# Mohawk Valley Library System Annual Report for Library Systems - 2020 (Public Library Systems 2020)

CURRENT YEAR

PREVIOUS YEAR

#### 1. General System Information

#### System/Director Information

Please note: Bibliostat CollectConnect is now compatible with major browsers including Google Chrome, Mozilla Firefox, Safari and Internet Explorer.

Please be advised Bibliostat CollectConnect is now using a new interface. If you have accessed or if you believe you may have accessed the old Bibliostat CollectConnect, please click the new link <u>here</u> and you will be taken to the new interface. Please be sure you exit and close the old Bibliostat CollectConnect before you begin your survey.

Please use the note field to explain answers when necessary. This note field can also be used for local notes.

To avoid loss of data, only one person at a time should be logged into a member library report. Multiple people logged into the same report will cause data to be lost.

Libraries should not have reports from two different years open at the same time.

1.1	SEDCODE	530600700012	530600700012
1.2	Institution ID	80000038305	80000038305
1.3	System Name	Mohawk Valley Library System	Mohawk Valley Library System
1.4	Beginning Reporting Year	01/01/2020	01/01/2019
1.5	Ending Reporting Year	12/31/2020	12/31/2019
1.6	Street Address	858 Duanesburg Rd.	858 Duanesburg Rd.
1.7	City	Schenectady	Schenectady
1.8	Zip Code	12306	12306
1.9	Four-Digit Zip Code Extensior (enter N/A if unknown)	1057	1057
1.10	Mailing Address	858 Duanesburg Rd.	858 Duanesburg Rd.
1.11	City	Schenectady	Schenectady
1.12	Zip Code	12306	12306
1.13	Four-Digit Zip Code Extensior (enter N/A if unknown)	1057	1057
1.13 1.14	0 1	(518) 355-2010	1057 (518) 355-2010
	(enter Ň/A if unknown) Library System Telephone Number (enter 10 digits only		
1.14	(enter N/A if unknown) Library System Telephone Number (enter 10 digits only and hit the Tab key) Fax Number (enter 10 digits	(518) 355-2010	(518) 355-2010
1.14 1.15	(enter N/A if unknown) Library System Telephone Number (enter 10 digits only and hit the Tab key) Fax Number (enter 10 digits only)	(518) 355-2010 (518) 355-0674 www.mvls.info http://www.mvls.info/wp-	(518) 355-2010 (518) 355-0674
1.14 1.15 1.16	(enter N/A if unknown) Library System Telephone Number (enter 10 digits only and hit the Tab key) Fax Number (enter 10 digits only) System Home Page URL URL of the system's complete	<ul> <li>(518) 355-2010</li> <li>(518) 355-0674</li> <li>www.mvls.info</li> <li>http://www.mvls.info/wp-content/uploads/2016/12/MVLS-Plan-</li> </ul>	(518) 355-2010 (518) 355-0674 www.mvls.info http://www.mvls.info/wp- content/uploads/2016/12/MVLS-Plan-

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1.20	Federal Employer Identification Number	141458888	141458888
1.21	County	Schenectady	Schenectady
1.22	County (Counties) Served	Fulton, Montgomery, Schenectady, Schoharie	Fulton, Montgomery, Schenectady, Schoharie
1.23	School District	Schalmont Central School District	Schalmont Central School District
1.24	First Name of System Director	Eric	Eric
1.25	Last Name of System Director	Trahan	Trahan
1.26	NYS Public Librarian Certification Number of the Director of Public Library System, and Reference and Research Library Resources System.	16164	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	(518) 355-2010 Ext.223
1.32	Director	etrahan@mvls.info	etrahan@mvls.info
1.33	Fax Number of the System Director (enter 10 digits only and hit the Tab key)	(518) 355-0674	(518) 355-0674
1.34	Name of Outreach Coordinator	Heather Dickerson	Vacant
Contract	s/Unusual Circumstances		
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 Y for Yes, N for No. If yes, please complete one repeating group for each contract. If no, enter N/A on questions 1 through 5 of one repeating group.		Ν
1.	Name of Contracting Municipality or District	N/A	N/A
2.	Is this a written contract? (Enter Y for Yes, N for No)	N/A	N/A
3.	Population of the geographic area served by this contract	N/A	N/A
4.	Dollar amount of contract	N/A	N/A
5.	Indicate "Full" or "Partial" range of services provided by this contract (Select one)	N/A	N/A
1.49			

THESE	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. It Yes, please annotate using the note.		
QUEST		PUBLIC LIBRARY SYSTEMS ONLY. F	LEASE PROCEED TO THE NEXT
1.50	President/CEO Name. If there is no President/CEO please enter "N/A"		
1.51	President/CEO Phone Number		
1.52	President/CEO Email		
2. Per	sonnel Information		
2.1	FTE (Full-Time Equivalent Calculation) The number of hours per work	25	35
	week used to compute FTE for all budgeted positions.		55
	ETED POSITIONS IN FULL-T		
(enter t 2.4	o two decimal places; enter deci	mai point)	
2.4	Public Library System Director per CR 90.3(f) - Fillec Position FTE	11	1
2.5	Public Library System Director per CR 90.3(f) - Vacant Position FTE		0
2.10	Librarians - Filled Position(s) FTE	1	2
2.11	Librarians - Vacant Position(s) FTE	1	0
2.12	Outreach Coordinator (certified) per CR 90.3 (1)(2) (iii) - Filled Position FTE	1	0
2.13	Outreach Coordinator (certified) per CR 90.3 (1)(2) (iii) - Vacant Position FTE	0	1
2.14	Total Certified Librarians - Filled Position(s) FTE (total questions 2.4 + 2.10 + 2.12)	3.00	3.00
2.15	Total Certified Librarians - Vacant Position(s) FTE (total questions 2.5 + 2.11 + 2.13)	1.00	1.00
2.16	Total Other Professional Staff - Filled Position(s) FTE	0	0
2.17	Total Other Professional Staff - Vacant Position(s) FTE	0	0
2.18	Total Other Staff - Filled Position(s) FTE	2.8	2.8
2.19	Total Other Staff - Vacant Position(s) FTE	0	0
2.20	Total Paid Staff - Filled Position(s) FTE (total	5.80	5.80

	questions 2.14 + 2.16 + 2.18)		
2.21	Total Paid Staff - Vacant Position(s) FTE (total questions 2.15 + 2.17 + 2.19)	1.00	1.00
SALAR	YINFORMATION		
2.22	Entry-Level Librarian (certified) FTE	0	0
2.23	Entry-Level Librarian (certified) Current Annual Salary	\$56,694	\$56,500
2.24	System Director FTE	1	1
2.25	System Director Current Annual Salary	\$103,214	\$100,452
3. Sys	tem Membership, Outlets	and Governance	
PUBLIC	SERVICE OUTLETS		
3.9	Number of member libraries. Do not include branches.	14	14
3.15	Main Library/System Headquarters	1	1
3.16	Indicate the year the system building was initially constructed	1965	1965
3.17	Indicate the year the system building underwent a major renovation costing \$25,000 or more		2008
3.18	Square footage of the system building	8,536	8,536
3.19	Branches of the Library System	0	0
3.20	Bookmobiles	0	0
3.21	Reading Centers	0	0
3.22	Other Outlets	0	0
3.23	Total Public Service Outlets (total questions 3.15 through 3.19)	1	1
3.24	Name of Central Library/Co- Central Libraries	Schenectady County Public Library	Schenectady County Public Library
	O/COUNCIL MEETINGS		
3.25	Total number of public library system/3Rs board meetings or school library system council meetings held during reporting year	8	10
3.26	Current number of <u>voting</u> positions on system board/council. Please add a note if this has changed from the previous year report.	13	13
3.27	Term length for system board/council members. Please add a note if this has changed from the previous year report.	5 years	5 years

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

3.28 Board/Council Selection -Enter Board/Council Selection Code (select one; dropdown). If O is selected, please E use the State note to explain how members were named to the Board/Council.

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#### SYSTEM BOARD/COUNCIL

Public Library Systems - enter information for the period January 1, 2021, through December 31, 2021.

President/Council Chair

3.29	Status	Filled	Filled
3.30	First Name	Jane	Barbara
3.31	Last Name	Borrelli	Madonna
3.32	Institutional Affiliation	N/A	N/A
3.33	Professional Title	President	President
3.34	Mailing Address	PO Box 1311	PO Box 72
3.35	City	Northville	Gloversville
3.36	Zip Code (enter five digits	12134	12078
3.37	President (enter 10 digits only and hit the Tab key)	r (518) 863-8267	(518) 725-0231
3.38	E-mail Address	janeborrelli@hotmail.com	bjmadona@gmail.com
3.39	Term Begins - Month	June	June
3.40	Term Begins - Year (yyyy)	2017	2015
3.41	Term Expires - Month or N/A	June	June
3.42	Term Expires - Year (YYYY) or N/A	2022	2020
3.43	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	Yes
3.44	The date the board president took the Oath of Office (mm/dd/yyyy)	05/20/2017	05/19/2015
3.45	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	05/25/2017	05/29/2015
3.46	Is this a brand new trustee?	Ν	Ν

Board/Council Member - complete one record for each Board/Council Member. For each vacant position, select "Vacant" in question 1, and enter N/A in questions 2-16 of the repeating group. You may 1) enter the data for the Board/Council Members directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into CollectConnect. If you choose to send your data for uploading, you must enter the data into the spreadsheet form available in the survey by clicking <u>here</u>. Complete this form and email it to <u>collectconnect@baker-taylor.com</u>. The number of Council members must be 5 to 11 (no less than five and no more than 11).

1.	Status	Filled	Filled
2.	First Name	Rosemary	Rosemary

0	L A N	Dennen	D
3.	Last Name	Barger	Barger
4. 5	Institutional Affiliation	N/A	N/A
5.	Professional Title		Trustee
6. 7	Mailing Address	83 The Mall St	83 The Mall St.
7.	City Zin Code (anten five digite	Amsterdam	Amsterdam
8.	Zip Code (enter five digits only)	12010	12010
9. 10.	Term Begins - Month Term Begins - Year (yyyy)	November 2018	November 2018
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2022	2022
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Ν	Ν
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	12/04/2018	12/04/2018
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	12/14/2018	12/14/2018
16.	Is this a brand new trustee?	Ν	Y
1.	Status	Filled	Filled
2.	First Name	Deb	Patricia
3.	Last Name	Escobar	Franco
3. 4.	Last Name Institutional Affiliation	Escobar Schenectady County Public Library	Franco N/A
4.	Institutional Affiliation	Schenectady County Public Library	N/A
4. 5.	Institutional Affiliation Professional Title	Schenectady County Public Library Trustee	N/A Trustee
4. 5. 6.	Institutional Affiliation Professional Title Mailing Address	Schenectady County Public Library Trustee 120 E. Palmer Ave.	N/A Trustee 8 Robin St.
4. 5. 6. 7.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady	N/A Trustee 8 Robin St. Gloversville
4. 5. 6. 7. 8.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303	N/A Trustee 8 Robin St. Gloversville 12078
4. 5. 6. 7. 8. 9.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020	N/A Trustee 8 Robin St. Gloversville 12078 June
4. 5. 6. 7. 8. 9. 10.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020	N/A Trustee 8 Robin St. Gloversville 12078 June 2016
4. 5. 6. 7. 8. 9. 10. 11.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June
4. 5. 6. 7. 8. 9. 10. 11. 12.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June 2025	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June 2020
4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/vyvy)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June 2025 Y	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June 2020 N
4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/vyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June 2025 Y	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June 2020 N 05/17/2016 05/24/2016
<ol> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> <li>12.</li> <li>13.</li> <li>14.</li> <li>15.</li> <li>16.</li> </ol>	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/vyvy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee?	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June 2025 Y 07/09/2020 07/17/2020	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June 2020 N 05/17/2016 05/24/2016 N
4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/vyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	Schenectady County Public Library Trustee 120 E. Palmer Ave. Schenectady 12303 June 2020 June 2025 Y	N/A Trustee 8 Robin St. Gloversville 12078 June 2016 June 2020 N 05/17/2016 05/24/2016

3.	Last Name	Hawkins	Borrelli
3. 4.	Institutional Affiliation	N/A	N/A
<del>ч</del> . 5.	Professional Title	Vice President	Vice President
5. 6.	Mailing Address	PO Box 201	PO Box 1311
0. 7.	U U		
	City Zie Code (onten five disite	Summit	Northville
8.	Zip Code (enter five digits only)	12175	12134
9.	Term Begins - Month	November	June
10.	Term Begins - Year (yyyy)	2017	2017
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2022	2022
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Ν	Y
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	11/17/2017	05/20/2017
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	11/24/2017	05/25/2017
16.	Is this a brand new trustee?	Ν	Ν
1.	Status	Filled	Filled
2.	First Name	Joanne	Katherine
3.	Last Name	Mickle	Hawkins
4.	Institutional Affiliation	N/A	N/A
5.	Professional Title	Secretary	Trustee
6.	Mailing Address	2 Maple Ave, Apt 102	PO Box 201
7.	City	Canajoharie	Summit
8.	Zip Code (enter five digits only)	13317	12175
9.	Term Begins - Month	June	November
10.	Term Begins - Year (yyyy)	2018	2017
11.	Term Expires - Month or N/A		June
12.	Term Expires - Year (YYYY)		
	or N/A	2023	2022
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Y	Ν
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	5/18/2018	11/17/2017
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	5/29/2018	11/24/2017
16.	Is this a brand new trustee?	Ν	N
1.	Status	Filled	Filled
2	Firet Nama	Mary	Christina

∠. 3.	Last Name	Salluzzo	Knee
3. 4.	Institutional Affiliation	N/A	N/A
<del>ч</del> . 5.	Professional Title	Trustee	Trustee
6. -	Mailing Address	204 S. William St	109 Mohawk Dr., Apt.102
7.	City	Johnstown	Cobleskill
8.	Zip Code (enter five digits only)	12095	12043
9.	Term Begins - Month	June	November
10.	Term Begins - Year (yyyy)	2016	2017
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2021	2020
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).		Ν
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	05/16/2016	12/07/2017
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	05/21/2021	12/18/2017
16.	Is this a brand new trustee?	Ν	Ν
1.	Status	Filled	Filled
2.	First Name	Rebecca	Joanne
3.	Last Name	Sokol	Mickle
4.	Institutional Affiliation	N/A	N/A
5.	Professional Title	Trustee	Trustee
6.	Mailing Address	140 Allen Heights	2 Maple Ave. Apt 102
7.	City	St. Johnsville	Canajoharie
8.	Zip Code (enter five digits only)	13452	13317
9.	Term Begins - Month	October	June
10.	Term Begins - Year (yyyy)	2020	2018
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2021	2023
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Ν	Y
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	11/12/2020	05/18/2018
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	11/20/2020	05/29/2018
16.	Is this a brand new trustee?	Ν	Ν
1.	Status	Filled	Filled

2.	First Name	Eleanor	Felicia
3.	Last Name	Spencer	Spivey
4.	Institutional Affiliation	N/A	N/A
<b>ð</b> :	Rrafessional Title	Taysteewyers La	Trustee 1750 Hamburg St.
7.	City	Middleburgh	Schenectady
8.	Zip Code (enter five digits only)	12122	12304
9.	Term Begins - Month	September	October
10.	Term Begins - Year (yyyy)	2016	2018
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2021	2020
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Ν	Ν
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	09/21/2016	10/26/2018
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	09/29/2016	11/07/2018
16.	Is this a brand new trustee?	Ν	Ν
1.	Status	Filled	Filled
2.	First Name	Felicia	Eleanor
3.	Last Name	Spivey	Spencer
4.	Institutional Affiliation	N/A	N/A
5.	Professional Title	Trustee	Trustee
6.	Mailing Address	1750 Hamburg St.	147 Lawyers Lane
7.	City	Schenectady	Middleburgh
8.	Zip Code (enter five digits only)	12304	12122
9.	Term Begins - Month	June	September
10.	Term Begins - Year (yyyy)	2020	2016
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2025	2021
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Y	Ν
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	06/08/2020	09/21/2016
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	06/18/2020	09/29/2016
16.	Is this a brand new trustee?	Ν	Ν
1	Status	Eillad	Filled

	5.000 B		
ı. 2.	Siaius First Name	Helen	rilleu Mon
2. 3.	Last Name	Thomas	Mary Salluzzo
0. 4.	Institutional Affiliation	Sharon Springs Free Library	N/A
 5.	Professional Title	Trustee	Trustee
6.	Mailing Address	129 Main St.	204 South William St.
0. 7.	City	Sharon Springs	Johnstown
7. 8.	Zip Code (enter five digits	Shalon Opings	Johnstown
0.	only)	13459	12095
9.	Term Begins - Month	June	June
10.	Term Begins - Year (yyyy)	2020	2016
11.	Term Expires - Month or N/A	June	June
12.	Term Expires - Year (YYYY) or N/A	2025	2021
13.	Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Y	Y
14.	The date the trustee took the Oath of Office (mm/dd/yyyy)	06/06/2020	05/16/2016
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	06/22/2020	05/25/2016
16.	Is this a brand new trustee?	Υ	Ν
1.	Status	Filled	Filled
2.	First Name	Christine	Christine
	Loot Nama	Withowald	Mitkowski
<b>3</b> :	Last Name Institutional Affiliation	Witkowski	Witkowski
¥: 5.	hrรีปันปัชิปอี่ Affiliation Professional Title	Trustee	Trustee
5.	Professional Title	Trustee	Trustee
5. 6.	Professional Title Mailing Address	Trustee 723 Sanders Ave	Trustee 723 Sanders Ave
5. 6. 7.	Professional Title Mailing Address City Zip Code (enter five digits	Trustee 723 Sanders Ave Scotia	Trustee 723 Sanders Ave Scotia
5. 6. 7. 8.	Professional Title Mailing Address City Zip Code (enter five digits only)	Trustee 723 Sanders Ave Scotia 12302	Trustee 723 Sanders Ave Scotia 12302
5. 6. 7. 8. 9.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month	Trustee 723 Sanders Ave Scotia 12302 June	Trustee 723 Sanders Ave Scotia 12302 June
5. 6. 7. 8. 9. 10.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	Trustee 723 Sanders Ave Scotia 12302 June 2019	Trustee 723 Sanders Ave Scotia 12302 June 2019
5. 6. 7. 8. 9. 10. 11.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	Trustee 723 Sanders Ave Scotia 12302 June 2019 June	Trustee 723 Sanders Ave Scotia 12302 June 2019 June
5. 6. 7. 8. 9. 10. 11. 12. 13.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy)	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024
5. 6. 7. 8. 9. 10. 11. 12. 13.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024
5. 6. 7. 8. 9. 10. 11. 12. 13.	Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024 Y	Trustee 723 Sanders Ave Scotia 12302 June 2019 June 2024 N

1.	Status	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.	Is this trustee serving a full	
	term? If No, add a State Note (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.	Status	Vacant
2	First Name	N/A
2. 3.	First Name Last Name	N/A N/A
2. 3. 4.	Last Name	N/A
3. 4.	Last Name Institutional Affiliation	N/A N/A
3. 4. 5.	Last Name Institutional Affiliation Professional Title	N/A N/A N/A
3. 4. 5. 6.	Last Name Institutional Affiliation Professional Title Mailing Address	N/A N/A N/A N/A
3. 4. 5.	Last Name Institutional Affiliation Professional Title	N/A N/A N/A
3. 4. 5. 6. 7.	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only)	N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month	N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only)	N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy)	N/A N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY)	N/A N/A N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> <li>12.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their	N/A N/A N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> <li>12.</li> <li>13.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Year (yyyy) Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the	N/A N/A N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> <li>12.</li> <li>13.</li> <li>14.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county	N/A N/A N/A N/A N/A N/A N/A N/A
<ol> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> <li>7.</li> <li>8.</li> <li>9.</li> <li>10.</li> <li>11.</li> <li>12.</li> <li>13.</li> <li>14.</li> <li>15.</li> </ol>	Last Name Institutional Affiliation Professional Title Mailing Address City Zip Code (enter five digits only) Term Begins - Month Term Begins - Year (yyyy) Term Expires - Month or N/A Term Expires - Year (YYYY) or N/A Is this trustee serving a full term? If No, add a State Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the trustee took the Oath of Office (mm/dd/yyyy) The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A N/A N/A N/A N/A N/A N/A N/A N/A

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.	Is this trustee serving a full term? If No, add a State Note (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?	
COORE	DINATED OUTREACH COUN	ICIL
3.47	Has the Coordinated	

Outreach Council met at least two times during the calendar N 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, 2021, through December 31, 2021. For each vacant position, select "Vacant" in question 1 and enter N/A in questions 2-5 of the repeating group. You may 1) enter the data for the Coordinated Outreach Council Members directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into CollectConnect. If you choose to send your data for uploading, you must enter the data into the spreadsheet form available in the survey by clicking <u>here</u>. Complete this form and email it to <u>collectconnect@baker-taylor.com</u>. 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 Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

1.	Status	Filled	Filled
2.	First Name	Barry	Barry
3.	Last Name	Finley	Finley
4.	Institutional Affiliation	N/A	N/A
5.	Professional Title	N/A	N/A
1.	Status	Filled	Filled
2.	First Name	Heather	Lois
3.	Last Name	Dickerson	Gordon
4.	Institutional Affiliation	MVLS	MVLS
5.	Professional Title	Public Services Consultant	Outreach Coordinator
1.	Status	Filled	Filled
2	First Name	Sara	Marion

<u>-</u> .		Guid	manon
3.	Last Name	Beekman	Grimes
4.	Institutional Affiliation	N/A	U.S. Marines
5.	Professional Title	N/A	N/A
1.	Status	Filled	Filled
2.	First Name	Linda	Linda
3.	Last Name	Burns	Burns
4.	Institutional Affiliation	CASA Centro Civico	CASA Centro Civico
5.	Professional Title	Manager	Manager
1.	Status	Filled	Filled
2.	First Name	Denelle	Sarah
3.	Last Name	Baker	Beekman
4.	Institutional Affiliation	Schoharie County Community Action	Schoharie County W.I.C.
5.	Professional Title	Director	N/A

# 4. Public Library System Transactions and Collection: Borrowers/Visits/Circulation/ Holdings

## Borrowers/Visits/Circulation/Holdings

4.1	Number of registered system borrowers	254	256
4.2	System Visits	1,099	1,576
CIRCU	LATION		
4.3	Total Cataloged Book		
	Circulation	191	461
4.4	Total Circulation of Other Materials	232	326
4.5	Physical Item Circulation (Total questions 4.3 & 4.4)	423	787
4.6	Use of Electronic Material	9,157	224
4.7	Successful Retrieval of Electronic Information	0	0
4.8	Electronic Content Use (Total Questions 4.6 & 4.7)	9,157	224
4.9	Total Circulation of Materials (Total Questions 4.5 & 4.6)	9,580	1,011
4.10	Total Collection Use (Total Questions 4.7 & 4.9)	9,580	1,011
GENE	RAL SYSTEM HOLDINGS		
4.11	Total Cataloged Book Holdings	33,290	36,302
4.12	Uncataloged Book Holdings	0	0
4.13	Total Print Serial Holdings	26	26
4.14	All Other Print Materials Holdings	0	0
4.15	Total Print Materials (Total questions 4.11, 4.12, 4.13 and 4.14)	133,316	36,328
4.16	Electronic Books	14,733	13,117
4.17	Local Electronic Collections	1	1
4.18	Total Number of NOVELNY Databases	15	16

	Databacco			
4.19	Total Electronic Collections ( Total questions 4.16 + 4.17 )	14,734	13,118	
4.20	Audio - Downloadable Units	3,953	2,753	
4.21	Video - Downloadable Units	0	0	
4.22	Other Electronic Materials (Include items that are not included in the above categories, such as e-serials; electronic files; collections of digital photographs; and electronic government documents, reference tools,	0	0	
4.23	scores and maps.) Total Electronic Materials (Total questions 4.18, 4.19, 4.20, 4.21 and 4.22)	18,702	15,887	
Holdings	Continued			
Non-Ele	ctronic Materials			
4.24	Audio - Physical Units	1,764	1,703	
4.25	Video - Physical Units	3,755	3,742	
4.26	Other Non-Electronic Materials	259	259	
4.27	Total Other Materials Holdings (Total questions 4.24 through 4.26)	5,778	5,704	
4.28	Grand Total Holdings (Total questions 4.15, 4.23 and 4.27)	57,796	57,919	
ROTATING COLLECTIONS/BOOK LOANS				
4.29	Does the system have rotating collections/bulk loans? (Enter Y for Yes, N for No)	Y	Y	
4.30	Number of collections	253	253	
4.31	Average number of items per collection	36	36	

## 5. System Services

#### ILS

## TECHNOLOGY AND RESOURCE SHARING

## INTEGRATED LIBRARY SYSTEM (ILS)

5.1	Does the system provide an		
	integrated library automation		
	system (ILS) for its member	Y	Y
	libraries? (Enter Y for Yes, N		
	for No)		
5.2 Ind	icate which modules of the syste	em's ILS have been implemented (che	ck all that apply):
a.	Circulation	Yes	Yes

b.	Public Access Catalog	Yes	Yes
с.	Cataloging	Yes	Yes

d.	Acquisitions	Yes	Yes
e.	Inventory	Yes	Yes
f.	Serials Control	Yes	Yes
g.	Media Booking	No	No
h.	Community Information	No	No
i.	Electronic Resource Management	No	No
j.	Digital Collections Management	No	No
5.3	Identify ILS system vendor	III Polaris	III Polaris
5.4	How many member libraries fully participate in the ILS?	2	2
5.5	% of member libraries participating (calculated field)	14.29%	14.29%
5.6	How many member libraries participate in some ILS modules?	12	12
5.7 Indi	cate features of the system's ILS	S (check all that apply):	
a.	ILS shared with other library systems	Yes	Yes
b.	ILS software permits patron- initiated ILL	Yes	Yes
C.	ILL feature implemented and used	Yes	Yes
5.8	Number of titles in the ILS bibliographic database	697,683	694,747
5.9	Number of new titles added by the system in the reporting year	4,169	3,420
5.10	Number of Central Library Aid titles added in the reporting year	1,038	1,091
5.11	Number of new titles added by the members in the reporting year	13,844	16,638
5.12	Total new titles (total questions 5.9 through 5.11)	19,051	21,149

#### Catalog

## UNION CATALOG OF RESOURCES

For this report, a union catalog is defined as a vehicle that can access member and / or non-member catalogs. It can be either print, disc, or online (virtual) format.

5.13 In what format(s) is the union catalog available? (Check all that apply):

a.	Print	No	No
b.	Disc	No	No
С.	Online (virtual catalog)	Yes	Yes
5.14	How many libraries participation in (or submit records for) the union catalog?		14
5.15	Is the system's union catalog shared with any other library	Y	Y

	system(s)? (Enter Y for Yes, N for No)		,
5.16	Number of titles in the system's union catalog	695,409	692,747
5.17	Number of holdings in the system's union catalog	619,419	639,842
5.18	Number of new titles added in the last year	13,553	17,057
5.19	Number of holdings added in the last year	40,162	54,935
5.20 If apply):	the union catalog is online (virtu	ual catalog) Indicate the features of the	system's virtual catalog (check all that
a.	Non-member catalogs are included (if checked, please name non-member catalogs using the State note)	No	No
b.	Non-library catalogs are included (if checked, please name non-library catalogs using the State note)	No	No
С.	Patron-initiated ILL available and used through this catalog	Yes	Yes
UNION	LIST OF SERIALS		
5.21	Does the system have a		
	union list of serials? (Enter Y for Yes, N for No. If No, enter zero (0) on question 5.22.) How many libraries participate		Y
5.22	How many libraries participate in (or submit records for) the union list of serials?	12	12
СОМВ		LOG AND UNION LIST OF SERIAL	S
5.23	Does the system's union		
	catalog contain both books and serials? (Enter Y for Yes, N for No, or N/A)	Y	Y
Website	/Interlibrary Loan/Delivery/Contin	uing Educ	
	TO THE SYSTEM'S WEB SI		
5.24	Annual number of visits to the system's web site	81,122	120,476
SYSTE	M INTERLIBRARY LOAN AC	TIVITY	
5.25	Total items provided (loaned)		103,823
5.26	Total items received (borrowed)	77,263	111,851
5.27	Total requests provided (loaned) unfilled	0	0
5.28	Total requests received (borrowed) unfilled	0	0
5.29	Total interlibrary loan activity (total questions 5.25 through 5.28)	149,997	215,674
DELIVE	ERY		

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

Note: For questions which include a choice of "Other", please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

а.	System courier (on the System's payroll)	No	No
b.	Other system's courier	No	No
d.	Contracted service (paid by System - not on payroll)	Yes	Yes
e.	U.S. Mail	Yes	Yes
f.	Commercial carrier (e.g.,	No	No
g.	UPS, DHL, etc.) Other (specify using the note)	No	No
5.31	Number of stops (pick-up and delivery sites per week)	91	91
CONTIN	UING EDUCATION/STAFF I		
	ops/Meetings/Training Sess		
Resourc	ce sharing (ILL, collection d	evelopment, etc.)	
5.32	Number of sessions	0	0
5.33	Number of participants	0	0
Continuir	ng Education Cont.		
Technol	ogy		
5.34	Number of sessions	1	1
5.35	Number of participants	17	5
Digitizat	tion		
5.36	Number of sessions	0	0
5.37	Number of participants	0	0
Leaders	hip		
5.38	Number of sessions	7	3
5.39	Number of participants	101	28
Manage	ment & Supervisory		
5.40	Number of sessions	3	1
5.41	Number of participants	38	12
Plannin	g and Evaluation		
5.42	Number of sessions	4	1
5.43	Number of participants	25	12
Awaren	ess and Advocacy		
5.44	Number of sessions	1	3
5.45	Number of participants	7	97
Trustee	Council Training		
5.46	Number of sessions	8	8
5.47	Number of participants	100	63
Special	Client Populations		
5.48	Number of sessions	1	0
5.49 Childrer	Number of participants n's Services/Birth to Kinder	18 garten	0
5.50	Number of sessions	8	3
5.51	Number of participants	430	30
	n's Services/Elementary Gra		
	······································		-

5.52	Number of sessions	17	4
5.53	Number of participants	519	66
Young A	Adult Services/Middle and H	ligh School Grade Levels	
5.54	Number of sessions	1	2
5.55	Number of participants	66	62
General	Adult Services		
5.56	Number of sessions	4	5
5.57	Number of participants	32	41
5.58	<b>Other:</b> 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.	Ν	N
1.	Торіс	N/A	N/A
2.	Number of sessions	N/A	N/A
3.	Number of participants	N/A	N/A
5.59	<b>Grand Total Sessions</b> (tota questions 5.32, 5.34, 5.36, 5.38, 5.40, 5.42, 5.44, 5.46, 5.48, 5.50, 5.52, 5.54, 5.56 and total of question #2 of Repeating Group #5)	1 55	31
5.60	<b>Grand Total Participants</b> (total questions 5.33, 5.35, 5.37, 5.39, 5.41, 5.43, 5.45, 5.47, 5.49, 5.51, 5.53, 5.55, 5.57 and total of question #3 of Repeating Group #5)	1,353	416
5.61	Do library system staff and/or trustees reach outside of the library system building to promote system programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library System?	Ν	N

#### Coordinated Services/Consulting/Reference

#### COORDINATED SERVICES

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

Note: For questions which include a choice of "Other", please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

a.	Coordinated purchase of print Yes materials	Yes
b.	Coordinated purchase of non-	Vaa

		res	res
	print materials		
С.	Negotiated pricing for licensed electronic collection purchases (not purchasing)	No	No
d.	Cataloging	Yes	Yes
e.	Materials processing	Yes	Yes
f.	Coordinated purchase of office supplies	Yes	Yes
g.	Coordinated computer services/purchases	Yes	Yes
h.	Virtual reference	No	No
i.	Other (describe using the note)	No	No
j.	N/A	No	No
CONS	ULTING AND TECHNICAL A	SSISTANCE SERVICES	
5.63	Number of contacts - Consulting with member libraries and/or branches on grants, and state and federal funding	467	748
5.64	Number of contacts - Consulting with member libraries and/or branches on funding and governance	961	745
5.65	Number of contacts - Consulting with member libraries and/or branches on charter and registration work	55	105
5.66	Number of contacts - Consulting with member libraries and/or branches on automation and technology	5,567	4,066
5.67	Number of contacts - Consulting with member libraries and/or branches on youth services	14,451	16,451
5.68	Number of contacts - Consulting with member libraries and/or branches on adult services	837	963
5.69	Number of contacts - Consulting with member libraries and/or branches on physical plant needs	507	344
5.70	Number of contacts - Consulting with member libraries and/or branches on personnel and management issues	604	306
5.71	Number of contacts - Consulting with state and county correctional facilities	10	51
5.72	Number of contacts - Providing information to local, county, and state legislators and their staffs	117	111
5.73	Number of contacts - Providing system and		

	member library information to the media	218	53		
5.74	Number of contacts - Providing website development and	213	196		
5.75	maintenance for member libraries 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	Y		
1.	Topic	Outreach	Doliveri		
1. 2.	•		Delivery		
Ζ.	Number of contacts (all types)	120	853		
1.	Торіс	ILL	ILL		
2.	Number of contacts (all types)	156	74		
1.	Торіс	Delivery	Outreach		
2.	Number of contacts (all types)	•	98		
5.76	Total other contacts (total				
5.70	<b>Total other contacts</b> (total of question #2 of Repeating Group #6)	1,468	1,025		
5.77	Total number of contacts	25 475	25 161		
	(total of questions 5.63 through 5.74 and 5.76)	25,475	25,164		
REFERE	ENCE SERVICES				
5.78	Total Reference Transactions	171	183		
Special Clients/Fees					
	ES TO SPECIAL CLIENTS and Contractual)				
5.79 Indi	cate services the system provid	des to special clients (check all that ap	ply):		
a.	Services for patrons with disabilities	Yes	Yes		
b.	Sonvices for patrons who are	Ma a	Maa		

	disabilities	163	163
b.	Services for patrons who are educationally disadvantaged	Yes	Yes
С.	Services for patrons who are aged	Yes	Yes
d.	Services for patrons who are geographically isolated	No	Yes
e.	Services for patrons who are members of ethnic or minority groups in need of special library services	No	No
f.	Services to patrons who are in institutions	Yes	Yes
g.	Services for unemployed and underemployed individuals	No	No

i.	N/A	No	No
5.80	Number of BOOKS BY MAIL loans	0	0
5.81	Number of member libraries with Job/Education Information Centers or collections	5	5
5.82	Number of State Correctional Facilities libraries served	1	1
5.83	Number of County Jails libraries served	3	3
5.84	Number of institutions served other than jails or correctional facilities	2	3
5.85	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	Y
1.	Service provided	Lip Reading Service	Lip Reading Service
2.	Number of facilities/institutions served	21	21
5.86	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 5.87.	Y	Y
5.87	Description of fees	The system charges fees for computer services, disc cleaning, and some program costs.	Response has been entered.

## 5A. COVID

NOTE: This section of the survey (5A) collects data on the impact of the COVID-19 pandemic . Report all information in Part 5A from March 7, 2020 to December 31, 2020.

CV1 Was the library system

headquarters building physically closed to the public/member library staff for Yes any period of time due to the Coronavirus (COVID-19) pandemic?

- CV2 Did the library system add or increase access to electronic collection materials due to the Yes Coronavirus (COVID-19) pandemic?
- CV3 Did the library system allow users to complete registration for system library cards online without having to come to the Yes system during the Coronavirus (COVID-19) nandemic?

panaonno. CV4 Did the library system provide live, virtual programs or training via the Internet during Yes the Coronavirus (COVID-19) pandemic? CV5 Did the library system create and provide recordings of program or training content Yes via the Internet during the Coronavirus (COVID-19) pandemic? CV6 Enter the Number of Weeks System Headquarters Building Closed Due to COVID-19. This is the number of weeks during the year that due to the Coronavirus (COVID-19) pandemic, the 10 library system headquarters building was physically closed, and the public/member library staff could not enter. when it otherwise would have been open. Enter the Number of Weeks a CV7 system headquarters building Had Limited Occupancy Due to COVID-19. This is the number of weeks during the year that a system headquarters building 23 implemented limited public occupancy practices for in person services at the building in response to the Coronavirus (COVID-19) pandemic. Number of library system staff permanently laid off during 2020 Number of Librarians 0 Number of Other Staff 0 Number of library system staff furloughed during 2020 Number of Librarians 0 Number of Other Staff 0 Number of Weeks Furloughed 0

## 6. Operating Funds Receipts

Local Public Funds

## 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.

1. 2.	County Name Amount	N/A N/A	N/A \$0
3.	Subject to Public Vote (Enter Y for Yes, N for No, or N/A)	N/A	N/A
4.	Written Contract (Enter Y for Yes, N for No, or N/A)	N/A	N/A
6.2	Total County Funding	\$0	\$0
6.3	All Other Local Public Funds	\$0	\$0
6.4	<b>Total Local Public Funds</b> (total questions 6.2 and 6.3)	\$0	\$0
STATE	AID RECEIPTS - arranged i	n alphabetical order	
6.5	Adult Literacy Library Services Grants	\$3,695	\$4,730
6.6	Central Library Development Aid	\$77,410	\$99,322
6.7	Central Book Aid	\$52,712	\$67,633
6.8	Conservation/Preservation Grants	\$0	\$0
6.9	Construction for Public Libraries Aid	\$0	\$0
6.10	Coordinated Outreach Services Aid	\$59,804	\$76,732
6.11	Correctional Facilities Library Aid	\$4,951	\$6,353
6.12	County Jails Library Aid	\$3,121	\$4,005
6.14	Family Literacy Grants	\$6,653	\$8,512
6.18	Local Library Services Aid - Kept at System	\$0	\$0
6.19	Local Library Services Aid - Distributed to Members	\$56,253	\$80,196
6.20	Total LLSA (total questions 6.18 and 6.19)	\$56,253	\$80,196
6.21	Local Services Support Aid	\$45,725	\$65,187
6.22	Local Consolidated Systems Aid	\$0	\$0
6.26	Public Library System Basic Aid	\$565,732	\$725,870
6.27	Public Library System Supplementary Operational Aid	\$90,621	\$116,273
State Ai	id		
6.36	Special Legislative Grants and Member Items	\$0	\$13,000
6.37	The New York Public Library - The Research Libraries	\$0	\$0
6.38	The New York Public Library, Andrew Heiskell Library for the Blind and Physically	\$0	\$0
6 20	Handicapped Aid		

0.00	City University of New York	\$0	\$0
6.40	The New York Public Library, Schomburg Center for Research in Black Culture Library Aid	\$0	\$0
6.41	The New York Public Library, Science, Industry and Business Library	\$0	\$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 6.36).	Y	Y
	ete one record for each grant. If leating group.	the system does not receive other sta	te aid, enter N/A on questions 1 and 2 of
1.	Funding Source	NYSCA - Pen & Ink	NYSCA - Pen & Ink Grant
2.	Amount	\$5,000	\$5,000
6.43	Total Other State Aid (total question #2 of Repeating Group #9 above)	\$5,000	\$5,000
6.44	<b>Total State Aid Receipts</b> (total questions 6.5 through 6.14, questions 6.20 through 6.22, questions 6.26 through 6.27, questions 6.36 through 6.41, and question 6.43)	\$971,677	\$1,272,813
<b>FFDEF</b>	<b>XAL AID</b> Library Services and		
	Technology Act (LSTA)	\$0	\$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	Ν
	ete one record for each grant. If repeating group	the system does not receive other fed	eral aid, enter N/A on questions 1 and 2
1.	Funding Source	N/A	N/A
2.	Amount	\$0	\$0
Federal	Aid/Contracts		
6.47	Total Other Federal Aid (total questions #2 of Repeating Group #10 above)	\$0	\$0
6.48	<b>Total Federal Aid</b> (total questions 6.45 and 6.47)	\$0	\$0
CONTR	RACTS WITH LIBRARIES, LI	BRARY SYSTEMS AND/OR OTHE	R INSTITUTIONS IN NEW YORK
6.49	Does the system contract with	1	
-	libraries, library systems or		
	other institutions in New York State? Enter Y for Yes, N for	Ν	Ν

INU.

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.

	ng group.		
1.	Contracting Agency	N/A	N/A
2.	Contracted Service	N/A	N/A
3.	Total Contract Amount	\$0	\$0
			-
6.50	Total Contracts (total		
0.00	question #3 of Repeating	\$0	\$0
	Group #11 above)		
MISCE	LLANEOUS RECEIPTS		
6.51	Gifts, Endowments,		
	Fundraising, Foundations		
	(include Gates Grants here;	\$39,647	\$21,859
	specify project number(s) and	\$00,011	<i>\$21,000</i>
	dollar amount using the state		
0.50	note)	<b>*</b> 0.050	<b>*</b> 0.000
6.53	Income from Investments	\$2,652	\$2,689
Miscella	aneous		
Dracas	de from Solo of Droporty		
	ds from Sale of Property	¢0	¢0
6.54	Real Property	\$0	\$0
6.55	Equipment	\$0	\$0
6.56	Does the system have other		
	miscellaneous receipts in	Y	Y
	categories not listed in questions 6.51 through 6.55?	Ĩ	f
	Enter Y for Yes, N for No.		
Comple		ategory. If the system does not have a	other miscellaneous receipts, enter N/A
	stions 1 and 2 of one repeating g		
-			Annual Dinner
1.	Receipt category	Annual Dinner	Annual Dinner
	Receipt category Amount		
1. 2.	Receipt category Amount	\$0	\$1,170
2.	Amount	\$0	\$1,170
2. 1.	Amount Receipt category	\$0 Computer Equipment - Reimbursable	\$1,170 Computer Equipment - Reimbursable
2.	Amount	\$0	\$1,170
2. 1. 2.	Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403	\$1,170 Computer Equipment - Reimbursable \$220,520
2. 1. 2. 1.	Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable
2. 1. 2.	Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403	\$1,170 Computer Equipment - Reimbursable \$220,520
2. 1. 2. 1. 2.	Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614
2. 1. 2. 1.	Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) -	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) -
2. 1. 2. 1. 2. 1.	Amount Receipt category Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable
2. 1. 2. 1. 2.	Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) -	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) -
2. 1. 2. 1. 2. 1.	Amount Receipt category Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable
2. 1. 2. 1. 2. 1.	Amount Receipt category Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>1.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899 Miscellaneous - Other Income
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>1.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income \$866	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899 Miscellaneous - Other Income
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income \$866 Program/Workshop Reimbursements	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899 Miscellaneous - Other Income \$366 Program/Workshop Reimbursements
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>1.</li> <li>1.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income \$866	<ul> <li>\$1,170</li> <li>Computer Equipment - Reimbursable</li> <li>\$220,520</li> <li>Electronic Materials - Reimbursable</li> <li>\$86,614</li> <li>Member Fees (ILS-JA) - Reimbursable</li> <li>\$248,899</li> <li>Miscellaneous - Other Income</li> <li>\$366</li> </ul>
<ol> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income \$866 Program/Workshop Reimbursements \$0	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899 Miscellaneous - Other Income \$366 Program/Workshop Reimbursements \$5,491
<ol> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>2.</li> <li>1.</li> <li>1.</li> <li>1.</li> </ol>	Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount Receipt category Amount	\$0 Computer Equipment - Reimbursable \$77,403 Electronic Materials - Reimbursable \$92,693 Member Fees (ILS-JA) - Reimbursable \$238,651 Miscellaneous - Other Income \$866 Program/Workshop Reimbursements	\$1,170 Computer Equipment - Reimbursable \$220,520 Electronic Materials - Reimbursable \$86,614 Member Fees (ILS-JA) - Reimbursable \$248,899 Miscellaneous - Other Income \$366 Program/Workshop Reimbursements

1.	Receipt category	Office & Library Supplies - Reimbursable	Office & Library Supplies - Reimbursable
2.	Amount	\$288	\$700
6.57	Total Other Miscellaneous Receipts (total question #2 of Repeating Group #12 above)	\$413,501	\$566,360
6.58	<b>Total Miscellaneous</b> <b>Receipts</b> (total questions 6.51 through 6.55 and question 6.57)	\$455,800	\$590,908
6.59	TOTAL OPERATING FUNE 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)	\$1 427 477	\$1,863,721
6.60	BUDGET LOANS	\$95,700	\$0
Transfe	ers/Grand Total		
TRAN	SFERS		
6.61	Transfers from Capital Fund (Same as question 9.6)	\$0	\$0
6.62	Transfers from Other Funds	\$0	\$0
6.63	<b>Total Transfers</b> (total questions 6.61 and 6.62)	\$0	\$0
6.64	CASH BALANCE - Beginning of Current Fiscal Reporting Year: Public Library Systems - January 1, 2020. (Same as closing cash balance at the end of previous fiscal reporting year: Public Library Systems - December 31, 2019.)	\$1,088,754	\$1,033,745
6.67	GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS, AND BALANCE/ROLLOVER (Public Library Systems - tota questions 6.59, 6.60, 6.63 and 6.64 - must agree with question 7.83)		\$2,897,466
7. Op	erating Fund Disburseme	nts	
Staff/Callestian/Crante/Canital			

Staff/Collection/Grants/Capital

## STAFF EXPENDITURES

Salaries

7.1 System Director and

\$064 OF4

¢060 007

	, ikana ina a	ቅረዕ ፣, ሣጋ4	\$30U,397
70	Librarians Other Stoff		
7.2	Other Staff	\$150,761	\$143,848
7.3	Total Salary and Wages Expenditures (total questions 7.1 and 7.2)	\$412,715	\$504,245
7.4	Employee Benefits Expenditures	\$154,878	\$178,106
7.5	<b>Total Staff Expenditures</b> (total questions 7.3 and 7.4)	\$567,593	\$682,351
COLLE	CTION EXPENDITURES		
7.6	Print Materials Expenditures	\$21,700	\$32,731
7.7	Electronic Materials Expenditures	\$104,039	\$86,881
7.8	Other Materials Expenditures	\$2,198	\$2,385
7.9	<b>Total Collection</b> <b>Expenditures</b> (total questions 7.6 through 7.8)	\$127,937	\$121,997
GRANT	S TO MEMBER LIBRARIES		
Cash Gr	ants Paid From		
7.10	Local Library Services Aid (LLSA)	\$56,253	\$80,196
7.11	Central Library Aid (CLDA/CBA)	\$89,390	\$99,272
7.15	Other State Aid/Grants (e.g.,		
	Construction, Special Legislative or Member Grants)	\$198	\$14,153
7.16	Federal Aid	\$0	\$0
7.17	Other cash grants paid from system funds	\$13,666	\$13,814
7.18	Total Cash Grants (total questions 7.10 through 7.17)	\$159,507	\$207,435
7.19	Book/Library Materials Grants	\$20,436	\$8,194
7.20	Other Non-Cash Grants	\$1,244	\$2,428
7.21	<b>Total Grants to Member</b> <b>Libraries</b> (total questions 7.18 through 7.20)	\$181,187	\$218,057
CAPITA	L EXPENDITURES FROM C	PERATING FUNDS	
7.22	Bookmobile	\$0	\$0
7.23	Other Vehicles	\$0	\$0
7.24	Computer Equipment	\$0	\$2,682
7.25	Furniture/Furnishings	\$0	\$0
7.26	Other Capital Expenditures	\$0	\$0
7.27	Total Capital Expenditures		
	from Operating Fund (total questions 7.22 through 7.26)	\$0	\$2,682
Capital C	Cont /Operation and Maintenance	/Miscellane	

## Capital Cont./Operation and Maintenance/Miscellane

## TOTAL CAPITAL EXPENDITURES BY SOURCE OF FUNDS

7.28	From Local Public Funds (71PF)	\$0	\$0
7.29	From Other Funds (710F)	\$0	\$2,682

7.30	<b>Total Capital Expenditures</b> <b>by Source</b> (total questions 7.28 and 7.29; same as	\$0	\$2,682
	question 7.27)		
OPERA	TION AND MAINTENANCE	OF BUILDINGS	
Repairs	To Buildings and Building Equi	pment by Source of Funds	
7.31	From Local Public Funds (72PF)	\$0	\$0
7.32	From Other Funds (72OF)	\$6,312	\$1,808
7.33	<b>Total Repairs to Buildings</b> <b>and Building Equipment</b> (total questions 7.31 and 7.32)	\$6,312	\$1,808
7.34	Other Building & Maintenance Expenses	\$23,188	\$30,565
7.35	<b>Total Operation and</b> <b>Maintenance of Buildings</b> (total questions 7.33 and 7.34)	\$29,500	\$32,373
MISCEL	LANEOUS EXPENSES		
7.36	Total Operation & Maintenance of Bookmobiles and Other Vehicles	\$1,332	\$684
7.37	Office and Library Supplies	\$522	\$1,375
7.38	Equipment	\$0	\$0
7.39	Telecommunications	\$3,382	\$3,132
7.40	Binding Expenses	\$0	\$0
7.41	Postage and Freight	\$657	\$443
7.42	Publicity and Printing	\$0	\$369
7.43	Travel	\$2,011	\$6,717
7.44	Fees for Consultants and Professionals - Please include a Note with the consultants' or vendors' names and a brief description of the service(s) provided.	\$9,739	\$32,972
7.45	Membership Dues - Please include a State Note listing Professional Organization Memberships for which dues are being paid.	\$4,013	\$6,503
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	Y

Complete one record for each expense category. If the system does not have other miscellaneous expenses, enter<br/>N/A on questions 1 and 2 of one repeating group.1.Expense categoryAnnual MeetiAnnual MeetiAnnual Meeti

1.	Expense category	Annual Meeti	Annual Meeti
2.	Amount	\$0	\$2,819
1.	Expense category	Automation F	Automation F
2.	Amount	\$126,541	\$120,982

1.	Expense category	Delivery Fee	Delivery Fee
2.	Amount	\$119,118	\$131,181
1.	Expense category	JA Equipment	JA Equipment
2.	Amount	\$85,222	\$196,375
1.	Expense category	JA Fees - IL	JA Fees - IL
2.	Amount	\$239,882	\$233,876
1.	Expense category	Member Libra	Member Libra
2.	Amount	\$286	\$378
1.	Expense category	Programs	Programs
2.	Amount	\$2,296	\$1,954
1.	Expense category	Rental, Main	Rental, Main
2.	Amount	\$3,900	\$3,063

#### Miscellaneous Cont./Contracts/Debt Service

7.47	Total Other Miscellaneous Expenses (total question #2 of\$577,245 Repeating Group #13)	\$691,245
7.48	Total MiscellaneousExpenses (total questions\$598,9017.36 through 7.45 and 7.47)	\$743,440
CONTI	RACTS WITH LIBRARIES and/or LIBRARY SYSTEMS IN N	IEW 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.	Y
Comple	ete one record for each contract. If the system does not contract	, enter N/A on questions 1, 2, and 3 of one

repeatir I.	ng group Contracting Agency (specify using the State note)	MVLS/SALS Joint Automation Project	t MVLS/SALS Joint Automation Project	
2.	Contracted Service (specify using the State note)	Cataloging	Cataloging	
3.	Total Contract Amount	\$7,228	\$7,086	
1.	Contracting Agency (specify using the State note)	Southern Adirondack Library System	Southern Adirondack Library System	
2.	Contracted Service (specify using the State note)	Cataloging	Cataloging	
3.	Total Contract Amount	\$746	\$726	
7.50	<b>Total Contracts</b> (total question #3 of Repeating Group #14 above)	\$7,974	\$7,812	
DEBT SERVICE				

Capital Purposes Loans (Principal and Interest)

7.51 Erom Local Dublic Euroda

1.51	(73PF)	\$0	\$0
7.52	From Other Funds (73OF)	\$0	\$0
7.53	<b>Total Capital Purposes</b> <b>Loans</b> (total questions 7.51 and 7.52)	\$0	\$0

## Transfers

#### Other Loans

7.54	Other Loans	\$0	\$0
7.55	<b>Total Debt Service</b> (total questions 7.53 and 7.54)	\$0	\$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)	\$1,513,092	\$1,808,712
TRANS			
	s to the Capital Fund		
7.57	From Local Public Funds (76PF)	\$0	\$0
7.58	From Other Funds (76OF)	\$0	\$0
7.59	<b>Total Transfers to Capital</b> <b>Fund</b> (total questions 7.57 and 7.58; same as question 8.2)	\$0	\$0
7.60	Total Transfers to Other Funds	\$0	\$0
7.61	<b>Total Transfers</b> (total questions 7.59 and 7.60)	\$0	\$0
7.62	TOTAL DISBURSEMENTS AND TRANSFERS (total questions 7.56 and 7.61)	\$1,513,092	\$1,808,712

Cash Balance/Grand Total/Audit/Bank Balance

7.63	CLOSING CASH BALANCE at the End of the Current Fiscal		
	Reporting Year (For Public Library Systems - December 31, 2020)	\$1,098,839	\$1,088,754

#### 7.83 **GRAND TOTAL DISBURSEMENTS, TRANSFERS, & ENDING** \$2,611,931 **BALANCE** (total questions 7.62 and 7.63)

\$2,897,466

#### FISCAL AUDIT

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

7.84	Last audit performed (mm/dd/yyyy)	09/17/2020	09/19/2019
7.85	Time period covered by this audit (mm/dd/yyyy - mm/dd/yyyy)	01/01/19 - 12/31/2019	01/01/2018 - 12/31/2018
7.86	Indicate type of audit (select one from drop-down):	Private Accounting Firm	Private Accounting Firm
ACCO	UNT INFORMATION		
Comple	ete one record for each financial	account	
1.	Name of bank or financial institution	NBT Bank	NBT Bank
2.	Amount of funds on deposit	\$1,098,848	\$1,088,763
7.87	<b>Total Bank Balance</b> (total question #2 of Repeating Group #15)	\$1,098,848	\$1,088,763
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.	Ν	Ν
8. Cap	oital Fund Receipts		
State A	id and Grants for Capital Projects		
State A 8.1	id and Grants for Capital Projects Total Revenue From Loca Sources		\$0
	Total Revenue From Loca Sources Transfer From Operating Fund		\$0 \$0
8.1 8.2	Total Revenue From Loca Sources Transfer From Operating	\$0	
8.1 8.2	Total Revenue From Loca Sources Transfer From Operating Fund (same as question 7.59)	\$0	
8.1 8.2 <b>STATE</b> 8.3	Total Revenue From Loca Sources Transfer From Operating Fund (same as question 7.59) E AID FOR CAPITAL PROJEC State Aid Received for	I <sub>\$0</sub> \$0 CTS \$0	\$0
8.1 8.2 <b>STATE</b> 8.3	Total Revenue From Loca Sources Transfer From Operating Fund (same as question 7.59) E AID FOR CAPITAL PROJEC State Aid Received for Construction	I <sub>\$0</sub> \$0 CTS \$0	\$0
8.1 8.2 STATE 8.3 ALL O	Total Revenue From Local Sources Transfer From Operating Fund (same as question 7.59) E AID FOR CAPITAL PROJEC State Aid Received for Construction THER AID AND/OR GRANTS 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	s 0 <b>CTS</b> \$0 <b>FOR CAPITAL PROJECTS</b>	\$0
8.1 8.2 STATE 8.3 ALL O	Total Revenue From Local Sources Transfer From Operating Fund (same as question 7.59) E AID FOR CAPITAL PROJEC State Aid Received for Construction THER AID AND/OR GRANTS 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	s 0 <b>CTS</b> \$0 <b>FOR CAPITAL PROJECTS</b>	\$0 \$0
8.1 8.2 <b>STATE</b> 8.3 <b>ALL O</b> 8.4	Total Revenue From Local Sources Transfer From Operating Fund (same as question 7.59) E AID FOR CAPITAL PROJEC State Aid Received for Construction THER AID AND/OR GRANTS 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.	so so so <b>FOR CAPITAL PROJECTS</b>	\$0 \$0 N

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Totals/Cash Balance

<u>~</u>.

	<b>Total Aid and/or Grants</b> (total question #2 of Repeating Group #16 above)	\$0	\$0
8.6	TOTAL RECEIPTS - Revenues from Local Sources, Interfund Revenue, State Aid for		
	Capital Projects, and All Other Aid and/or Grants for Capital Projects (total questions 8.1, 8.2, 8.3, and 8.5)	\$0	\$0
8.7	NONREVENUE RECEIPTS	\$0	\$0
8.8	TOTAL RECEIPTS - Total		
	Receipts and Nonrevenue Receipts (total questions 8.6 and 8.7)	\$0	\$0
8.9	CASH BALANCE - Beginning of Current Fiscal Reporting Year: Public Library Systems - January 1, 2020. (Same as		
	closing cash balance at the end of previous fiscal reporting year: Public Library Systems - December 31, 2019.)	\$0	\$0
Grand To	otal		
Grand To 8.10	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9)	\$0	\$0
8.10	TOTAL RECEIPTS AND CASH BALANCE (total	\$0	\$0
8.10 <b>9. Cap</b> i	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9)	\$0	\$0
8.10 9. Capi Project E	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9)	\$0	\$0
8.10 9. Capi Project E PROJE	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements	\$0 \$0	\$0 \$0
8.10 9. Capi Project E PROJE	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements Expenditures/Cash Balance CT EXPENDITURES		
8.10 9. Capi Project E PROJE 9.1	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements Expenditures/Cash Balance CT EXPENDITURES Total Construction	\$0	\$0
8.10 9. Capi Project E 9.1 9.2	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements expenditures/Cash Balance CT EXPENDITURES Total Construction Incidental Construction	\$0 \$0	\$0 \$0
8.10 9. Capi Project E PROJE 9.1 9.2 9.3	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements expenditures/Cash Balance CT EXPENDITURES Total Construction Incidental Construction Books and Library Materials	\$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0
8.10 9. Capi Project E 9.1 9.2 9.3 9.4	TOTAL RECEIPTS AND CASH BALANCE (total questions 8.8 and 8.9) ital Fund Disbursements Expenditures/Cash Balance CT EXPENDITURES Total Construction Incidental Construction Books and Library Materials Total Other Disbursements Total Project Expenditures (total questions 9.1 through	\$0 \$0 \$0 \$0 \$0	\$0 \$0 \$0 \$0 \$0

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9.8 **TOTAL DISBURSEMENTS** - Total Project Expenditures, Transfer to **Operating Fund, and Total \$0** Nonproject Expenditures (total guestions 9.5 through 9.7) 9.9 **CLOSING CASH BALANCE IN CAPITAL** FUND at the End of the \$0 **Current Fiscal Year** (December 31, 2020, for Public Library Systems) Grand Total 9.10 **TOTAL DISBURSEMENTS** AND CASH BALANCE \$0 (total questions 9.8 and 9.9) 12. Projected Annual Budget For Library Systems Public Library Systems Budget for January 1, 2021 - December 31, 2021 **PROJECTED OPERATING FUND - RECEIPTS** 12.1 **Total Operating Fund** Receipts (include Local Aid, State Aid, Federal Aid, \$1,485,866 **Contracts and Miscellaneous** Receipts) 12.2 **Budget Loans** \$0 \$0 12.3 **Total Transfers** 12.4 Cash Balance/Ending Balance in Operating Fund at the end of the previous fiscal vear (For Public Library Systems, opening balance on January \$1,098,839 1, 2021 must be the same as the December 31, 2020, closing balance reported on Q7.63 of the 2020 annual report) 12.5 Grand Total Operating Fund Receipts, Budget Loans, Transfers and Ending \$2,584,705 Balance (total questions 12.1 through 12.4) **PROJECTED OPERATING FUND - DISBURSEMENTS** 12.6 **Total Operating Fund Disbursements (include Staff** 

\$0

\$0

\$0

\$1,733,953

\$1,088,754

\$2,822,707

\$0

\$0

Expenditures, Collection Expenditures, Grants to Member Libraries, Capital Expenditures from Operating \$1,658,589 \$1,753,491 Funds, Operation and Maintenance of Buildings, Miscellaneous Expenses

	Contracts with Libraries and Library Systems in New York State and Debt Service)		
12.7 12.8	Total Transfers Cash Balance/Ending Balance in Operating Fund at the end of the fiscal year	\$0	\$0
	(For Public Library Systems, balance as of December 31, 2021)	\$926,116	\$1,069,216
12.9	Grand Total Operating Fund Disbursements, Transfers and Ending Balance (total questions 12.6 through 12.8)	\$2,584,705	\$2,822,707
PROJE	CTED CAPITAL FUND - REC	CEIPTS	
12.10	Capital Fund Receipts		
	(include Revenues from Local		
	Sources, Transfer from Operating Fund, State Aid for	\$0	\$0
	Capital Projects and All Other Aid for Capital Projects)		
12.11	Nonrevenue Receipts	\$0	\$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, 2021, must be the same as the December 31, 2020, closing balance reported on	\$0	\$0
	Q9.9 of the 2020 annual report		
12.13	Grand Total Capital Fund		
	Receipts and Balance (total questions 12.10 through 12.12)	\$0	\$0
PROJE	CTED CAPITAL FUND - DIS	BURSEMENTS	
12.14	Capital Fund Disbursements		
	(include Project Expenditures, Transfer to Operating Fund and Nonproject Expenditures	\$0	\$0
12.15	Cash Balance in Capital Fund		
	at the end of the current fiscal year	\$0	\$0
	(For Public Library Systems,	Ψ0	φo
12.16	Beseinhera Capital Fund		
12.10	Disbursement, Transfers, and	\$0	¢ሰ
	Balance (Sum of questions 12.14 and 12.15)	ψυ	\$0

## **13. State Formula Aid Disbursements**

Public Library Systems Basic Aid

PUBLIC LIBRARY SYSTEMS BASIC AID, SUPPLEMENTAL AID and either LOCAL LIBRARY SERVICES AID and LOCAL SERVICES SUPPORT AID or LOCAL CONSOLIDATED SERVICES AID (Brooklyn, New

York Public and Queens Borough only)

	Statutory Reference (Basic Aid):			
	Statutory Reference (LLSA):	Commiss The form	n Law § 272, 273(5) sioners Regulations 90.3 and 90.9 nula is \$0.31 per capita of a membe inimum of \$1,500 per library with for	
	Statutory Reference (LSSA):	Commiss The form	n Law § 272, 273(1)(f)(6) sioners Regulations 90.3 and 90.10 hula is \$0.31 per capita for system p d service areas of member libraries	opulation living outside the
	Statutory Reference (LCSA):	Education Law § 272, 273(1)(f)(7) Commissioners Regulations 90.3 The formula is \$0.31 per capita plus 2/3 of per capita total with formula equity to 1991 LLIA.		
	Statutory Reference (Supplemental):	Education Law § 273(12)(a) The formula is a base grant of \$39,000 and an amount equal to 10.94% of the amount of Basic Aid provided under Education Law § 273(1)(a, c, d, e, and n).		
	BECPL Special Aid:		on Law § 273(1)(I) sum of \$50,000 for a continuity of s ment)	ervice project. (Included in Basic
	Brooklyn Specia Aid:	Ann	cation Law § 273(1)(k) ual sum of \$350,000 for business lik ment)	prary. (Included in Basic Aid
	Nassau Special Aid:	Edu	cation Law § 273(1)(m)	
13.1.1-1	3.1.2 Professional	Salaries:	Indicate total FTE and salaries for	all professional system employees.
13.1.1	Total Full-Time Equ (FTE)	ivalents	2.5	3
13.1.2	Total Expenditure for Professional Salarie		\$230,207	\$274,156
13 1 3-1	314 Other Staff S	alaries: h	ndicate total FTE and salaries for al	other system employees
13.1.3	Total Full-Time Equ (FTE)		3.1	3.1
13.1.4	Total Expenditure for Staff Salaries	or Other	\$150,761	\$153,357
13.1.5	Employees Benefindicate the total ex for all system employeenefits.	penditures	<sup>\$</sup> \$152,753	\$178,105
13.1.6	Purchased Service the system expend purchased services Enter Y for Yes, N f	funds for ?	Y	Y

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

# "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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. 2.	Expenditure Category Provider of Services	Delivery/courier Arnoff Global Logistics	Delivery/courier
2. 3.	Expenditure	\$119,118	Arnoff Global Logistics \$29,492
1.	Expenditure Category	Building and maintenance expenses	Delivery/courier
2.	Provider of Services	Various	Empire Library Delivery
3.	Expenditure	\$29,362	\$1,484
1.	Expenditure Category		Library systems vendor contract for
		Institutional membership dues	automation (e.g, integrated library system, virtual union catalog)
2.	Provider of Services	Various	SALS/MVLS JA
3.	Expenditure	\$4,013	\$100,205
1.	Expenditure Category	Telecommunications	Delivery/courier
2.	Provider of Services	Spectrum	ALDS
3.	Expenditure	\$3,382	\$110,000
1.	Expenditure Category	Consultant fees/professional fees	Building and maintenance expenses
2.	Provider of Services	T.W.Byxbee	Various
3.	Expenditure	\$3,750	\$32,375
1.	Expenditure Category	Consultant fees/professional fees	Institutional membership dues
2.	Provider of Services	Kathryn McCary	Various
3.	Expenditure	\$625	\$6,716
1.	Expenditure Category	Consultant fees/professional fees	Telecommunications
2.	Provider of Services	Sky River	Various
3.	Expenditure	\$7,974	\$3,076
1.	Expenditure Category	Consultant fees/professional fees	Consultant fees/professional fees
2.	Provider of Services	EOS Technologies	T,M.Byxbee
3.	Expenditure	\$3,900	\$3,750
1.	Expenditure Category	Consultant fees/professional fees	Consultant fees/professional fees
2.	Provider of Services	Paychex	Kathryn McCary
3.	Expenditure	\$1,686	\$376
13.1.7	Total Expenditure - Purchased Services	\$173,810	\$302,597
13.1.8	<b>Supplies and Materials:</b> Did the system expend funds for supply items, postage, library materials, or equipment and furnishings	Y	γ
	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 Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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

1. 2.	Expenditure Category Expenditure	Office/library supplies and postage \$1,906	Office/library supplies and postage \$5,060
1. 2.	Expenditure Category Expenditure	Books and other print materials \$1,546	Books and other print materials \$4,576
13.1.9	Total Expenditure - Supplies and Materials	\$3,452	\$9,636
13.1.10	<b>Travel Expenditures:</b> Did the system expend funds for travel? Enter Y for Yes, N for No.	Y	Y
lf yes, c	omplete one record for each ap	plicable category; if no enter N/A for qu	lestions 1 and 2 of one repeating group.
1.	Type of Travel	System Staff Travel	System Staff Travel
2.	Expenditure	\$3,343	\$7,400
13.1.11	Total Expenditures - Travel	\$3,343	\$7,400
13.1.12	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	Ν
lf yes, c group.	omplete one record for each ap	plicable category; if no enter N/A for qu	uestions 1, 2, 3, and 4 of one repeating
1.	Type of Item	N/A	N/A
2.	Quantity	N/A	N/A
3.	Unit Cost	N/A	N/A
4.	Expenditure	N/A	N/A
13.1.13	Total Expenditure -	**	<b>2</b> 0
	Equipment and Furnishings	\$0	\$0
13.1.14	Local Library Services Aid Expenditures: Indicate the total expenditures to member libraries for Local Library Services Aid.		\$80,196
13.1.15	Grants to Member Libraries: Did the system expend funds for grants to member libraries? Enter Y for Yes, N for no.	Y	Y
		ant; if no, enter N/A for questions 1, 2, a	
1.	Recipient	Sharon Springs Free Library	Schenectady County Public Library

2.	Allocation	\$200	\$500	
3.	Project Description (no more than 300 words)	Annual Volunteer Award	Response has been entered.	
1.	Recipient	Gloversville Public Library	Gloversville Public Library	
2.	Allocation	\$500	\$200	
3.	Project Description (no more than 300 words)	Annual Trustees Award	Response has been entered.	
13.1.16	Total Expenditures - Grants for Member Libraries	\$700	\$1,264	
13.1.17	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)	\$771,279	\$1,006,711	
	Cash Balance at the Opening of the Fiscal Year NOTE: The opening balance must be the same as the closing balance of the previous year.	\$198,885	\$218,070	
13.1.19	Total Allocation from 2020 - 2021 State Aid:	\$962,079	\$987,526	
13.1.20	Total Available Before Expenditures (total 13.1.18 +	\$1,160,964	\$1,205,596	
13.1.21	13.1.19) Cash Balance at the End of the Current Fiscal Year (total 13.1.19 + 13.1.18 - 13.1.17)	\$389,685	\$198,885	
13.1.22		Spending was down due to the 20% aid withholding. System services are summarized in the Accomplishments section.	Response has been entered.	
Central E	Book Aid			
		CENTRAL BOOK AID (CBA)		
	Statutory Reference:Education Law § 272, 273(1)(b)(2) Commissioners Regulations 90.4 Central Book Aid is a flat sum of \$71,500 to each public library system. Please see the Central Library Program Guidelines at http://www.nysl.nysed.gov/libdev/clda/index.html for more information. Include in this category library expenditures for CBA library materials. CBA funds may only be expended for adult non-fiction and foreign language library materials, including electronic content.			
13.2.1	Yes must be Purchased Services: Did	answered at least once in Questions	13.2.1 - 13.2.5	

CBA funds for purchased services for CBA library materials? Enter Y for Yes, N for No.

Υ

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

List services purchased with CBA funds in separate repeating groups, itemizing by vendor contract. 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	Commercial electronic content vendo	r Commercial electronic content
2. 3.	Provider of Services Expenditure	entrafita \$25,000	<del>Yହାଣ୍ଟିମ<sub>ି</sub>ତ୍ୱ</del> େntracts \$20,000
13.2.2	Total Expenditure - Purchased Services	25,000	20,000
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.	i Y	Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	Adult non-fiction and foreign language library materials - print
2.	Quantity	\$1,033	\$1,182
3.	Unit Cost	\$19	\$19
4.	Expenditure	\$19,622	\$22,466
13.2.4	Total Expenditure - Supplies and Materials	\$19,622	\$22,466
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.	Ν	Ν
lf yes, c	omplete one record for each gra	ant; if no, enter N/A for questions 1,2,	and 3 of one repeating group.
1.	Recipient	N/A	N/A
2.	Allocation	N/A	N/A
3.	Project Description (no more than 300 words)	N/A	
13.2.6	Total Expenditure - Grants to Central/Co-Central Libraries	\$0	\$0
13.2.7	Total Expenditure (total 13.2.2, 13.2.4, and 13.2.6)	\$44,622	\$42,466
13.2.8	Cash Balance at the		

	<b>Fiscal Year</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	\$98,712	\$73,545
13.2.9	Total Allocation from 2020 - 2021 State Aid	\$65,890	\$67,633
13.2.10	Total Available Before Expenditures (total 13.2.8 + 13.2.9)	\$164,602	\$141,178
13.2.11	Cash Balance at the End of the Current Fiscal Year (total 13.2.9 + 13.2.8 - 13.2.7)	\$119,980	\$98,712
13.2.12	<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.	Spending was down due the the Central Library being closed for many months, and for their budget reductions. Central Library services are provided according to the Central Library plan.	Response has been entered.

#### Central Library Development Aid

# CENTRAL LIBRARY DEVELOPMENT AID (CLDA)

Statutory	Education Law § 272, 273(1)(b)(1)
Reference:	Commissioners Regulations 90.4
	The formula is \$0.32 per capita or \$105,000
	whichever is greater. Please see the Central
	Library Program Guidelines at
	http://www.nysl.nysed.gov/libdev/clda/index.html
	for more information.
	Note: CLDA funds which are expended for
	library materials must be used for adult non-
	fiction and foreign language, including 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 Equivalents (FTE)	0	0
13.3.2	Total Expenditure for Professional Salaries	\$0	\$0
13.3.3-1	3.3.4 Other Staff Salaries: Ir	ndicate total FTE and salaries for all ot	her system employees (paid from CLDA
funds).			
13.3.3	Total Full-Time Equivalents (FTE)	0	0
13.3.4	Total Expenditures for Other Staff Salaries	\$0	\$0
13.3.5	<b>Employee Benefits:</b> Indicate the total expenditures for all system employee benefits (paid from CLDA funds).	\$ \$0	\$0
13.3.6	Purchased Services: Did the system expend funds for	Ν	N

purchased services  $r \vdash nter r$  for Yes, N for No.

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	N/A
2.	Provider of Services	N/A	N/A
3.	Expenditure	N/A	N/A
13.3.7	Total Expenditure - Purchased Services	\$0	\$0
13.3.8	Supplies and Materials : D 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.	N	N

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	N/A
2.	Expenditure	N/A	N/A
13.3.9	Total Expenditure - Supplies and Materials	\$0	\$0
13.3.10	Travel Expenditures: Did		
	the system expend funds for travel? Enter Y for Yes, N for No.	Ν	Ν
lf yes, c	complete one record for each type	pe of travel; if no, enter N/A for questio	ns 1 and 2 of one repeating group.
1.	Type of travel	N/A	N/A
2.	Expenditure	N/A	N/A
13.3.11	Total Expenditures - Travel	\$0	\$0
			\$0 N
13.3.12 If yes, c	Travel 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.	1	Ν
13.3.12 If yes, c repeatin	Travel 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. complete one record for each typing group.	N De of item purchased; if no, enter N/A f	<i>N</i> for questions 1, 2, 3 and 4 of one
13.3.12 If yes, c	Travel 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	Ν

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3.	Unit cost	N/A	N/A
4.	Expenditure	N/A	N/A
13.3.13	Total Expenditure - Equipment and Furnishings	\$0	\$0
13.3.14	Grants to Central/Co-		
	<b>Central Libraries</b> : Did the system expend funds for grants to central/co-central libraries? Enter Y for Yes, N	Y	Y
lf yes, c	omplete one record for each gr	ant; if no, enter N/A for questions 1, 2,	and 3 of one repeating group.
1. 2.	Recipient Allocation	Schenectady County Public Library \$89,390	Schenectady County Public Library \$99,272
3.	Project Description (no more than 300 words)		Response has been entered
13.3.15	Total Expenditure - Grants to Central/Co-Central Libraries	\$89,390	\$99,272
13.3.16	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)	\$89,390	\$99,272
13.3.17	Cash Balance at the		
	<b>Opening of the Fiscal Year</b> NOTE: The opening balance must be the same as the closing balance of the previous year.	r 99,320.00	99,270.00
13.3.18	Total Allocation from 2020 - 2021 State Aid:	\$96,762	\$99,322
13.3.19	Total Available Before Expenditures (total 13.3.17 + 13.3.18)	\$196,082	\$198,592
13.3.20	Cash Balance at the end of the Current Fiscal Year (total 13.3.18 + 13.3.17 - 13.3.16)	106,692.00	99,320.00
13.3.21	<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.	Central Library Services were provided according to the Central Library plan. Grants were reduced due to the 20% aid withholding.	Response has been entered.

Coordinated Outreach Library Services Aid

COORDINATED OUTREACH LIBRARY SERVICES AID

StatutoryEducation Law § 273(1)Reference:(h)CommissionersDotulations 90.3

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13.4.1-1	13.4.1-13.4.2 <b>Professional Salaries:</b> Indicate total FTE and salaries for all professional system employees.				
13.4.1	Total Full-Time Equivalents (FTE)	.4	1		
13.4.2	Total Expenditure for Professional Salaries	\$31,747	\$76,732		
13.4.3-1	3.4.4 Other Staff Salaries: In	dicate total FTE and salaries for all oth	ner system employees.		
13.4.3	Total Full-Time Equivalents (FTE)	0	N/A		
13.4.4	Total Expenditure for Other Staff Salaries	\$0	N/A		
13.4.5	Employee Benefits: Indicate the total expenditures for all system employee benefits.	\$0	\$0		
13.4.6	<b>Purchased Services:</b> Did the system expend funds for purchased services? Enter Y for Yes, N for No.	Ν	Ν		

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	N/A
2.	Provider of Services	N/A	N/A
3.	Expenditure	N/A	N/A
13.4.7	Total Expenditure - Purchased Services	\$0	\$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.	Y	Ν

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	Books and other print materials	N/A
2.	Expenditure	\$1,044	N/A
13.4.9	Total Expenditure - Supplies and Materials	1,044	0
13.4.10	<b>Travel Expenditures:</b> 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	Ν	Ν

	category.		
lf yes, co	omplete one record for each typ	be of travel; if no, enter N/A for question	ns 1 and 2.
1.	Type of Travel	N/A	N/A
2.	Expenditure	N/A	N/A
13.4.11	Total Expenditure - Travel	\$0	\$0
	Equipment and		
	Furnishings: Did the system	1	
	expend funds for equipment		
	and furnishings with a unit	Ν	Ν
	cost of \$5,000 or more and having a useful life of more		
	than one year. Enter Y for		
	Yes, N for No.		
lf yes, co repeatin		be of item purchased; if no, enter N/A f	or questions 1, 2, 3, and 4 of one
1.	Type of item	N/A	N/A
2.	Quantity	N/A	N/A
3.	Unit Cost	N/A	N/A
4.	Expenditure	N/A	N/A
13.4.13	Total Expenditure -		
	Equipment and	\$0	\$0
	Furnishings		
13.4.14	Did the system expend funds		
	on grants to member	Ν	Ν
	libraries? Enter Y for Yes, N for No.		
lf yes, co		ant; if no, enter N/A for questions 1, 2,	and 3 of one repeating group.
1.	Recipient	N/A	N/A
2.	Allocation	N/A	N/A
3.	Description of Project		
13.4.15	Total Expenditure - Grants to	\$0	<b>0</b> 0
	Member Libraries	\$0	\$0
13.4.16	Total Expenditure (total		
	13.4.2, 13.4.4, 13.4.5, 13.4.7,	\$32,791	\$76,732
	13.4.9, 13.4.11, 13.4.13, and 13.4.15)		
	,		
13.4.17	Cash Balance at the		
	<b>Opening of the Fiscal Year</b> NOTE: The opening balance		
	must be the same as the	\$0	\$ <i>0</i>
	closing balance of the		
	previous year.		
13.4.18	Total Allocation from 2020	\$74,755	\$76,732
	- 2021 State Alu.		F - , -
13.4.19	Total Available Before Expenditures (total 13.4.17 +	\$74 755	\$76,732
	13.4.18)	÷,. 00	ψ. 0,10L
13.4.20	Cash Balance at the End		
	of the Current Fiscal Year	\$41,964	\$0
	(total 13.4.18 + 13.4.17 -	$\psi = 1, \forall \psi = 1$	φυ
	13.4.16)		
12/01	Einal Narrativa: Drovida a	The Outroach Coordinator position	

IJ.4.2I	brief narrative, no more than five hundred (500) words, describing the major activities	was vacant for most of the year. Professional salaries is part of two employees who filled in with Outreach duties while the position	Response has been entered.
	Aid Funds.	was vacant.	

Services to County Jails Aid

### SERVICE TO COUNTY JAILS (INTERINSTITUTIONAL) AID

Statutory	Education Law §
Reference:	285(2)

The intent of the Services to County Jails Program is to provide basic reading materials for those individuals who are incarcerated short term in county jails across the State. Examples of appropriate spending include books and magazine / newspaper subscriptions which are acceptable to the institution (Supplies & Materials), as well as programs such as Job Information and other topics directly relevant to the county jail inmate's needs (Purchased Services).

13.5.1 Purchased Services: Did

the system expend funds for purchased services? Enter Y for Yes, N for No.

Ν

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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. 2. 3.	Expenditure Category Provider of Services Expenditure	N/A N/A N/A	N/A N/A N/A
13.5.2	Total Expenditure - Purchased Services	\$0	\$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	Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	Books and other print materials
2.	Expenditure	\$10	\$4,977
13.5.4	Total Expenditure - Supplies and Materials	\$10	\$5,145
13.5.5	Total Expenditure (total 13.5.2, and 13.5.4)	10.00	5,145.00
1356	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.	\$315	\$1,455
13.5.7	Total Allocation from 2020 - 2021 State Aid	\$3,902	\$4,005
13.5.8	Total Available Before Expenditures (total 13.5.6 + 13.5.7)	\$4,217	\$5,460
13.5.9	Cash Balance at the End of the Current Fiscal Year (total 13.5.7 + 13.5.6 - 13.5.5)	\$4,207	\$315
13.5.10	<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.	Because the Outreach position was vacant, and jails were not accepting new materials due to COVID, we had very little activity in 2020. We are working on getting back to normal in 2021	Response has been entered.

#### State Correctional Aid

#### THE FOLLOWING QUESTIONS ARE FOR SYSTEMS WITH STATE CORRECTIONAL FACILITIES ONLY

#### STATE CORRECTIONAL FACILITIES AID

	Statutory Reference:	Education Law § 285 (1) Commissioners Regulations 90.14 The amount provided in Education La per inmate. Please see the State Con Program Guidelines at www.nysl.nysed.gov/libdev/outreach/ for more information.	rrections
13.6.1-1	3.6.2 <b>Professional Salaries:</b>	Indicate total FTE and salaries for all	system professional employees.
13.6.1	Total Full-Time Equivalents (FTE)	0	N/A
13.6.2	Total Expenditure for Professional Salaries	\$0	N/A
13.6.3-1	3.6.4 Other Staff Salaries: In	dicate total FTE and salaries for all oth	her system employees.
13.6.3	Total Full-Time Equivalents (FTE)	0	N/A
13.6.4	Total Expenditure for Other Staff Salaries	\$0	N/A
13.6.5	Employee Benefits: Indicate the total expenditures for all system employee benefits.	\$0	N/A
13.6.6	<b>Purchased Services:</b> Does the system expend funds for purchased services? Enter Y for Yes, N for No.	Ν	Y

Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements

онны на опозеть люо рівазе зве пнимицаї повновного тог впезе чивацопо тог алу типитеї течительства.

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	Consultant fees/professional fees
2.	Provider of Services	N/A	Susanna Risley
3.	Expenditure	N/A	\$3,600
13.6.7	Total Expenditure - Purchased Services	0	4,764
13.6.8	<b>Supplies and Materials:</b> Did the system expend funds for supply items, postage, library materials, or equipment and furnishings	Ν	Y
	with a unit cost less than \$5,000? Enter Y for Yes, N for No.		

No. Note: For questions which include a choice of "Other" in a drop-down menu, please add a Note of explanation when "Other" is chosen. Also please see individual instructions for these questions for any further requirements.

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	N/A	Books and other print materials
2.	Expenditure	N/A	\$1,331
13.6.9	Total Expenditure - Supplies and Materials	\$0	\$1,387
13.6.10	<b>Travel Expenditures:</b> Did the system expend funds for travel? Enter Y for Yes, N for No.	Ν	Ν
If yoo	malata and record for each tur	a of itam purchased; if no optor NI/A f	or quantiana 1 and 2 of ana rangating

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	N/A
2.	Expenditure	N/A	N/A

13.6.11	<b>Total Expenditure - Travel</b>	\$0	\$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.	Ν	Ν

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	N/A
2.	Quantity	N/A	N/A
3.	Unit Cost	N/A	N/A
4.	Expenditure	N/A	N/A

13.6.13			
	Total Expenditure - Equipment and	0.00	0.00
13.6.14	<b>Futurieshipgen</b> 13.6.2, 13.6.4, 13.6.5, 13.6.7, 13.6.9, 13.6.11, and 13.6.13)	\$0	\$6,151
13.6.15	Cash Balance at the Opening of the Fiscal Year:		
	NOTE: The opening balance must be the same as the closing balance of the previous year.		\$4,529
13.6.16	Total Allocation from 2020 - 2021 State Aid:	\$6,189	\$6,353
13.6.17	Total Available Before Expenditures (total 13.6.15 + 13.6.16)	\$10,920	\$10,882
13.6.18	Cash Balance at the End of the Current Fiscal Year (total 13.6.16 + 13.6.15 - 13.6.14)	\$10,920	\$4,731
13.6.19	<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	Because the Outreach position was vacant and the facility was not accepting any materials or programs due to COVID, there was no activity in 2020. We are working on getting back to normal in 2021	Response has been entered.

# 14. Summary of Library System Accomplishments

Using the goals from Section 4 in the approved 2017-2021 System Plan of Service, **BRIEFLY** describe the final results of <u>each element</u> for Year 4 (2020).

14.1	Element 1: Resource Sharing - Results	E-books, e-audio, CD audio and DVDs are purchased and shared among the member libraries. Rotating collections are maintained by the system for the members including Large Print, graphic novels, children's and teen titles, and holiday books. Full service ILS maintained and used by all members Technology service including computer support and network maintained for all locations	
14.2	Element 2: Special Client Groups - Results	Delivery made to every open location, Monday - Friday facilitated within the system and with outside agencies Facilitated Adult Literacy Projects at 1 member library Coordinate with social service agencies in four counties Work with 3 county jails and the Hale Creek correctional Facility. Coordinate the Summer Reading program for member libraries Helped members with early literacy services including 1000 Books Before Kindergarten and Picture Book City. Coordinated Science @ Your Library programs for member libraries	

14.3	Element 3: Professional Development and Continuing Education - Results	All member libraries have staff participate in CE programs/workshops Assist member library staff with attending the annual NYLA conference and other CE opportunities	Response has been entered.
14.5	Element 5: Consulting and Development Services - Results	Member libraries assisted with a wide variety of governance, management and library operations. Assist member libraries with the state annual report. Computers and other technology purchases done in bulk for all members	r
14.6	Element 6: Coordinated Services - Results	Coordinate orders for supplies acquired for members. System provides computer disc maintenance and die-cuts to members. Supplies - paper, CD cases etc purchased in bulk	Response has been entered.
14.7	Element 7: Awareness and Advocacy - Results	System coordinates member participation in statewide advocacy efforts. System works with all libraries and assisted 4 libraries on local funding issues Developed grant program to assist members with advocacy	Response has been entered.
14.8	Element 8: Communication	System coordinates Directors'	
	among Member Libraries and/or Branch Libraries - Results	Council meetings. System coordinates group discussions among members on variety of topics including collection development, purchasing & processing, circulation etc. and/or policies and children's services. Maintain system blog and	Response has been entered.
14.9	Element 9: Cooperative Efforts with Other Library Systems - Results	Facebook pages to share information MVLS and SALS maintain a shared ILS and computer services, benefiting all member libraries Work regularly with UHLS and CDLC on resource sharing, adult and youth services	
14.10	Element 10: Construction - Results	Four member libraries assisted with new construction applications. Five ongoing projects were assisted with SHPO, bidding and other issues	Response has been entered.
14.11	Element 11: Central Library - Results	Central Library Advisory Committee meets several times to set parameters for spending CBA and CLDA Reporting mechanism developed to track CBA purchases New CLDA grant process developed. Central Library holds system workshop.	Response has been entered.
14.12	Element 12: Direct Access - Results	System worked with residents in the un-served area of Broadalbin to explore the formation of a new library All but 7% or system population is served by a member library through	Response has been entered.

charter or contract.

14.13	Element 13: Other Goal(s) - Results	The Foundation for Mohawk Valley Libraries raised funding for libraries with grants awarded for advocacy, technology and programs. NYSCA grant provides adult book discussion programs at member libraries. Other grants for assisting libraries with adult programming are explored.	Response has been entered.
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# 15. Current system URL's

15.1	System Home Page URL	www.mvls.info	www.mvls.info
15.2	URL of Current List of Members	www.mvls.info/members/	www.mvls.info/members/
15.3	URL of Current Governing Bylaws	www.mvls.info/wp- content/uploads/2015/04/MVLS- BYLAWS-Rev-10-15-2015.pdf	https://www.mvls.info/wp- content/uploads/2015/04/MVLS- BYLAWS-Rev-10-15-2015.pdf
15.4	URL of Evaluation Form	www.mvls.info/wp- content/uploads/2016/04/Survey- 2016-final.pdf	https://www.mvls.info/wp- content/uploads/2016/04/Survey- 2016-final.pdf
15.5	URL of Evaluation Results	hwww.mvls.info/wp- content/uploads/2016/04/Preliminary- Survey-Summary.pdf	https://www.mvls.info/wp- content/uploads/2016/04/Preliminary- Survey-Summary.pdf
15.6	URL of Central Library Plan	www.mvls.info/wp- content/uploads/2016/12/Central- Library-Plan-2017.pdf	https://www.mvls.info/wp- content/uploads/2016/12/Central- Library-Plan-2017.pdf
15.7	URL of Direct Access Plan	www.mvls.info/wp- content/uploads/2016/12/MVLS- 2017-Free-Direct-Access-Plan.pdf	https://www.mvls.info/wp- content/uploads/2016/12/MVLS- 2017-Free-Direct-Access-Plan.pdf

# 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
ASSU	RANCE	
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 "Annual Report" was reviewed and accepted by the System Board/Council on (date - mm/dd/yyyy)	04/16/2020
APPRO	<b>DVAL</b> (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	08/31/2020

approved by the ivew FOIK State Library on (date mm/dd/yyyy).

# **Suggested Improvements**

Library System Mohawk Valley Library Association
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. When
providing feedback, if
applicable please indicate the

question number each comment/suggestion refers

to. Thank You!

Mohawk Valley Library Association Eric Trahan/Joe Sherry

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