Annual Report For Public And Association Libraries - 2016

1. GENERAL LIBRARY INFORMATION

Report all information in Part 1 as of December 31, 2016, except for questions related to the current library director/manager (questions 1.37 through 1.45).

1.1	Library ID Number	_____
1.2	Library Name	_____
1.3	Name Status (State use only)	_____
1.4	Structure Status (State use only)	_____
1.5	Community	_____
1.6	Beginning Fiscal Reporting Year	_____
1.7	Ending Fiscal Reporting Year	_____
1.8	Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?	_____
1.9	If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	_____
1.10	Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	_____
1.11	Beginning Local Fiscal Year	_____
1.12	Ending Local Fiscal Year	_____
1.13	Address Status	_____
1.14	Street Address	_____
1.15	City	_____
1.16	Zip Code	_____
1.17	Mailing Address	_____
1.18	City	_____
1.19	Zip Code	_____
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	_____
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	_____
1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	_____
1.23	Library Home Page URL (Enter N/A if no home page URL)	_____
1.24	Population Chartered to Serve (per 2010 Census)	_____
1.25	Indicate the type of library as stated in the library's charter (select one):	_____
1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	_____
1.27	During the reporting year, has there been any change to the library's legal service area boundaries? Changes must be the result of a Regents charter action. Answer Y for Yes, N for No.	_____
1.28	Indicate the type of charter the library currently holds (select one):	_____
1.29	Date the library was granted its absolute charter or the date of the provisional charter if the library does not have an absolute charter	_____
1.30	Date the library was last registered	_____
1.31	Federal Employer Identification Number	_____
1.32	County	_____

1.33	School District	_____
1.34	Town/City	_____
1.35	Library System	_____

THESE QUESTIONS ARE FOR NYC LIBRARIES ONLY. PLEASE PROCEED TO THE NEXT QUESTION.

1.36a	President/CEO Name	_____
1.36b	President/CEO Phone Number	_____
1.36c	President/CEO Email	_____

NOTE: For questions 1.37 through 1.45, report all information for the <u>current</u> library director/manager.

1.37	Title of Library Director/ Manager (select one):	_____
1.38	First Name of Library Director/Manager	_____
1.39	Last Name of Library Director/Manager	_____
1.40	NYS Public Librarian Certification Number	_____
1.41	What is the highest education level of the library manager/director?	_____
1.42	If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science?	_____
1.43	Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff member without an active certificate in a state note.	_____
1.44	E-mail Address of the Director/Manager	_____
1.45	Fax Number of the Director/Manager	_____
1.46	Is the library a member of the New York State and Local Retirement System?	_____
1.47	Does the library charge fees for library cards to people residing outside the system's service area?	_____
1.48	Was all or part of the library's funding subject to a public vote(s) held during Calendar Year 2016? (Please respond even if the vote was unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote from each funding source. If no, go to question 1.49.	_____
1.	Name of municipality or district holding the public vote	_____
2.	Indicate the type of municipality or district holding the public vote	_____
3.	Date the vote was held (mm/dd/2016)	_____
4.	Was the vote successful? Y/N	_____
5.	What type of public vote was it?	_____
6a.	Most recent prior year approved appropriation from a public vote:	_____
6b.	Proposed increase in appropriation as a result of the vote held on the date reported in question number 3:	_____
6c.	Total proposed appropriation (sum of 6a and 6b):	_____

This question should only be answered if "No" was answered in Q1.48 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.

1.49	Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2016) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.50.	_____
1.	Name of municipality or district holding the public vote	_____
2.	Indicate the type of municipality or district holding the public vote	_____
3.	Date the last successful vote was held (mm/dd/yyyy)	_____
4.	What type of public vote was it?	_____

5.   What was the total dollar amount of the appropriation from tax dollars resulting from the last successful vote?   _____

1.50   Does the reporting library 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 record for *each* contract. If no, go to question 1.51.   _____

1.   Name of contracting municipality or district   _____

2.   Is this a written contractual agreement?   _____

3.   Population of the geographic area served by this contract   _____

4.   Dollar amount of contract   _____

5.   Enter the appropriate code for range of services provided (select one):   _____

1.51   For the reporting year, has the library experienced any unusual circumstance(s) that affected the statistics reported (e.g., natural disaster, fire, closed for renovations, massive weeding of collection, etc.)? If yes, please annotate explaining the circumstance(s) and the impact on the library using the <u>Note</u>; if no, please go to Part 2, Library Collection.   _____

2. LIBRARY COLLECTION

Report holdings, additions, and subscriptions as of the end of the fiscal year reported in Part 1. Please click <u>here</u> to read general instructions before completing this section.

This section of the survey (2.1-2.22) collects data on selected types of materials.

It does not cover all materials (i.e., microforms, loose sheet music, maps, and pictures) for which expenditures are reported under Print Materials Expenditures, Electronic Materials Expenditures, and Other Materials Expenditures (questions 12.6, 12.7 and 12.8). Under this category report only items that have been purchased, leased or licensed by the library, a consortium, the state library, a donor or other person or entity. Included items must only be accessible with a valid library card or at a physical library location; inclusion in the catalog is not required. Do not include items freely available without monetary exchange. Do not include items that are permanently retained by the patron; count only items that have a set circulation period where it is available for their use. Count electronic materials at the administrative entity level; do not duplicate numbers at each branch.

PRINT MATERIALS

Cataloged Books

2.1   Adult Fiction Books   _____

2.2   Adult Non-fiction Books   _____

2.3   Total Adult Books (Total questions 2.1 & 2.2)   _____

2.4   Children's Fiction Books   _____

2.5   Children's Non-fiction Books   _____

2.6   Total Children's Books (Total questions 2.4 & 2.5)   _____

2.7   Total Cataloged Books (Total questions 2.3 & 2.6)   _____

Other Print Materials

2.8   Total Uncataloged Books   _____

2.9   Total Print Serials   _____

2.10   All Other Print Materials   _____

2.11   Total Other Print Materials (Total questions 2.8 through 2.10)   _____

2.12   Total Print Materials (Total questions 2.7 and 2.11)   _____

ALL OTHER MATERIALS

Electronic Materials

2.13	Electronic Books	_____
2.14	Local Electronic Collections	_____
2.15	NOVELNY Electronic Collections	_____
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	_____
2.17	Audio - Downloadable Units	_____
2.18	Video - Downloadable Units	_____
2.19	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, scores and maps.)	_____
2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	_____

Non-Electronic Materials

2.21	Audio - Physical Units	_____
2.22	Video - Physical Units	_____
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	_____
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	_____
2.25	**GRAND TOTAL HOLDINGS** (Total questions 2.12, 2.20 and 2.24)	_____

CURRENT SERIAL SUBSCRIPTIONS

| 2.26 | Current Print Serial Subscriptions | _____ |

ADDITIONS TO HOLDINGS - Do not subtract withdrawals or discards.

2.27	Cataloged Books	_____
2.28	All Other Print Materials	_____
2.29	Electronic Materials	_____
2.30	All Other Materials	_____
2.31	Total Additions (Total questions 2.27 through 2.30)	_____

3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Report all information on questions 3.1 through 3.27 as of the end of the fiscal year reported in Part 1; report information on questions 3.28 through 3.79 for the 2016 calendar year. Please click here to read general instructions before completing this section.

Please report information on LIBRARY USE as of the end of the fiscal year reported in Part 1.

LIBRARY USE

3.1	Library visits (total annual attendance)	_____
3.2	Registered resident borrowers	_____
3.3	Registered non-resident borrowers	_____

Please report information on WRITTEN POLICIES as of 12/31/16.

WRITTEN POLICIES (Answer Y for Yes, N for No)

3.4	Does the library have an open meeting policy?	_____
3.5	Does the library have a policy protecting the confidentiality of library records?	_____
3.6	Does the library have an Internet use policy?	_____
3.7	Does the library have a disaster plan?	_____
3.8	Does the library have a board-approved conflict of interest policy?	_____
3.9	Does the library have a board-approved whistle blower policy?	_____

Please report information on ACCESSIBILITY as of 12/31/16.

ACCESSIBILITY (Answer Y for Yes, N for No)/b>

3.10   Does the library provide service to persons who cannot visit the library (homebound persons, persons in nursing homes, persons in jail, etc.)?   _____

3.11   Does the library have assistive devices for persons who are deaf and hearing impaired (TTY/TDD)?   _____

3.12   Does the library have large print books?   _____

3.13   Does the library have assistive technology for the blind and visually impaired?   _____

3.14 - If so, what do you have?

        screen reader, such as JAWS or Windoweyes   _____

        refreshable Braille keyboard   _____

        screen magnification software, such as Zoomtext   _____

        electronic scanning and reading software, such as OpenBook   _____

Please report information on LIBRARY SPONSORED PROGRAMS as of the end of the fiscal year reported in Part 1.

LIBRARY SPONSORED PROGRAMS

3.15   Adult Program Sessions   _____

3.16   Young Adult Program Sessions   _____

3.17   Children's Program Sessions   _____

3.18   All Other Program Sessions   _____

3.19   Total Number of Program Sessions (Total questions 3.15 through 3.18)   _____

3.20   One-on-One Program Sessions   _____

3.21   Do library staff, trustees and/or volunteers reach outside of the library to promote library programs and services through group presentations, information tables and/or other similar educational activities sponsored by the Library?   _____

3.22   Adult Program Attendance   _____

3.23   Young Adult Program Attendance   _____

3.24   Children's Program Attendance   _____

3.25   All Other Program Attendance   _____

3.26   Total Program Attendance (Total questions 3.22 through 3.25)   _____

3.27   One-on-One Program Attendance   _____

Please report information on SUMMER READING PROGRAMS for the 2016 calendar year.

SUMMER READING PROGRAM

3.28 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2016 (check all that apply):

a.   Program(s) for children   _____

b.   Program(s) for young adults   _____

c.   Program(s) for Adults   _____

d.   Summer Reading at New York Libraries name and/or logo used   _____

e.   Collaborative Summer Library Program (CSLP Manual, provided through the New York State Library, used)   _____

f.   N/A   _____

3.29   Library outlets offering a summer reading program   _____

3.30   Children registered for the library's summer reading program   _____

3.31   Young adults registered for the library's summer reading program   _____

3.32   Adults registered for the library's summer reading program   _____

3.33   Total number registered for the library's summer reading program (total 3.30 + 3.31 + 3.32)   _____

3.34   Children's program sessions - Summer 2016   _____

3.35   Young adult program sessions - Summer 2016   _____

3.36   Adult program sessions - Summer 2016   _____

3.37   Total program sessions - Summer 2016 (total 3.34 + 3.35 + 3.36)   _____

3.38   Children's program attendance - Summer 2016   _____

3.39   Young adult program attendance - Summer 2016   _____

3.40   Adult program attendance - Summer 2016   _____

3.41   Total program attendance - Summer 2016 (total 3.38 + 3.39 + 3.40)   _____

COLLABORATORS

3.42   Public school district(s) and/or BOCES   _____

3.43   Non-public school(s)   _____

3.44   Childcare center(s)   _____

3.45   Summer camp(s)   _____

3.46   Municipality/Municipalities   _____

3.47   Literacy provider(s)   _____

3.48   Other (describe using the State note)   _____

3.49   Total Collaborators (total 3.42 through 3.48)   _____

Please report information on EARLY LITERACY PROGRAMS for the 2016 calendar year.

EARLY LITERACY PROGRAMS

3.50   Did the library offer early literacy programs? (Enter Y for Yes, N for No)   _____

3.51 - Indicate types of programs offered (check all that apply)

a.   Focus on birth - school entry   _____

b.   Focus on parents & caregivers   _____

c.   Combined audience   _____

d.   N/A   _____

3.52 - Number of sessions

a.   Focus on birth - school entry   _____

b.   Focus on parents & caregivers   _____

c.   Combined audience   _____

d.   N/A   _____

3.53   Total Sessions   _____

3.54 - Attendance at sessions

a.   Focus on birth - school entry   _____

b.   Focus on parents & caregivers   _____

c.   Combined audience   _____

d.   N/A   _____

3.55   Total Attendance   _____

3.56 - Collaborators (check all that apply):

a.   Childcare center(s)   _____

b.   Public School District(s) and/or BOCES   _____

c.   Non-Public School(s)   _____

d.   Health care providers/agencies   _____

e.   Other (describe using the State note)   _____

Please report information on ADULT LITERACY for the 2016 calendar year.

ADULT LITERACY

3.57   Did the library offer adult literacy programs?   _____

3.58   Total group program sessions   _____

3.59   Total one-on-one program sessions   _____

3.60   Total group program attendance   _____

3.61   Total one-on-one program attendance   _____

3.62 - Collaborators (check all that apply)

a.   Literacy NY (Literacy Volunteers of America)   _____

b.   Public School District(s) and/or BOCES   _____

c.   Non-Public Schools   _____

d.   Other (see instructions and describe using State Note)   _____

Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2016 calendar year.

PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)

3.63   Did the library offer programs for English Speakers of Other
Languages (ESOL)? (Enter Y for Yes, N for No)   _____

3.64   Children's program sessions   _____

3.65   Young adult program sessions   _____

3.66   Adult program sessions   _____

3.67   Total program sessions (total 3.64 + 3.65 + 3.66)   _____

3.68   One-on-one program sessions   _____

3.69   Children's program attendance   _____

3.70   Young adult program attendance   _____

3.71   Adult program attendance   _____

3.72   Total program attendance (total 3.69 + 3.70 + 3.71)   _____

3.73   One-on-one program attendance   _____

3.74 - Collaborators (check all that apply):

a.   Literacy NY (Literacy Volunteers of America)   _____

b.   Public School District(s) and/or BOCES   _____

c.   Non-Public School(s)   _____

d.   Other (describe using the State note)   _____

Please report information on DIGITAL LITERACY for the 2016 calendar year.

DIGITAL LITERACY

3.75   Did the library offer digital literacy programs?   _____

3.76   Total group program sessions   _____

3.77   Total one-on-one program sessions   _____

3.78   Total group program attendance   _____

3.79   Total one-on-one program attendance   _____

4. LIBRARY TRANSACTIONS

Report all transactions as of the end of the fiscal year reported in Part 1. (Please note: Internal Library usage is not considered part of circulation)

CATALOGED BOOK CIRCULATION

4.1   Adult Fiction Books   _____

4.2   Adult Non-fiction Books   _____

4.3   Total Adult Books (Total questions 4.1 & 4.2)   _____

4.4   Children's Fiction Books   _____

4.5   Children's Non-fiction Books   _____

4.6   Total Children's Books (Total questions 4.4 & 4.5)   _____

4.7   Total Cataloged Book Circulation (Total question 4.3 & 4.6)   _____

CIRCULATION OF OTHER MATERIALS

4.8   Circulation of Adult Other Materials   _____

4.9   Circulation of Children's Other Materials   _____

4.10   Total Circulation of Other Materials (Total questions 4.8, 4.9)   _____

4.11   Physical Item Circulation (Total questions 4.7 & 4.10)   _____

ELECTRONIC USE

4.12   Use of Electronic Material   _____

4.13   Successful Retrieval of Electronic Information   _____

4.14   Electronic Content Use (Total questions 4.12 & 4.13)   _____

4.15   Total Circulation of Materials (Total questions 4.11 & 4.12)   _____

4.16   Total Collection Use (Total questions 4.13 & 4.15)   _____

4.17   Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)   _____

REFERENCE TRANSACTIONS

4.18   Total Reference Transactions   _____

4.19   Does the library offer virtual reference?   _____

INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)

4.20   TOTAL MATERIALS RECEIVED   _____

INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)

4.21   TOTAL MATERIALS PROVIDED   _____

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2016.

SYSTEMS AND SERVICES

5.1   Automated circulation system?   _____

5.2   Online public access catalog (OPAC)?   _____

5.3   Electronic access to the OPAC from outside the library?   _____

5.4   Annual number of visits to the library's web site   _____

5.5   Does the library use Internet filtering software on any computer?   _____

5.6   Name of the person responsible for the library's Information Technology (IT) services   _____

5.7   IT contact's telephone number (enter 10 digits only and hit the Tab key)   _____

5.8   IT contact's email address   _____

6. STAFF INFORMATION

Note: Report figures as of the last day of the fiscal year reported in Part 1. Include the FTE for all positions

funded in the library's budget whether those positions are filled or not. This report requires conversion of part-time hours to full-time equivalents (FTE). To compute the FTE of employees in any category, take the total number of hours worked per week for all budgeted positions in that category and divide that total by the number of hours per week the library considers to be full-time. Report the FTE to two decimal places.

FTE (FULL-TIME EQUIVALENT CALCULATION)

6.1 The number of hours per workweek used to compute FTE for all paid library personnel in this section. _____

BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

6.2 Library Director (certified) _____

6.3 Vacant Library Director (certified) _____

6.4 Librarian (certified) _____

6.5 Vacant Librarian (certified) _____

6.6 Library Manager (not certified) _____

6.7 Vacant Library Manager (not certified) _____

6.8 Library Specialist/Paraprofessional (not certified) _____

6.9 Vacant Library Specialist/Paraprofessional (not certified) _____

6.10 Other Staff _____

6.11 Vacant Other Staff _____

6.12 TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10) _____

6.13 VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11) _____

SALARY INFORMATION

6.14 FTE - Entry Level Librarian (certified) _____

6.15 Salary - Entry Level Librarian (certified) _____

6.16 FTE - Library Director (certified) _____

6.17 Salary - Library Director (certified) _____

6.18 FTE - Library Manager (not certified) _____

6.19 Salary - Library Manager (not certified) _____

7. MINIMUM PUBLIC LIBRARY STANDARDS

Report all information as of December 31, 2016. Please click here to read general instructions before completing this section.

7.1 1. Is governed by board-approved written bylaws which outline the responsibilities and procedures of the library board of trustees. _____

7.2 2. Has a board-approved written long range plan of service. _____

7.3 3. Presents a board-approved annual report to the community on the library's progress in meeting its goals and objectives. _____

7.4 4. Has board-approved written policies for the operation of the library. _____

7.5 5. Presents annually to appropriate funding agencies a written board-approved budget which would enable the library to meet or exceed these standards and to carry out its long-range plan of service. _____

7.6 6. Periodically evaluates the effectiveness of the library's collection and services in meeting community needs. _____

7.7 7. Is open the minimum standard number of public service hours for population served. (see instructions) _____

8. Maintains a facility to meet community needs, including adequate:

7.8 8a. space _____

7.9 8b. lighting _____

7.10	8c. shelving	_____
7.11	8d. seating	_____
7.12	8e. restroom (see instructions)	_____

9. Provides equipment and connections to meet community needs and provide access to other library catalogs and other electronic information, including but not limited to the following:

7.13	9a. telephone	_____
7.14	9b. photocopier (see instructions)	_____
7.15	9c. microcomputer or terminal	_____
7.16	9d. printer	_____
7.17	9e. Fax capability (see instructions)	_____
7.18	10. Distributes board-approved printed information listing the library's hours open, borrowing rules, services, location and phone number.	_____
7.19	11. Employs a paid director in accordance with the provisions of Commissioner's Regulation 90.8.	_____

8. PUBLIC SERVICE INFORMATION

Report all information as of the end of the fiscal year reported in Part 1. Please click here to read general instructions before completing this section.

PUBLIC SERVICE OUTLETS - Libraries reporting main libraries, branches and bookmobiles should complete Service Outlets Information in Part 9.

8.1	Main Library	_____
8.2	Branches	_____
8.3	Bookmobiles	_____
8.4	Other Outlets	_____
8.5	TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)	_____

PUBLIC SERVICE HOURS - Report hours to two decimal places.

8.6	Minimum Weekly Total Hours - Main Library	_____
8.7	Minimum Weekly Total Hours - Branch Libraries	_____
8.8	Minimum Weekly Total Hours - Bookmobiles	_____
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)	_____
8.10	Annual Total Hours - Main Library	_____
8.11	Annual Total Hours - Branch Libraries	_____
8.12	Annual Total Hours - Bookmobiles	_____
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	_____

9. SERVICE OUTLET INFORMATION

Report all information as of the end of the fiscal year reported in Part 1. Please click here to read general instructions before completing this section.

NOTE: Libraries reporting Public Service Outlets in questions 8.1, 8.2 and 8.3 of Part 8 are required to complete this part of the Annual Report. Use this section to enter outlet information on main libraries, branches or bookmobiles. Complete one record for *each* main library, branch or bookmobile.

If you have multiple libraries, you may 1) enter the data for the Service Outlet Information section directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into Collect. If you choose to send your data for uploading, you must enter the data into the spreadsheet form available in the survey by clicking here. Complete this form and email it to bibliostat@btol.com and your data will be uploaded into Collect within 24 hours. The data will be loaded in the same order in which it appears in your file, so libraries

should be in the correct order on the spreadsheet.

1.   Outlet Name   _____
2.   Outlet Name Status   _____
3.   Street Address   _____
4.   Outlet Street Address Status   _____
5.   City   _____
6.   Zip Code   _____
7.   Phone (enter 10 digits only)   _____
8.   Fax Number (enter 10 digits only)   _____
9.   E-mail Address   _____
10. Outlet URL   _____
11. County   _____
12. School District   _____
13. Library System   _____
14. Outlet Type Code (select one):   _____
15. Public Service Hours Per Year for This Outlet   _____
16. Number of Weeks This Outlet is Open   _____
17. Does this outlet have meeting space available for public use
     (non-library sponsored programs, meetings and/or events)?   _____
18. Is the meeting space available for public use even when the outlet is
     closed?   _____
19. Total number of non-library sponsored programs, meetings and/or
     events at this outlet   _____
20. Enter the appropriate outlet code (select one):   _____
21. Who owns this outlet building?   _____
22. Who owns the land on which this outlet is built?   _____
23. Indicate the year this outlet was initially constructed   _____
24. Indicate the year this outlet underwent a major renovation costing
     $25,000 or more   _____
25. Square footage of the outlet   _____
26. Total number of Internet terminals at this outlet used by the general
     public   _____
27. Number of uses (sessions) of public Internet computers per year _____
28. Type of connection on the outlet's public Internet computers   _____
29. Maximum <u>download</u> speed of connection on the outlet's public
     Internet computers   _____
30. Maximum <u>upload</u> speed of connection on the outlet's public Internet
     computers   _____
31. Internet Provider   _____
32. WiFi Access   _____
33. Number of wireless sessions provided by the library wireless service
     per year   _____
34. Does the outlet have interactive videoconferencing capability for
     public use?   _____
35. Does the outlet have a building entrance that is physically accessible to
     a person in a wheelchair?   _____
36. Is every public part of the outlet accessible to a person in a
     wheelchair?   _____
37. *LIBID*   _____

38.	*FSCSID*	_____
39.	*Number of Bookmobiles in the Bookmobile Outlet Record*	_____
40.	*Outlet Structure Status*	_____

10. OFFICERS AND TRUSTEES

Report information about trustee meetings as of December 31, 2016. All public and association libraries are required by Education Law to hold at least four meetings a year.

BOARD MEETINGS

10.1 Total number of board meetings held during calendar year (January 1, 2016 to December 31, 2016) _____

NUMBER OF TRUSTEES AND TERMS

10.2 Does your library have a range of trustees stated in the library's charter (incorporation)? _____

10.3 If yes, what is the range? _____

10.4 If your library has a range, how many voting positions are stated in the library's current by-laws? _____

10.5 If your library does not have a range, how many voting positions are stated in the library's charter (incorporation)? _____

10.6 Does your library's charter (incorporation) state a specified term for trustees? If no, please explain in a Note. _____

10.7 If yes, what is the trustee term length, as stated in your library's charter (incorporation)? _____

BOARD MEMBER SELECTION

10.8 Enter Board Member Selection Code (select one): _____

List Officers and Board Members as of February 1, 2017. Complete one record for each board member. There must be a record for each voting position, whether filled or vacant. Do not include non-voting positions.

BOARD PRESIDENT

10.9 Title (drop-down): Mr., Mrs., Ms., Miss, Dr., The Honorable, The Reverend, Other (specify using the State note), or Vacant _____

10.10 First Name _____

10.11 Last Name _____

10.12 Mailing Address _____

10.13 City _____

10.14 Zip Code (5 digits only) _____

10.15 Phone (enter 10 digits only) _____

10.16 E-mail Address _____

10.17 Term Begins - Month _____

10.18 Term Begins - Year (yyyy) _____

10.19 Term Expires - Month _____

10.20 Term Expires - Year (yyyy) _____

10.21 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). _____

10.22 The date the Oath of Office was taken (mm/dd/yyyy) _____

10.23 The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) _____

10.24 Is this a brand new trustee? _____

1. Title of Board Member (select one): _____

2. First Name of Board Member _____
3. Last Name of Board Member _____
4. Mailing Address _____
5. City _____
6. Zip Code (5 digits only) _____
7. E-mail address _____
8. Office Held or Trustee _____
9. Term Begins - Month _____
10. Term Begins - Year (year) _____
11. Term Expires _____
12. Term Expires - Year (yyyy) _____
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). _____
14. The date the Oath of Office (mm/dd/yyyy) was taken _____
15. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) _____
16. Is this a brand new trustee? _____
1. Title of Board Member (select one): _____
2. First Name of Board Member _____
3. Last Name of Board Member _____
4. Mailing Address _____
5. City _____
6. Zip Code (5 digits only) _____
7. E-mail address _____
8. Office Held or Trustee _____
9. Term Begins - Month _____
10. Term Begins - Year (year) _____
11. Term Expires _____
12. Term Expires - Year (yyyy) _____
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). _____
14. The date the Oath of Office (mm/dd/yyyy) was taken _____
15. The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) _____
16. Is this a brand new trustee? _____
1. Title of Board Member (select one): _____
2. First Name of Board Member _____
3. Last Name of Board Member _____
4. Mailing Address _____
5. City _____
6. Zip Code (5 digits only) _____
7. E-mail address _____
8. Office Held or Trustee _____
9. Term Begins - Month _____
10. Term Begins - Year (year) _____
11. Term Expires _____
12. Term Expires - Year (yyyy) _____

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).	_____
14.	The date the Oath of Office (mm/dd/yyyy) was taken	_____
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	_____
16.	Is this a brand new trustee?	_____
1.	Title of Board Member (select one):	_____
2.	First Name of Board Member	_____
3.	Last Name of Board Member	_____
4.	Mailing Address	_____
5.	City	_____
6.	Zip Code (5 digits only)	_____
7.	E-mail address	_____
8.	Office Held or Trustee	_____
9.	Term Begins - Month	_____
10.	Term Begins - Year (year)	_____
11.	Term Expires	_____
12.	Term Expires - Year (yyyy)	_____
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).	_____
14.	The date the Oath of Office (mm/dd/yyyy) was taken	_____
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	_____
16.	Is this a brand new trustee?	_____
1.	Title of Board Member (select one):	_____
2.	First Name of Board Member	_____
3.	Last Name of Board Member	_____
4.	Mailing Address	_____
5.	City	_____
6.	Zip Code (5 digits only)	_____
7.	E-mail address	_____
8.	Office Held or Trustee	_____
9.	Term Begins - Month	_____
10.	Term Begins - Year (year)	_____
11.	Term Expires	_____
12.	Term Expires - Year (yyyy)	_____
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).	_____
14.	The date the Oath of Office (mm/dd/yyyy) was taken	_____
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	_____
16.	Is this a brand new trustee?	_____

11. OPERATING FUNDS RECEIPTS

Report financial data based on the fiscal reporting year reported in Part 1. *ROUND TO THE NEAREST*

DOLLAR. Please click here to read general instructions before completing this section.

LOCAL PUBLIC FUNDS
Specify by name the municipalities or districts which are the source of funds.

11.1   Does the library receive any local public funds? If yes, complete one record for each funding source; if no, go to question 11.3.   _____

1.   Source of Funds   _____

2.   Name of funding County, Municipality or District   _____

3.   Amount   _____

4.   Subject to public vote held in reporting year or in a previous reporting year(s).   _____

5.   Written Contractual Agreement   _____

11.2   **TOTAL LOCAL PUBLIC FUNDS**   _____

SYSTEM CASH GRANTS TO MEMBER LIBRARY

11.3   Local Library Services Aid (LLSA)   _____

11.4   Central Library Aid (CLDA and/or CBA)   _____

11.5   Additional State Aid received from the System   _____

11.6   Federal Aid received from the System   _____

11.7   Other Cash Grants   _____

11.8   **TOTAL SYSTEM CASH GRANTS** (Add Questions 11.3, 11.4, 11.5, 11.6 and 11.7)   _____

OTHER STATE AID

11.9   State Aid other than LLSA, Central Library Aid (CLDA and/or CBA), or other State Aid reported as system cash grants   _____

FEDERAL AID FOR LIBRARY OPERATION

11.10 LSTA   _____

11.11 Other Federal Aid   _____

11.12 **TOTAL FEDERAL AID** (Add Questions 11.10 and 11.11)   _____

11.13 **CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE**   _____

OTHER RECEIPTS

11.14 Gifts and Endowments   _____

11.15 Fund Raising   _____

11.16 Income from Investments   _____

11.17 Library Charges   _____

11.18 Other   _____

11.19 **TOTAL OTHER RECEIPTS** (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18)   _____

11.20 **TOTAL OPERATING FUND RECEIPTS** (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)   _____

11.21 **BUDGET LOANS**   _____

TRANSFERS

11.22 From Capital Fund (Same as Question 14.8)   _____

11.23 From Other Funds   _____

11.24 **TOTAL TRANSFERS** (Add Questions 11.22 and 11.23)   _____

11.25 BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2016 (Same as Question 12.40 of previous year if fiscal year has not changed)   _____

11.26 **GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE** (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.41) _____

12. OPERATING FUND DISBURSEMENTS

Report financial data based on the fiscal reporting year reported in Part 1. ROUND TO THE NEAREST DOLLAR. Please click here **to read general instructions before completing this section.**

STAFF EXPENDITURES

Salaries & Wages Paid from Library Funds

12.1	Certified Librarians	_____
12.2	Other Staff	_____
12.3	**Total Salaries & Wages Expenditures** (Add Questions 12.1 and 12.2)	_____
12.4	**Employee Benefits Expenditures**	_____
12.5	**Total Staff Expenditures (Add Questions 12.3 and 12.4)**	_____

COLLECTION EXPENDITURES

12.6	Print Materials Expenditures	_____
12.7	Electronic Materials Expenditures	_____
12.8	Other Materials Expenditures	_____
12.9	**Total Collection Expenditures** (Add Questions 12.6, 12.7 and 12.8)	_____

CAPITAL EXPENDITURES FROM OPERATING FUNDS

12.10	From Local Public Funds (71PF)	_____
12.11	From Other Funds (71OF)	_____
12.12	**Total Capital Expenditures** (Add Questions 12.10 and 12.11)	_____

OPERATION AND MAINTENANCE OF BUILDINGS

Repairs to Building & Building Equipment

12.13	From Local Public Funds (72PF)	_____
12.14	From Other Funds (72OF)	_____
12.15	**Total Repairs** (Add Questions 12.13 and 12.14)	_____
12.16	Other Disbursements for Operation & Maintenance of Buildings	_____
12.17	**Total Operation & Maintenance of Buildings** (Add Questions 12.15 and 12.16)	_____

MISCELLANEOUS EXPENSES

12.18	Office and Library Supplies	_____
12.19	Telecommunications	_____
12.20	Binding Expenses	_____
12.21	Postage and Freight	_____
12.22	Professional & Consultant Fees	_____
12.23	Equipment	_____
12.24	Other Miscellaneous	_____
12.25	**Total Miscellaneous Expenses** (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	_____
12.26	**CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE**	_____

DEBT SERVICE

Capital Purposes Loans (Principal and Interest)

12.27   From Local Public Funds (73PF)   _____

12.28   From Other Funds (73OF)   _____

12.29   **Total** (Add Questions 12.27 and 12.28)   _____

12.30   Budget Loans (Principal and Interest)   _____

12.31   Short-Term Loans   _____

12.32   **Total Debt Service** (Add Questions 12.29, 12.30 and 12.31)   _____

12.33   **TOTAL OPERATING FUND DISBURSEMENTS** (Add Questions 12.5, 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32)   _____

TRANSFERS

Transfers to Capital Fund

12.34   From Local Public Funds (76PF)   _____

12.35   From Other Funds (76OF)   _____

12.36   **Total Transfers to Capital Fund** (Add Questions 12.34 and 12.35; same as Question 13.8)   _____

12.37   **Transfer to Other Funds**   _____

12.38   **TOTAL TRANSFERS** (Add Questions 12.36 and 12.37)   _____

12.39   **TOTAL DISBURSEMENTS AND TRANSFERS** (Add Questions 12.33 and 12.38)   _____

12.40   BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2016   _____

12.41   **GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE** (Add Questions 12.39 and 12.40; same as Question 11.26)   _____

ASSURANCE

12.42   The Library operated in accordance with all provisions of Education Law and the Regulations of the Commissioner, and assures that the "Annual Report" was reviewed and accepted by the Library Board on (date - mm/dd/yyyy).   _____

FISCAL AUDIT

12.43   Last audit performed (mm/dd/yyyy)   _____

12.44   Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)   _____

12.45   Indicate type of audit (select one):   _____

CAPITAL FUND

12.46   Does the library have a Capital Fund? Enter Y for Yes, N for No. If No, stop here. If Yes, complete the Capital Fund Report.   _____

13. CAPITAL FUND RECEIPTS

Report financial data based on the fiscal year reported in Part 1. *ROUND TO THE NEAREST DOLLAR*. Please click here to read general instructions before completing this section.

REVENUES FROM LOCAL SOURCES

13.1   Revenues from Local Government Sources   _____

13.2   All Other Revenues from Local Sources   _____

13.3   **Total Revenues from Local Sources** (Add Questions 13.1 and 13.2)   _____

STATE AID FOR CAPITAL PROJECTS

13.4   State Aid Received for Construction   _____

13.5   Other State Aid   _____
13.6   **Total State Aid** (Add Questions 13.4 and 13.5)   _____
FEDERAL AID FOR CAPITAL PROJECTS
13.7   **TOTAL FEDERAL AID**   _____
INTERFUND REVENUE
13.8   Transfer from Operating Fund (Same as Question 12.36)   _____

13.9   **TOTAL REVENUES** (Add Questions 13.3, 13.6, 13.7 and 13.8)   _____
13.10   **NON-REVENUE RECEIPTS**   _____
13.11   **TOTAL CASH RECEIPTS** (Add Questions 13.9 and 13.10)   _____
13.12   BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year
        Ending 2016 (Same as Question 14.11 of previous year, if fiscal year   _____
        has not changed)
13.13   **TOTAL CASH RECEIPTS AND BALANCE** (Add Questions 13.11
        and 13.12; same as Question 14.12)   _____

14. CAPITAL FUND DISBURSEMENTS

Report financial data based on the fiscal reporting year reported in Part 1. ROUND TO THE NEAREST DOLLAR. Please click <u>here</u> to read general instructions before completing this section.

PROJECT EXPENDITURES

14.1   Construction   _____
14.2   Incidental Construction   _____
Other Disbursements
14.3   Purchase of Buildings   _____
14.4   Interest   _____
14.5   Collection Expenditures   _____
14.6   Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)   _____
14.7   **TOTAL PROJECT EXPENDITURES** (Add Questions 14.1, 14.2
        and 14.6)   _____
14.8   **TRANSFER TO OPERATING FUND** (Same as Question 11.22)   _____
14.9   **NON-PROJECT EXPENDITURES**   _____
14.10   **TOTAL CASH DISBURSEMENTS AND TRANSFERS** (Add
        Questions 14.7, 14.8 and 14.9)   _____
14.11   **BALANCE IN CAPITAL FUND** - Ending Balance for the Fiscal
        Year Ending 2016   _____
14.12   **TOTAL CASH DISBURSEMENTS AND BALANCE** (Add
        Questions 14.10 and 14.11; same as Question 13.13)   _____

15. CENTRAL LIBRARIES

PART 15 EXISTS FOR THE CENTRAL/CO-CENTRAL LIBRARIES ONLY. PLEASE PROCEED TO SECTION 16. FEDERAL TOTALS AND CONTINUE ON WITH YOUR SURVEY

16. FEDERAL TOTALS

All questions in Part 16 are calculated, locked fields.
Note: See instructions for definitions and calculations of each of these Federal Totals.

16.1   Total ALA-MLS   _____
16.2   Total Librarians   _____
16.3   All Other Paid Staff   _____

16.4	Total Paid Employees	_____
16.5	State Government Revenue	_____
16.6	Federal Government Revenue	_____
16.7	Other Operating Revenue	_____
16.8	Total Operating Revenue	_____
16.9	Other Operating Expenditures	_____
16.10	Total Operating Expenditures	_____
16.11	Total Capital Expenditures	_____
16.12	Print Materials	_____
16.13	Total Registered Borrowers	_____
16.14	Other Capital Revenue and Receipts	_____
16.15	Total Number of Internet Terminals Used by the General Public	_____

17. FOR NEW YORK STATE LIBRARY USE ONLY

17.1	*LIB ID*	_____
17.2	*Interlibrary Relationship Code*	_____
17.3	*Legal Basis Code*	_____
17.4	*Administrative Structure Code*	_____
17.5	*FSCS Public Library Definition*	_____
17.6	*Geographic Code*	_____
17.7	*FSCS ID*	_____
17.8	*SED CODE*	_____

SUGGESTED IMPROVEMENTS

Library Name: _____

Library System: _____

Name of Person Completing Form: _____

Phone Number: _____

I am satisfied that this resource (Collect) is meeting library needs: _____

Applying this resource (Collect) will help improve library services to the public: _____

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! _____