State Note listing Professional Organization Memberships for which dues are being paid	\$4,645
7.46	Does the system have other miscellaneous expenses in categories not listed in questions 7.36 through 7.45? Enter Y for Yes, N for No.	Y

Complete one record for each expense category. If the system does not have other miscellaneous expenses, enter N/A on quest

1.	Expense category	Annual Meeti
2.	Amount	\$2,281
1.	Expense category	Automation C
2.	Amount	\$68,620
1.	Expense category	Delivery Fee
2.	Amount	\$118,571
1.	Expense category	JA Equipment
2.	Amount	\$147,354
1.	Expense category	ILS (JA) Fee
2.	Amount	\$226,632
1.	Expense category	Member Libra
2.	Amount	\$1,059
1.	Expense category	Programs
2.	Amount	\$73
1.	Expense category	Rental, Main
2.	Amount	\$4,592
1.	Expense category	Software - C
2.	Amount	\$532

7.47	<b>Total Other Miscellaneous Expenses</b> (total question #2 of Repeating Group #13)	\$569,714
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**Total Miscellaneous Expenses**

7.48 (total questions 7.36 through 7.45 and 7.47) \$613,161

**CONTRACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN NEW YORK STATE**

7.49 Does the system contract with libraries and/or library systems in New York State? Enter Y for Yes, N for No. N

Complete one record for each contract. If the system does not contract, enter N/A on questions 1, 2, and 3 of one repeating group

- 1. Contracting Agency (specify using the State note) N/A
- 2. Contracted Service (specify using the State note) N/A
- 3. Total Contract Amount \$0

7.50 **Total Contracts** (total question #3 of Repeating Group #14 above) \$0

**DEBT SERVICE**

Capital Purposes Loans (Principal and Interest)

7.51 From Local Public Funds (73PF) \$0

7.52 From Other Funds (73OF) \$0

7.53 **Total Capital Purposes Loans** (total questions 7.51 and 7.52) \$0

7.54 Other Loans \$0

7.55 **Total Debt Service** (total questions 7.53 and 7.54) \$0

7.56 **TOTAL TOTAL DISBURSEMENTS - Total Staff Expenditures, Total Collection Expenditures, Total Grants to Member Libraries, Total Capital Expenditures, Total Operation and Maintenance of Buildings, Total Miscellaneous Expenses, Total Contracts, and Total Debt Service** (total questions 7.5, 7.9, 7.21, 7.27, 7.35, 7.48, 7.50, and 7.55) \$1,572,648

**TRANSFERS**

Transfers to the Capital Fund

7.57 From Local Public Funds (76PF) \$0

7.58 From Other Funds (76OF) \$0

7.59 **Total Transfers to Capital Fund** (total questions 7.57 and 7.58; same as question 8.2) \$0

7.60 **Total Transfers to Other Funds** \$0

7.61 **Total Transfers** (total questions 7.59 and 7.60) \$0

7.62 **TOTAL DISBURSEMENTS AND TRANSFERS** (total questions 7.56 and 7.61) \$1,572,648

7.63 **CLOSING CASH BALANCE at the End of the Current Fiscal Reporting Year** (For Public Library Systems - December 31, 2015) (For 3Rs - June 30, 2016) \$790,951

7.83 **GRAND TOTAL DISBURSEMENTS, TRANSFERS, & BALANCE/ROLLOVER** (total questions 7.62, 7.63, 7.73, and 7.82) \$2,363,599

**FISCAL AUDIT**

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

7.84 Last audit performed (mm/dd/yyyy) 10/15/2015

7.85 Time period covered by this audit (mm/dd/yyyy - mm/dd/yyyy) 01/01/2014-12/31/2014

7.86 Indicate type of audit (select one from drop-down): Private Accounting Firm

### ACCOUNT INFORMATION

Complete one record for each financial account

1. Name of bank or financial institution NBT Bank  
2. Amount of funds on deposit \$790,933

7.87 **Total Bank Balance** (total question #2 of Repeating Group #15) \$790,933

7.88 Does the system have a Capital Fund? Enter Y for Yes, N for No. If yes, please complete the Capital Fund Report. If no, stop here. N

## 8. Capital Fund Receipts

8.1 **Total Revenue From Local Sources** \$0

8.2 **Transfer From Operating Fund** \$0  
(same as question 7.59)

### STATE AID FOR CAPITAL PROJECTS

8.3 State Aid Received for Construction \$0

### ALL OTHER AID AND/OR GRANTS FOR CAPITAL PROJECTS

8.4 Does the system receive any other aid and/or grants for capital projects. Enter Y for Yes, N for No. If yes, complete one record for each award. If no, enter N/A on questions 1 and 2 of one repeating group. N

1. Contracting Agency N/A

2. Amount N/A

8.5 **Total Aid and/or Grants** (total question #2 of Repeating Group #16 above) \$0

8.6 **TOTAL RECEIPTS - Revenues from Local Sources, Interfund Revenue, State Aid for Capital Projects, and Total Federal Aid** (total questions 8.1, 8.2, 8.3, and 8.5) \$0

8.7 **NONREVENUE RECEIPTS** \$0

8.8 **TOTAL RECEIPTS - Total Receipts and Nonrevenue Receipts** (total questions 8.6 and 8.7) \$0

8.9 CASH BALANCE - Beginning of Current Fiscal Reporting Year: Public Library Systems - January 1, 2015; 3Rs - July 1, 2015. (Same as closing cash balance at the end of previous fiscal reporting year: Public Library Systems - December 31, 2014; 3Rs - June 30, 2015) \$0

8.10 **TOTAL RECEIPTS AND CASH BALANCE** (total questions 8.8 and 8.9) \$0

## 9. Capital Fund Disbursements

### PROJECT EXPENDITURES

9.1 Total Construction \$0

9.2 Incidental Construction \$0

9.3 Books and Library Materials \$0

9.4 Total Other Disbursements \$0

9.5 **Total Project Expenditures** (total questions 9.1 through 9.4) \$0

9.6	<b>TRANSFER TO OPERATING FUND</b> (Same as question 6.61)	\$0
9.7	<b>TOTAL NONPROJECT EXPENDITURES</b>	\$0
9.8	<b>TOTAL DISBURSEMENTS - Total Project Expenditures, Transfer to Operating Fund, and Total Nonproject Expenditures</b> (total questions 9.5 through 9.7)	\$0
9.9	<b>CLOSING CASH BALANCE IN CAPITAL FUND at the End of the Current Fiscal Year (December 31, 2015, for Public Library Systems; June 30, 2016, for 3Rs)</b>	\$0
9.10	<b>TOTAL DISBURSEMENTS AND CASH BALANCE</b> (total questions 9.8 and 9.9)	\$0

## 12. Projected Annual Budget For Library Systems

### Public Library Systems Budget for January 1, 2016 - December 31, 2016

#### PROJECTED OPERATING FUND - RECEIPTS

12.1	Total Operating Fund Receipts (include Local Aid, State Aid, Federal Aid, Contracts and Miscellaneous Receipts)	\$1,574,100
12.2	Budget Loans	\$0
12.3	Total Transfers	\$0
12.4	Cash Balance/Rollover in Operating Fund at the end of the previous fiscal year (For Public Library Systems, opening balance on January 1, 2016, must be the same as the December 31, 2015, closing balance reported on Q7.63 of the 2015 annual report)	\$790,951
12.5	<b>Grand Total Operating Fund Receipts, Budget Loans, Transfers and Balance/Rollover</b> (total questions 12.1 through 12.4)	\$2,365,051

#### PROJECTED OPERATING FUND - DISBURSEMENTS

12.6	Total Operating Fund Disbursements (include Staff Expenditures, Collection Expenditures, Grants to Member Libraries, Capital Expenditures from Operating Funds, Operation and Maintenance of Buildings, Miscellaneous Expenses, Contracts with Libraries and Library Systems in New York State and Debt Service)	\$1,541,719
12.7	Total Transfers	\$0
12.8	Cash Balance/Rollover in Operating Fund at the end of the fiscal year (For Public Library Systems, balance as of December 31, 2016)	\$823,332
12.9	<b>Grand Total Operating Fund Disbursements, Transfers and Balance/Rollover</b> (total questions 12.6 through 12.8)	\$2,365,051

#### PROJECTED CAPITAL FUND - RECEIPTS

12.10	Capital Fund Receipts (include Revenues from Local Sources, Transfer from Operating Fund, State Aid for Capital Projects and All Other Aid for Capital Projects)	\$0
12.11	Nonrevenue Receipts	\$0

- 12.12 Cash Balance in Capital Fund at the end of the previous fiscal year  
(For Public Library Systems, opening balance on January 1, 2016, must be the same as the December 31, 2015, closing balance reported on Q9.9 of the 2015 annual report) \$0
- 12.13 Grand Total Capital Fund Receipts and Balance (total questions 12.10 through 12.12) \$0

**PROJECTED CAPITAL FUND - DISBURSEMENTS**

- 12.14 Capital Fund Disbursements (include Project Expenditures, Transfer to Operating Fund and Nonproject Expenditures) \$0
- 12.15 Cash Balance in Capital Fund at the end of the current fiscal year  
(For Public Library Systems, December 31, 2016) \$0
- 12.16 Grand Total Capital Fund Disbursement, Transfers, and Balance (Sum of questions 12.14 and 12.15) \$0

**13. State Formula Aid Disbursements**

**Public Library Systems Basic Aid**

**PUBLIC LIBRARY SYSTEMS BASIC AID, SUPPLEMENTAL AID and either LOCAL LIBRARY SERVICES AID : (Brooklyn, New York Public and Queens Borough only)**

**Statutory** Education Law  
**Reference** § 272,  
**(Basic Aid):** 273(1)(a, c, d, e, n)  
 Commissioners  
 Regulations  
 90.3

**Statutory** Education Law  
**Reference** § 272, 273(5)  
**(LLSA):** Commissioners  
 Regulations  
 90.3 and 90.9  
 The formula is  
 \$0.31 per  
 capita of a  
 member  
 library's  
 chartered  
 services area  
 with a  
 minimum of  
 \$1,500 per  
 library with  
 formula equity  
 to 1991 LLIA.

Education Law

**Statutory**

**Reference** § 272,

**(LSSA):** 273(1)(f)(6)  
Commissioners  
Regulations  
90.3 and 90.10  
The formula is  
\$0.31 per  
capita for  
system  
population  
living outside  
the chartered  
service areas  
of member  
libraries plus  
2/3 members  
LLSA.

**Statutory** Education Law

**Reference** § 272,

**(LCSA):** 273(1)(f)(7)  
Commissioners  
Regulations  
90.3/td>

13.1.1-13.1.2 **Professional Salaries:** Indicate total FTE and salaries for all professional system employees.

13.1.1	Total Full-Time Equivalents (FTE)	3
13.1.2	Total Expenditure for Professional Salaries	\$240,979

13.1.3-13.1.4 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees.

13.1.3	Total Full-Time Equivalents (FTE)	2.1
13.1.4	Total Expenditure for Other Staff Salaries	\$87,830

13.1.5	<b>Employees Benefits:</b> Indicate the total expenditures for all system employee fringe benefits.	\$143,620
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13.1.6	<b>Purchased Services:</b> Did the system expend funds for purchased services? Enter Y for Yes, N for No.	Y
--------	--	---

**Note:** For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1.	Expenditure Category	Library systems vendor contract for automation (e.g, integrated library system catalog) MVLS/SALS JA
----	-------------------------	---



2.	Provider of Services	
3.	Expenditure	\$68,620
1.	Expenditure Category	Building and maintenance expenses
2.	Provider of Services	Various
3.	Expenditure	\$27,868
1.	Expenditure Category	Delivery/courier
2.	Provider of Services	ALDS
3.	Expenditure	\$118,571
1.	Expenditure Category	Consultant fees/professional fees
2.	Provider of Services	ADP Payroll
3.	Expenditure	\$2,055
1.	Expenditure Category	Consultant fees/professional fees
2.	Provider of Services	TM Byxbee
3.	Expenditure	\$3,750
1.	Expenditure Category	Consultant fees/professional fees
2.	Provider of Services	Whiteman Osterman & Hanna
3.	Expenditure	\$2,500
1.	Expenditure Category	Consultant fees/professional fees
2.	Provider of Services	McCary & Huff
3.	Expenditure	\$1,711
1.	Expenditure Category	Telecommunications
2.	Provider of Services	Time Warner
3.	Expenditure	\$2,370
1.	Expenditure Category	Institutional membership dues
2.	Provider of Services	Various
3.	Expenditure	\$4,645
1.	Expenditure Category	Other (specify using the State note)
2.	Provider of Services	River Stone Manor
3.	Expenditure	\$2,281
1.	Expenditure Category	Consultant fees/professional fees

2.	Provider of Services	D2 Media
3.	Expenditure	\$2,000
1.	Expenditure Category	Other (specify using the State note)
2.	Provider of Services	EOS Office Technologies
3.	Expenditure	\$4,592

13.1.7 **Total Expenditure - Purchased Services** \$240,963

13.1.8 **Supplies and Materials:** Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.**

If yes, complete one record for each applicable category; if no, enter N/A for questions 1 and 2 of one repeating group.

1.	Expenditure Category	Office/library supplies and postage
2.	Expenditure	\$8,703

1.	Expenditure Category	Books and other print materials
2.	Expenditure	\$16,280

13.1.9 **Total Expenditure - Supplies and Materials** \$24,983

13.1.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No. Y

If yes, complete one record for each applicable category; if no enter N/A for questions 1 and 2 of one repeating group.

1.	Type of Travel	System Staff Travel
2.	Expenditure	\$6,317

13.1.11 **Total Expenditures - Travel** \$6,317

13.1.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 Y or more and having a useful life of more than one year. Enter Y for Yes, N for No.

If yes, complete one record for each applicable category; if no enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1.	Type of Item	Computer Equip
2.	Quantity	3
3.	Unit Cost	\$983
4.	Expenditure	\$2,949

13.1.13 **Total Expenditure - Equipment and Furnishings** \$2,949

13.1.14 **Local Library Services Aid Expenditures:** Indicate the total expenditures to member libraries for Local Library Services Aid. \$75,315

13.1.15 **Grants to Member Libraries:** Did the system expend funds for grants to member libraries? Y Enter Y for Yes, N for no.

If yes, complete one record for each grant; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

1.	Recipient	Gloversville Public Library
2.	Allocation	\$399
3.	Project Description (no more than 300 words)	Travel & CE Grant

1.	Recipient	Gloversville Public Library
2.	Allocation	\$500
3.	Project Description (no more than 300 words)	Annual Trustees Award

1.	Recipient	The Community Library
2.	Allocation	\$200
3.	Project Description (no more than 300 words)	Annual Library Services Award

1.	Recipient	All Member Libraries
2.	Allocation	\$5,026
3.	Project Description (no more than 300 words)	This amount was shared among the member libraries for wireless access and
13.1.16	<b>Total Expenditures - Grants for Member Libraries</b>	\$6,125
13.1.17	<b>Total Expenditure (total 13.1.2, 13.1.4, 13.1.5, 13.1.7, 13.1.9, 13.1.11, 13.1.13, 13.1.14, and 13.1.16)</b>	\$829,081
13.1.18	<b>Cash Balance at the Opening of the Fiscal Year</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	\$0
13.1.19	<b>Total Allocation from 2015 - 2016 State Aid:</b>	\$935,699
13.1.20	<b>Cash Balance at the End of the Current Fiscal Year</b>	\$106,618
13.1.21	<b>Final Narrative:</b> Provide a brief narrative, no more than fifteen hundred (1500) words, describing the major activities carried out with these State Aid Funds.	Basic aid allows MVLS to serve the member libraries by providing funding for administrative staff, ILS, Delivery and system overhead expenses. The surplus due to reduced staffing and a large and welcome reduction in state retirement

**Central Book Aid**

**Statutory Reference:** Education Law § 272, 273(1) Commissioners Regulations  
 Central Book Aid is a flat sum for each public library system. I Library Program Guidelines <http://www.nysl.nysed.gov/> for more information.  
 Include in this category library materials. CBA expended for adult non-fiction language library materials, in content.

Yes must be answered at least once in Qu

13.2.1 **Purchased Services:** Did the library system expend CBA funds for purchased services for CBA library materials? Enter Y for Yes, N for No. Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

List services purchased with CBA funds in separate repeating groups, itemizing by vendor contract. If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1.	Expenditure Category	Commercial electronic content vendor contracts
2.	Provider of Services	Overdrive
3.	Expenditure	\$15,000

13.2.2 **Total Expenditure - Purchased Services** \$15,000

13.2.3 **Supplies and Materials:** Did the library system expend CBA funds for adult non-fiction and foreign language library materials with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1.	Expenditure Category	Adult non-fiction and foreign language library materials - print
2.	Quantity	3,227
3.	Unit Cost	\$18
4.	Expenditure	\$58,096

13.2.4 **Total Expenditure -  
Supplies and  
Materials** \$58,096

13.2.5 **Grants to  
Central/Co-Central  
Libraries:** Did the  
system expend  
funds for grants to  
central/co-central  
libraries? Enter Y  
for Yes, N for No. N

If yes, complete one record for each grant; if no, enter N/A for questions 1,2, and 3 of one repeating group.

1. Recipient N/A

2. Allocation N/A

3. Project Description  
(no more than 300  
words)

13.2.6 **Total Expenditure -  
Grants to  
Central/Co-Central  
Libraries** \$0

13.2.7 **Total Expenditure**  
(total 13.2.2, 13.2.4, \$73,096  
and 13.2.6)

13.2.8 **Cash Balance at  
the Opening of the  
Current Fiscal  
Year**  
NOTE: The opening \$71,388  
balance must be the  
same as the closing  
balance of the  
previous year.

13.2.9 **Total Allocation  
from 2015 - 2016  
State Aid** \$64,134

13.2.10 **Cash Balance at  
the End of the  
Current Fiscal  
Year** \$62,712

13.2.11 **Final Narrative:**  
Provide a brief  
narrative, no more  
than five hundred  
(500) words, CBA pays the platform fee for e-book access and adult non fiction resources.  
describing the major  
activities carried out  
with these State Aid  
Funds.

**Central Library Development Aid**

CENTRAL LIBRARY DEVELOPMI

**Statutory Reference:** Education Law § 272, 273(1) Commissioners Regulations  
 The formula is \$0.32 per cap whichever is greater. Please Library Program Guidelines <http://www.nysl.nysed.gov/> for more information.  
 Note: CLDA funds which are used for library materials must be used for non-fiction and foreign language electronic content.

13.3.1-13.3.2 **Professional Salaries:** Indicate total FTE and salaries for all professional system employees (paid from CLDA funds).

13.3.1 Total Full-Time Equivalent (FTE) N/A

13.3.2 Total Expenditure for Professional Salaries N/A

13.3.3-13.3.4 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees (paid from CLDA funds).

13.3.3 Total Full-Time Equivalent (FTE) N/A

13.3.4 Total Expenditures for Other Staff Salaries N/A

13.3.5 **Employee Benefits:**  
 Indicate the total expenditures for all system employee benefits (paid from CLDA funds). N/A

13.3.6 **Purchased Services:**  
 : Did the system expend funds for purchased services? N  
 Enter Y for Yes, N for No.

**Note:** For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

1. Expenditure Category N/A

2. Provider of Services N/A

3. Expenditure N/A

13.3.7 Total Expenditure - Purchased Services \$0

13.3.8 **Supplies and Materials:** Did the system expend funds for supply items, postage, adult nonfiction and foreign language library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No.

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot

If yes, complete one record for each applicable category; if no, enter N/A for questions 1 and 2 of one repeating group.

- |    |                      |     |
|----|----------------------|-----|
| 1. | Expenditure Category | N/A |
| 2. | Expenditure          | N/A |

13.3.9 **Total Expenditure - Supplies and Materials** \$0

13.3.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No.

If yes, complete one record for each type of travel; if no, enter N/A for questions 1 and 2 of one repeating group.

- |    |                |     |
|----|----------------|-----|
| 1. | Type of travel | N/A |
| 2. | Expenditure    | N/A |

13.3.11 **Total Expenditures - Travel** \$0

13.3.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year. Enter Y for Yes, N for No.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1, 2, 3 and 4 of one repeating group

- |    |              |     |
|----|--------------|-----|
| 1. | Type of item | N/A |
| 2. | Quantity     | N/A |
| 3. | Unit cost    | N/A |
| 4. | Expenditure  | N/A |



13.3.13	<b>Total Expenditure - Equipment and Furnishings</b>	\$0
13.3.14	<b>Grants to Central/Co-Central Libraries:</b> Did the system expend funds for grants to central/co-central libraries? Enter Y for Yes, N for No.	Y
If yes, complete one record for each grant; if no, enter N/A for questions 1, 2, and 3 of one repeating group.		
1.	Recipient	Schenectady County Public Library
2.	Allocation	\$89,010
3.	Project Description (no more than 300 words)	The CLDA Grant pays for care and access to the CBA collection, consultatio workshops for the member libraries, and access to marketing resources.
13.3.15	<b>Total Expenditure - Grants to Central/Co-Central Libraries</b>	\$89,010
13.3.16	<b>Total Expenditure (total 13.3.2, 13.3.4, 13.3.5, 13.3.7, 13.3.9, 13.3.11, 13.3.13, and 13.3.15)</b>	\$89,010
13.3.17	<b>Cash Balance at the Opening of the Fiscal Year</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	\$89,009
13.3.18	<b>Total Allocation from 2015 - 2016 State Aid:</b>	\$94,183
13.3.19	<b>Cash Balance at the end of the Current Fiscal Year</b>	\$94,182
13.3.20	<b>Final Narrative:</b> Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.	MVLS now has a regular procedure, including approval by both boards of tru Central Library Advisory Committee, for the development and approval of C spending by the SCPL.

**Coordinated Outreach Library Services Aid**

**Statutory  
Reference:**

Education La  
Commissione  
90.3

13.4.1-13.4.2 **Professional Salaries:** Indicate total FTE and salaries for all professional system employees.

13.4.1	Total Full-Time Equivalents (FTE)	1
13.4.2	Total Expenditure for Professional Salaries	\$71,818

13.4.3-13.4.4 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees.

13.4.3	Total Full-Time Equivalents (FTE)	N/A
13.4.4	Total Expenditure for Other Staff Salaries	N/A

13.4.5	<b>Employee Benefits:</b> Indicate the total expenditures for all system employee benefits.	\$944
--------	---	-------

13.4.6	<b>Purchased Services:</b> Did the system expend funds for purchased services? Enter Y for Yes, N for No.	N
--------	---	---

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot**

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

1.	Expenditure Category	N/A
2.	Provider of Services	N/A
3.	Expenditure	N/A

13.4.7	<b>Total Expenditure - Purchased Services</b>	\$0
--------	---	-----

13.4.8	<b>Supplies and Materials:</b> Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No.	N
--------	---	---

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot**

If yes, complete one record for each applicable category; if no, enter N/A for questions 1 and 2 of one repeating group.

- |    |                      |     |
|----|----------------------|-----|
| 1. | Expenditure Category | N/A |
| 2. | Expenditure          | N/A |

13.4.9 **Total Expenditure - Supplies and Materials** \$0

13.4.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No. Indicate the total expenditures for system employee travel only in this category. N

If yes, complete one record for each type of travel; if no, enter N/A for questions 1 and 2.

- |    |                |     |
|----|----------------|-----|
| 1. | Type of Travel | N/A |
| 2. | Expenditure    | N/A |

13.4.11 **Total Expenditure - Travel** \$0

13.4.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year. Enter Y for Yes, N for No. N

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

- |    |              |     |
|----|--------------|-----|
| 1. | Type of item | N/A |
| 2. | Quantity     | N/A |
| 3. | Unit Cost    | N/A |
| 4. | Expenditure  | N/A |

13.4.13 **Total Expenditure - Equipment and Furnishings** \$0

13.4.14 Did the system expend funds on grants to member libraries? Enter Y for Yes, N for No. N

If yes, complete one record for each grant; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

- |    |                        |     |
|----|------------------------|-----|
| 1. | Recipient              | N/A |
| 2. | Allocation             | N/A |
| 3. | Description of Project |     |

13.4.15	Total Expenditure - Grants to Member Libraries	\$0
13.4.16	Total Expenditure (total 13.4.2, 13.4.4, 13.4.5, 13.4.7, 13.4.9, 13.4.11, 13.4.13, and 13.4.15)	\$72,762
13.4.17	<b>Cash Balance at the Opening of the Fiscal Year</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	\$0
13.4.18	<b>Total Allocation from 2015 - 2016 State Aid:</b>	\$72,762
13.4.19	<b>Cash Balance at the End of the Current Fiscal Year</b>	\$0
13.4.20	<b>Final Narrative:</b> Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.	The salary and benefits for the MVLS Outreach Coordinator exceeds the ann Outreach specialist is very active in the region working with various social se

**Services to County Jails Aid**

SERVICE TO COUNTY JAILS (INTERI

**Statutory Reference:** Education

The intent of the Services to County Jails Program is to provide basic reading materials for those individuals who are incarcerated magazine / newspaper subscriptions which are acceptable to the institution (Supplies & Materials), as well as programs such a

13.5.1	<b>Purchased Services:</b> Did the system expend funds for purchased services? Enter Y for Yes, N for No.	N
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**Note:** For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot

If yes, complete one record for each allowable expenditure; if no, enter N/A for questions 1, 2, and 3 of one repeating group.

1.	Expenditure Category	N/A
2.	Provider of Services	N/A
3.	Expenditure	N/A

13.5.2 **Total Expenditure  
- Purchased Services** \$0

13.5.3 **Supplies and Materials:** Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No. Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1 and 2 of one repeating group.

1. Expenditure Category Books and other print materials

2. Expenditure \$980

13.5.4 **Total Expenditure  
- Supplies and Materials** \$980

13.5.5 **Total Expenditure  
(total 13.5.2, and 13.5.4)** \$980

13.5.6 **Cash Balance at the Opening of the Fiscal Year:**  
NOTE: The opening balance must be the same as the closing balance from the previous year. \$644

13.5.7 **Total Allocation from 2015 - 2016 State Aid** \$3,798

13.5.8 **Cash Balance at the End of the Current Fiscal Year** \$3,462

13.5.9 **Final Narrative:**  
Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds. Institutions aid goes toward books and magazines in our county jails.

State Correctional Aid

THE FOLLOWING QUESTIONS ARE FOR SYSTEMS WITH S

**Statutory** Education Law § 285 (1)  
**Reference:** Commissioners Regulations  
 The amount provided in Edu  
 per inmate. Please see the St  
 Program Guidelines at  
[www.nysl.nysed.gov/libdev/](http://www.nysl.nysed.gov/libdev/)  
 for more information.

13.6.1-13.6.2 **Professional Salaries:** Indicate total FTE and salaries for all system professional employees.

13.6.1 Total Full-Time  
Equivalents (FTE) N/A

13.6.2 Total Expenditure  
for Professional Salaries N/A

13.6.3-13.6.4 **Other Staff Salaries:** Indicate total FTE and salaries for all other system employees.

13.6.3 Total Full-Time  
Equivalents (FTE) N/A

13.6.4 Total Expenditure  
for Other Staff Salaries N/A

13.6.5 **Employee Benefits:**  
Indicate the total  
expenditures for all  
system employee  
benefits. N/A

13.6.6 **Purchased  
Services:** Does the  
system expend  
funds for purchased  
services? Enter Y  
for Yes, N for No. Y

**Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Ot**

If yes, complete one record for each applicable category; if no, enter N/A for questions 1, 2 and 3 of one repeating group.

1. Expenditure  
Category Consultant fees/professional fees

2. Provider of Services Suzzanna Risley

3. Expenditure \$3,537

1. Expenditure  
Category Delivery/courier

2. Provider of Services Johnstown Public Library

3. Expenditure \$352

13.6.7 **Total Expenditure  
- Purchased  
Services** \$3,889

13.6.8 **Supplies and Materials:** Did the system expend funds for supply items, postage, library materials, or equipment and furnishings with a unit cost less than \$5,000? Enter Y for Yes, N for No.

**Note:** For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is selected.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1 and 2 of one repeating group.

1.	Expenditure Category	Office/library supplies and postage
2.	Expenditure	\$158

1.	Expenditure Category	Books and other print materials
2.	Expenditure	\$132

13.6.9 **Total Expenditure - Supplies and Materials** \$290

13.6.10 **Travel Expenditures:** Did the system expend funds for travel? Enter Y for Yes, N for No.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1 and 2 of one repeating group.

1.	Type of Travel	N/A
2.	Expenditure	N/A

13.6.11 **Total Expenditure - Travel** \$0

13.6.12 **Equipment and Furnishings:** Did the system expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year. Enter Y for Yes, N for No.

If yes, complete one record for each type of item purchased; if no, enter N/A for questions 1, 2, 3, and 4 of one repeating group.

1.	Type of item	N/A
2.	Quantity	N/A
3.	Unit Cost	N/A
4.	Expenditure	N/A

13.6.13	<b>Total Expenditure - Equipment and Furnishings</b>	\$0
13.6.14	Total Expenditure (total 13.6.2, 13.6.4, 13.6.5, 13.6.7, 13.6.9, 13.6.11, and 13.6.13)	\$4,179
13.6.15	<b>Cash Balance at the Opening of the Fiscal Year:</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	\$4,021
13.6.16	<b>Total Allocation from 2015 - 2016 State Aid:</b>	\$6,024
13.6.17	<b>Cash Balance at the End of the Fiscal Year:</b>	\$5,866
13.6.18	<b>Final Narrative:</b> Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds	Corrections aid paid for writing programs for inmates, along with books, peri ILL delivery costs.

## 14. Summary of Library System Accomplishments

Using the goals from Section 4 in the approved 2012-2016 System Plan of Service, **BRIEFLY** describe the final results of ea

14.1	Element 1: Resource Sharing - Results	E-books, e-audio, CD audio and DVDs are purchased and shared among the libraries Rotating collections are maintained by the system for the members f graphic novels, children's and teen titles, and holiday books Full service ILS all members Technology service including computer support Network and ne maintained for all locations Delivery made to every open location, Monday - facilitated within the system and with outside agencies
14.2	Element 2: Special Client Groups - Results	Facilitated Adult Literacy Projects at 1 member library Coordinate with socia agencies in four counties Work with 3 county jails and the Hale Creek correc Coordinate the Summer Reading program for member libraries Helped memt literacy services and Picture Book City Developed IMLS grant project with tl museum Coordinated Science @ Your Library programs for member librarie:
14.3	Element 3: Professional Development and Continuing Education - Results	All member libraries have staff participate in CE programs/workshops Assist library staff with attending the annual NYLA conference and other CE oportu
14.5	Element 5: Consulting and Development Services - Results	Member libraries assisted with a wide variety of governance, management an Assist member libraries with the state annual report



14.6	Element 6: Coordinated Services - Results	Computers and other technology purchases done in bulk for all members Libr acquired for members. System provides computer disc maintenance and die-c members Supplies - paper, CD cases etc., purchased in bulk Coordinate order supplies
14.7	Element 7: Awareness and Advocacy - Results	System coordinates member participation in statewide advocacy efforts Syste 4 libraries on local funding issues Developed grant program to assist member advocacy
14.8	Element 8: Communication among Member Libraries and/or Branch Libraries - Results	System coordinates Directors' Council meetings System coordinates group di variety of topics including collection development, purchasing & processing, policies and children's services Maintain system blog and Facebook pages to information
14.9	Element 9: Cooperative Efforts with Other Library Systems - Results	MVLS and SALS maintain a shared ILS and computer services, benefiting al libraries Work regularly with UHLS and CDLC on resource sharing and yout
14.10	Element 10: Construction - Results	Four member libraries assisted with new construction applications Five ongo were assisted with SHPO, bidding and other issues
14.11	Element 11: Central Library - Results	Central Library Advisory Committee meets several times to set parameters fo CBA and CLDA Reporting mechanism developed to track CBA purchases N Grant process developed Central Library holds system workshop
14.12	Element 12: Direct Access - Results	System worked with residents in the un-served area of Broadalbin to explore of a new library All but 7% or system population is served by a member libra charter or contract
14.13	Element 13: Other Goal(s) - Results	The Foundation for Mohawk Valley Libraries raised funding for libraries wit awarded for advocacy, technology and programs. NYSCA grant provides adu discussion programs at member libraries Other grants for assisting libraries w programming are explored

## 15. Current system URL's

15.1	System Home Page URL	<a href="http://www.mvls.info">www.mvls.info</a>
15.2	URL of Current List of Members	<a href="http://www.mvls.info/members">www.mvls.info/members</a>
15.3	URL of Current Governing Bylaws	<a href="http://www.mvls.info/wp-content/uploads/2015/04/MVLS-BYLAWS-Rev-10">http://www.mvls.info/wp-content/uploads/2015/04/MVLS-BYLAWS-Rev-10</a>
15.4	URL of Evaluation Form	<a href="http://www.mvls.info/wp-content/uploads/2016/04/Survey-2016-final.pdf">http://www.mvls.info/wp-content/uploads/2016/04/Survey-2016-final.pdf</a>
15.5	URL of Evaluation Results	<a href="http://www.mvls.info/wp-content/uploads/2016/04/Preliminary-Survey-Sumr">http://www.mvls.info/wp-content/uploads/2016/04/Preliminary-Survey-Sumr</a>
15.6	URL of Central Library Plan	<a href="http://www.mvls.info/wp-content/uploads/2011/03/Central-Library-Plan-of-S">http://www.mvls.info/wp-content/uploads/2011/03/Central-Library-Plan-of-S</a>
15.7	URL of Direct Access Plan	<a href="http://www.mvls.info/wp-content/uploads/2011/03/Direct-Access-Plan-Nove">http://www.mvls.info/wp-content/uploads/2011/03/Direct-Access-Plan-Nove</a>

## 16. Assurance and Contact Information

### CONTACT INFORMATION

- 16.1 Contact name  
(person completing report) Eric Trahan/Joe Sherry
- 16.2 Contact telephone  
number (enter 10  
digits only and hit  
the Tab key) (518) 355-2010
- 16.3 Contact e-mail  
address mvls@mvls.info

**ASSURANCE**

- 16.4 The Library System  
operated under its  
approved Plan of  
Service in  
accordance with the  
provisions of  
Education Law and  
the Regulations of  
the Commissioner,  
and assures that this 4/21/2016  
"Annual Report"  
and "Projected  
Annual Budget"  
were reviewed and  
accepted by the  
System  
Board/Council on  
(date -  
mm/dd/yyyy).

**APPROVAL** (for New York State Library use only/not a required field)

- 16.5 The Library  
System's Annual  
Report and  
Projected Annual  
Budget were  
reviewed and  
approved by the  
New York State  
Library on (date -  
mm/dd/yyyy).

**Suggested Improvements**

Library System  
Name of Person  
Completing Form  
Phone Number and  
Extension (enter  
area code, telephone  
number and  
extension only):  
Please share with us  
your suggestions for  
improving the  
*Annual Report*.  
Thank You!