Tompkins County Public Library Annual Report For Public And Association Libraries - 2016

1. GENERAL LIBRARY INFORMATION

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

unceton	manager (questions 1.57 unough 1.45).	
1.1	Library ID Number	2400613230
1.2	Library Name	TOMPKINS COUNTY PUBLIC LIBRARY
1.3	Name Status (State use only)	00 (for no change from previous year)
1.4	Structure Status (State use only)	00 (for no change from previous year)
1.5	Community	Ithaca *
1.6	Beginning Fiscal Reporting Year	01/01/2016
1.7	Ending Fiscal Reporting Year	12/31/2016
1.8	Is the library now reporting on a different fiscal year than it reported on in the previous Annual Report?	No
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.	N/A
1.10	Please indicate the ending date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A
1.11	Beginning Local Fiscal Year	01/01/2016
1.12	Ending Local Fiscal Year	12/31/2016
1.13	Address Status	00 (for no change from previous year)
1.14	Street Address	101 E GREEN STREET
1.15	City	ITHACA
1.16	Zip Code	14850
1.17	Mailing Address	101 E GREEN STREET
1.18	City	ITHACA
1.19	Zip Code	14850
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	(607) 272-4557
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	(607) 272-8111
1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	scurrie@tcpl.org
1.23	Library Home Page URL (Enter N/A if no home page URL)	http://tcpl.org/
1.24	Population Chartered to Serve (per 2010 Census)	101,564
1.25	Indicate the type of library as stated in the library's charter (select one):	PUBLIC
1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	County

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	Ν
	Regents charter action. Answer Y for Yes, N for No.	
1.28	Indicate the type of charter the library currently holds (select one):	Absolute
1.29	Date the library was granted its absolute charter <u>or</u> the date of the provisional charter if the library does not have an absolute charter	06/29/1973
1.30	Date the library was last registered	01/23/1970
1.30	Federal Employer Identification Number	161098211
1.32	County	TOMPKINS
1.32	School District	Ithaca City School District
1.34	Town/City	Ithaca
1.35	•	Finger Lakes Library System
	5 5	ONLY. PLEASE PROCEED TO THE NEXT
QUEST	· · · · · · · · · · · · · · · · · · ·	
1.36a	President/CEO Name	
1.36b	President/CEO Phone Number	
1.36c	President/CEO Email	
		mation for the current library director/manager.
1.37	Title of Library Director/ Manager (select	
	one):	Ms.
1.38	First Name of Library Director/Manager	Susan
1.39	Last Name of Library Director/Manager	Currie
1.40	NYS Public Librarian Certification Number	14569
1.41	What is the highest education level of the library manager/director?	Master's Degree
1.42	If the library manager/director holds a Master's Degree, is it a Master's Degree in	Y
	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	Y
	staff member without an active certificate in a	
	Note.	
1.44	E-mail Address of the Director/Manager	scurrie@tcpl.org
1.45	Fax Number of the Director/Manager	(607) 272-8111
1.46	Is the library a member of the New York State and Local Retirement System?	Y
1.47	Does the library charge fees for library cards to people residing outside the system's service area?	Ν
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	Ν
	unsuccessful). Enter Y for Yes, N for No. If Yes, complete one record for the public vote	17
	from each funding source. If no, go to	
	question 1.49.	

1.	Name of municipality or district holding the public vote	N/A
2.	Indicate the type of municipality or district holding the public vote	N/A
3.	Date the vote was held (mm/dd/2016)	N/A
4.	Was the vote successful? Y/N	N/A
5.	What type of public vote was it?	N/A
ба.	Most recent prior year approved appropriation from a public vote:	N/A
6b.	Proposed increase in appropriation as a result of the vote held on the date reported in question number 3:	N/A
6с.	Total proposed appropriation (sum of 6a and 6b):	N/A

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.

	·	J
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.	Ν
1.	Name of municipality or district holding the public vote	N/A
2.	Indicate the type of municipality or district holding the public vote	
3.	Date the last successful vote was held (mm/dd/yyyy)	N/A
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?	N/A
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 <i>each</i> contract. If no, go to question 1.51.	Ν
1.	Name of contracting municipality or district	N/A
2.	Is this a written contractual agreement?	N/A
3.	Population of the geographic area served by this contract	N/A
4.	Dollar amount of contract	N/A
5.	Enter the appropriate code for range of	

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

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	59,326
2.2	Adult Non-fiction Books	54,044
2.3	Total Adult Books (Total questions 2.1 & 2.2)	113,370
2.4	Children's Fiction Books	36,841
2.5	Children's Non-fiction Books	24,463
2.6	Total Children's Books (Total questions 2.4 & 2.5)	61,304
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	174,674
Other P	rint Materials	
2.8	Total Uncataloged Books	0
2.9	Total Print Serials	3,318
2.10	All Other Print Materials	0
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	3,318
2.12	Total Print Materials (Total questions 2.7 and 2.11)	177,992
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Electronic Materials

2.13	Electronic Books	9,107
2.14	Local Electronic Collections	17
2.15	NOVELNY Electronic Collections	10
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	27
2.17	Audio - Downloadable Units	6,266

2.18	Video - Downloadable Units	0		
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.)	0		
2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	15,400		
Non-Ele	ctronic Materials			
2.21	Audio - Physical Units	16,335		
2.22	Video - Physical Units	16,002		
2.23	Other Non-Electronic Materials (includes films, slides, etc.)	292		
2.24	Total Other Materials Holdings (Total questions 2.21 through 2.23)	32,629		
2.25	GRAND TOTAL HOLDINGS (Total questions 2.12, 2.20 and 2.24)	226,021		
CURRE	NT SERIAL SUBSCRIPTIONS			
2.26	Current Print Serial Subscriptions	197		
ADDIT	ADDITIONS TO HOLDINGS - Do <u>not</u> subtract withdrawals or discards.			
2.27	Cataloged Books	14,939		
2.28	All Other Print Materials	0		
2.29	Electronic Materials	4,195		
2.30	All Other Materials	3,269		
2.31	Total Additions (Total questions 2.27 through 2.30)	22,403		

3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Report all information on questions 3.1 through 3.27 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.28 through 3.79 for the 2016 <u>calendar</u> year. Please click <u>here</u> 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)	369,546
3.2	Registered resident borrowers	34,090
3.3	Registered non-resident borrowers	4,667
Please re	eport 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?	Y
3.5	Does the library have a policy protecting the confidentiality of library records?	Y
3.6	Does the library have an Internet use policy?	Y
3.7	Does the library have a disaster plan?	Y

3.8 Does the library have a board-approved conflict of interest policy? Y

3.9 Does the library have a board-approved y 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 N (TTY/TDD)?
- 3.12 Does the library have large print books? Y
- 3.13 Does the library have assistive technology for Y the blind and visually impaired?

3.14 - If so, what do you have?

screen reader, such as JAWS or Windoweyes	No
refreshable Braille keyboard	No
screen magnification software, such as Zoomtext	Yes
electronic scanning and reading software, such as OpenBook	No

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	202
3.16	Young Adult Program Sessions	150
3.17	Children's Program Sessions	889
3.18	All Other Program Sessions	128
3.19	Total Number of Program Sessions (Total questions 3.15 through 3.18)	1,369
3.20	One-on-One Program Sessions	229
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?	Yes
3.22	Adult Program Attendance	10,587
3.23	Young Adult Program Attendance	3,617
3.24	Children's Program Attendance	19,024
3.25	All Other Program Attendance	229
3.26	Total Program Attendance (Total questions 3.22 through 3.25)	33,457
3.27	One-on-One Program Attendance	229

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	Yes
с.	Program(s) for Adults	Yes
d.	Summer Reading at New York Libraries name and/or logo used	Yes
e.	Collaborative Summer Library Program (CSLP Manual, provided through the New York State Library, used)	Yes
f.	N/A	No
3.29	Library outlets offering a summer reading program	1
3.30	Children registered for the library's summer reading program	3,232
3.31	Young adults registered for the library's summer reading program	122
3.32	Adults registered for the library's summer reading program	49
3.33	Total number registered for the library's summer reading program (total 3.30 + 3.31 + 3.32)	3,403
3.34	Children's program sessions - Summer 2016	273
3.35	Young adult program sessions - Summer 2016	31
3.36	Adult program sessions - Summer 2016	6
3.37	Total program sessions - Summer 2016 (total $3.34 + 3.35 + 3.36$)	310
3.38	Children's program attendance - Summer 2016	6,952
3.39	Young adult program attendance - Summer 2016	484
3.40	Adult program attendance - Summer 2016	32
3.41	Total program attendance - Summer 2016 (total 3.38 + 3.39 + 3.40)	7,468
COLLA	BORATORS	
3.42	Public school district(s) and/or BOCES	1
3.43	Non-public school(s)	1
3.44	Childcare center(s)	0
3.45	Summer camp(s)	5
3.46	Municipality/Municipalities	2
3.47	Literacy provider(s)	1
3.48	Other (describe using the State note)	19
3.49	Total Collaborators (total 3.42 through 3.48)	29
DI		

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)	Y
3.51 - In	dicate types of programs offered (check all that	apply)
a.	Focus on birth - school entry	Yes
b.	Focus on parents & caregivers	No
c.	Combined audience	Yes
		No

d.	N/A		
3.52 - 1	Number of sessions		
a.	Focus on birth - school entry	170	
b.	Focus on parents & caregivers	0	
c.	Combined audience	409	
d.	N/A	0	
3.53	Total Sessions	579	
3.54 - 4	Attendance at sessions		
a.	Focus on birth - school entry	5,231	
b.	Focus on parents & caregivers	0	
c.	Combined audience	1,138	
d.	N/A	0	
3.55	Total Attendance	6,369	
3.56 - 0	3.56 - Collaborators (check all that apply):		
a.	Childcare center(s)	Yes	
b.	Public School District(s) and/or BOCES	Yes	
c.	Non-Public School(s)	Yes	
d.	Health care providers/agencies	No	
e.	Other (describe using the State note)	Yes	
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Please report information on ADULT LITERACY for the 2016 calendar year.

ADULT LITERACY

3.57	Did the library offer adult literacy programs?	Yes
3.58	Total group program sessions	10
3.59	Total one-on-one program sessions	0
3.60	Total group program attendance	151
3.61	Total one-on-one program attendance	0
3.62 - Collaborators (check all that apply)		
a.	Literacy NY (Literacy Volunteers of America)	No
b.	Public School District(s) and/or BOCES	No
c.	Non-Public Schools	No
d.	Other (see instructions and describe using Note)	Yes

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)	Y
3.64	Children's program sessions	362
3.65	Young adult program sessions	0
3.66	Adult program sessions	19
3.67	Total program sessions (total 3.64 + 3.65 + 3.66)	381
3.68	One-on-one program sessions	0
3.69	Children's program attendance	653
3.70	Young adult program attendance	0
3.71	Adult program attendance	251

3.72	Total program attendance (total $3.69 + 3.70 + 3.71$)	904
3.73	One-on-one program attendance	0
3.74 - C	ollaborators (check all that apply):	
a.	Literacy NY (Literacy Volunteers of America)	No
b.	Public School District(s) and/or BOCES	Yes
c.	Non-Public School(s)	No
d.	Other (describe using the Note)	Yes
Please report information on DIGITAL LITERACY for the 2016 calendar year.		

DIGITAL LITERACY

3.75	Did the library offer digital literacy programs?	Y
3.76	Total group program sessions	2
3.77	Total one-on-one program sessions	83
3.78	Total group program attendance	18
3.79	Total one-on-one program attendance	84

4. LIBRARY TRANSACTIONS

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

CATALOGED BOOK CIRCULATION

4.1	Adult Fiction Books	112,342
4.2	Adult Non-fiction Books	96,956
4.3	Total Adult Books (Total questions 4.1 & 4.2)	209,298
4.4	Children's Fiction Books	194,221
4.5	Children's Non-fiction Books	39,497
4.6	Total Children's Books (Total questions 4.4 & 4.5)	233,718
4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	443,016
CIRCU	LATION OF OTHER MATERIALS	
4.8	Circulation of Adult Other Materials	199,877
4.9	Circulation of Children's Other Materials	51,665
4.10	Total Circulation of Other Materials (Total questions 4.8, 4.9)	251,542
4.11	Physical Item Circulation (Total questions 4.7 & 4.10)	694,558
ELECT	RONIC USE	
4.12	Use of Electronic Material	42,752
4.13	Successful Retrieval of Electronic Information	10,392
4.14	Electronic Content Use (Total questions 4.12 & 4.13)	53,144
4.15	Total Circulation of Materials (Total questions 4.11 & 4.12)	737,310

4.16	Total Collection Use (Total questions 4.13 & 4.15)	747,702
4.17	Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	285,383
REFEF	RENCE TRANSACTIONS	
4.18	Total Reference Transactions	33,874
4.19	Does the library offer virtual reference?	Y
INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)		
4.20	TOTAL MATERIALS RECEIVED	27,711
INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)		
4.21	TOTAL MATERIALS PROVIDED	38,528

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2016.

SYSTEMS AND SERVICES

5.1	Automated circulation system?	Y
5.2	Online public access catalog (OPAC)?	Υ
5.3	Electronic access to the OPAC from outside the library?	Y
5.4	Annual number of visits to the library's web site	221,846
5.5	Does the library use Internet filtering software on any computer?	Ν
5.6	Name of the person responsible for the library's Information Technology (IT) services	Charlie Young
5.7	IT contact's telephone number (enter 10 digits only and hit the Tab key)	(607) 272-4557
5.8	IT contact's email address	TCPL, 101 E Green St, Ithaca, NY 14850

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 35 this section.

BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

6.2	Library Director (certified)	1
6.3	Vacant Library Director (certified)	0
6.4	Librarian (certified)	12.53
6.5	Vacant Librarian (certified)	0
6.6	Library Manager (not certified)	0
6.7	Vacant Library Manager (not certified)	0
6.8	Library Specialist/Paraprofessional (not certified)	3

6.9	Vacant Library Specialist/Paraprofessional (not certified)	0
6.10	Other Staff	25.26
6.11	Vacant Other Staff	0
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	41.79
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11)	0.00
SALARY INFORMATION		
6.14	FTE - Entry Level Librarian (certified)	1
6.15	Salary - Entry Level Librarian (certified)	\$49,540
6.16	FTE - Library Director (certified)	1
6.17	Salary - Library Director (certified)	\$110,188
6.18	FTE - Library Manager (not certified)	0
6.19	Salary - Library Manager (not certified)	\$0

7. MINIMUM PUBLIC LIBRARY STANDARDS

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

T T	8		
7.1	1. Is governed by board-approved written bylaws which outline the responsibilities and procedures of the library board of trustees.	Y	
7.2	2. Has a board-approved written long range plan of service.	Y	
7.3	3. Presents a board-approved annual report to the community on the library's progress in meeting its goals and objectives.	Y	
7.4	4. Has board-approved written policies for the operation of the library.	Y	
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.	Y	
7.6	6. Periodically evaluates the effectiveness of the library's collection and services in meeting community needs.	g Y	
7.7	7. Is open the minimum standard number of public service hours for population served. (see instructions)	Y	
8. Maint	tains a facility to meet community needs, includ	ling adequate:	
7.8	8a. space	Y	
7.9	8b. lighting	Y	
7.10	8c. shelving	Y	
7.11	8d. seating	Y	
7.12	8e. restroom (see instructions)	Y	
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	Y
7.14	9b. photocopier (see instructions)	Y
7.15	9c. microcomputer or terminal	Y

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

8. PUBLIC SERVICE INFORMATION

Report all information 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.

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

8.1	Main Library	1
8.2	Branches	0
8.3	Bookmobiles	0
8.4	Other Outlets	2
8.5	TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)	3
PUBLIC	C SERVICE HOURS - Report hours to two dec	imal places.
8.6	Minimum Weekly Total Hours - Main Library	60.00
8.7	Minimum Weekly Total Hours - Branch Libraries	0.00
8.8	Minimum Weekly Total Hours - Bookmobiles	0.00
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)	60.00
8.10	Annual Total Hours - Main Library	3,041.00
8.11	Annual Total Hours - Branch Libraries	0.00
8.12	Annual Total Hours - Bookmobiles	0.00
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	3,041.00

9. SERVICE OUTLET INFORMATION

Report all information 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.

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.

<u>If you have multiple libraries</u>, 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 <u>here</u>. Complete this form and email it to <u>bibliostat@btol.com</u> 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	Tompkins County Public Library
2.	Outlet Name Status	00 (for no change)
3.	Street Address	101 EAST GREEN STREET
4.	Outlet Street Address Status	00 (for no change)
5.	City	ITHACA
6.	Zip Code	14850
7.	Phone (enter 10 digits only)	(607) 272-4557
8.	Fax Number (enter 10 digits only)	(607) 272-8111
9.	E-mail Address	scurrie@tcpl.org
10.	Outlet URL	http://tcpl.org
11.	County	Tompkins
12.	School District	Ithaca City School District
13.	Library System	Finger Lakes Library System
14.	Outlet Type Code (select one):	CE
15.	Public Service Hours Per Year for This Outlet	3,041
16.	Number of Weeks This Outlet is Open	52
17.	Does this outlet have meeting space available for public use (non-library sponsored programs, meetings and/or events)?	Y
18.	Is the meeting space available for public use even when the outlet is closed?	Y
19.	Total number of non-library sponsored programs, meetings and/or events at this outlet	324
20.	Enter the appropriate outlet code (select one):	LRF
21.	Who owns this outlet building?	County
22.	Who owns the land on which this outlet is built?	County
23.	Indicate the year this outlet was initially constructed	2000
24.	Indicate the year this outlet underwent a major renovation costing \$25,000 or more	2000
25.	Square footage of the outlet	60,888
26.	Total number of Internet terminals at this outlet used by the general public	34
27.	Number of uses (sessions) of public Internet computers per year	45,973
28.	Type of connection on the outlet's public Internet computers	Fiber
29.	Maximum <u>download</u> speed of connection on the outlet's public Internet computers	6 Greater than or equal to 6 mbps and less than 10 mbps
30.	Maximum <u>upload</u> speed of connection on the outlet's public Internet computers	6 Greater than or equal to 6 mbps and less than 10 mbps
31.	Internet Provider	Clarity Connect
32.	WiFi Access	Password required
33.	Number of wireless sessions provided by the library wireless service per year	40,230
34.	Does the outlet have interactive videoconferencing capability for public use?	Ν

35.	Does the outlet have a building entrance that is physically accessible to a person in a wheelchair?	Y
36.	Is every public part of the outlet accessible to a person in a wheelchair?	Y
37.	LIBID	2400613230
38.	FSCSID	NY0160
39.	Number of Bookmobiles in the Bookmobile Outlet Record	0
40.	Outlet Structure Status	00 (for no change from previous year)

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)	11
NUMB	ER OF TRUSTEES AND TERMS	
10.2	Does your library have a range of trustees stated in the library's charter (incorporation)?	Yes
10.3	If yes, what is the range?	5 to 15
10.4	If your library has a range, how many voting positions are stated in the library's current by-laws?	15
10.5	If your library does not have a range, how many voting positions are stated in the library's charter (incorporation)?	15
10.6	Does your library's charter (incorporation) state a specified term for trustees? If no, please explain in a Note.	Yes
10.7	If yes, what is the trustee term length, as stated in your library's charter (incorporation)?	3

BOARD MEMBER SELECTION

10.8 Enter Board Member Selection Code (select one): A - board members are appointed by municipality(ies)

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 Note), or Vacant	v Mr.
10.10	First Name	Bruce
10.11	Last Name	Ryan
10.12	Mailing Address	44 N Lansing School Rd
10.13	City	Groton
10.14	Zip Code (5 digits only)	13073
10.15	Phone (enter 10 digits only)	(607) 533-3587
10.16	E-mail Address	ryanb@tc3.edu

10.17	Term Begins - Month	January
10.18	Term Begins - Year (yyyy)	2016
10.19	Term Expires - Month	December
10.20	Term Expires - Year (yyyy)	2018
10.21	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	Yes
	appointed to complete the remainder of a tarm of a transformed their position.	
10.22	term of a trustee who resigned their position). The date the Oath of Office was taken	
10.22	(mm/dd/yyyy)	01/26/2016
10.23	The date the Oath of Office was filed with	
10.25	town or county clerk (mm/dd/yyyy)	01/27/2016
10.24	Is this a brand new trustee?	Ν
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Thompson
2. 3.	Last Name of Board Member	Terry
<i>3</i> . 4.	Mailing Address	145 Brown Rd
т . 5.	City	West Danby
5. 6.	Zip Code (5 digits only)	14883
0. 7.	E-mail address	thompsonterry@yahoo.com
7. 8.	Office Held or Trustee	Financial Officer
o. 9.		February
9. 10.	Term Begins - Month	2016
	Term Begins - Year (year)	December
11. 12	Term Expires	2017
12.	Term Expires - Year (yyyy)	2017
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was	
	appointed to complete the remainder of a	No
	term of a trustee who resigned their position).	
14.	The date the Oath of Office (mm/dd/yyyy)	02/23/2016
	was taken	02/25/2010
15.	The date the Oath of Office was filed with	03/11/2016
	town or county clerk (mm/dd/yyyy)	
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Kristine
3.	Last Name of Board Member	Altucher
4.	Mailing Address	708 Mitchell St
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	altuchk@tc3.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2017
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	Yes
	appointed to complete the remainder of a term of a trustee who resigned their position).	
	term of a dastee who resigned then position).	

14.	The date the Oath of Office (mm/dd/yyyy) was taken	02/23/2016
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	03/11/2016
16.	Is this a brand new trustee?	Ν
10.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Kenneth
2. 3.	Last Name of Board Member	McClane
4.	Mailing Address	114 Glenside Rd
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	kam6@cornell.edu
8.	Office Held or Trustee	Vice President
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2017
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2019
13.	Is this trustee serving a full term? If No, add	
13.	a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	2/14/17
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	2/14/17
16.	Is this a brand new trustee?	Ν
10.		11
10.	Title of Board Member (select one):	Ms.
1.	Title of Board Member (select one):	Ms.
1. 2.	Title of Board Member (select one): First Name of Board Member	Ms. Rochelle
1. 2. 3.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member	Ms. Rochelle Proujansky
1. 2. 3. 4.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address	Ms. Rochelle Proujansky 333 Coddington Rd
1. 2. 3. 4. 5.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca
1. 2. 3. 4. 5. 6.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only)	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850
1. 2. 3. 4. 5. 6. 7.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com
1. 2. 3. 4. 5. 6. 7. 8.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee
1. 2. 3. 4. 5. 6. 7. 8. 9.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January
1. 2. 3. 4. 5. 6. 7. 8. 9. 10.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year)	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015
 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy)	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017 Yes
 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 	 Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Expires Term Expires Term Expires - Year (year) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy) was taken 	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017 Yes 01/27/2015
 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 	 Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy) was taken The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) 	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017 Yes 01/27/2015 01/30/2015
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16.	Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy) was taken The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee?	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017 Yes 01/27/2015 01/30/2015 N
 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 1. 	 Title of Board Member (select one): First Name of Board Member Last Name of Board Member Mailing Address City Zip Code (5 digits only) E-mail address Office Held or Trustee Term Begins - Month Term Begins - Year (year) Term Expires Term Expires - Year (yyyy) Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position). The date the Oath of Office (mm/dd/yyyy) was taken The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy) Is this a brand new trustee? Title of Board Member (select one): 	Ms. Rochelle Proujansky 333 Coddington Rd Ithaca 14850 rep@twcny.rr.com Trustee January 2015 December 2017 Yes 01/27/2015 01/30/2015 N Ms.

4		21 Due alterna Laura
4. 5	Mailing Address	21 Brooktree Lane
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	hmv2@cornell.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2016
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2018
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	01/26/2016
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	01/27/2016
16.	Is this a brand new trustee?	Ν
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Janet
3.	Last Name of Board Member	Corson-Rikert
4.	Mailing Address	303 Winthrop Drive
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	jlc18@cornell.edu
8.	Office Held or Trustee	Secretary
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2015
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2017
13.	Is this trustee serving a full term? If No, add a Note (for example, this trustee was appointed to complete the remainder of a term of a trustee who resigned their position).	Yes
14.	The date the Oath of Office (mm/dd/yyyy) was taken	04/17/2015
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	04/20/2015
16.	Is this a brand new trustee?	Ν
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Don
3.	Last Name of Board Member	Trotter
4.	Mailing Address	749 Millard Hill Rd
5.	City	Newfield
6.	Zip Code (5 digits only)	14867
7.	E-mail address	dtrotter@twcny.rr.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	June
10.	Term Begins - Year (year)	2016
11.	Term Expires	December

12.	Term Expires - Year (yyyy)	2017
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	No
	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)	
17.	was taken	06/14/2016
15.	The date the Oath of Office was filed with	00/14/2010
	town or county clerk (mm/dd/yyyy)	06/14/2016
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Nina
3.	Last Name of Board Member	Miller
4.	Mailing Address	241 Strawberry Hill Circle #2
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	nkmiller39@gmail.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2017
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2018
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	No
	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)	
11.	was taken	1/25/17
15.	The date the Oath of Office was filed with	1/05/17
	town or county clerk (mm/dd/yyyy)	1/25/17
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Martha
3.	Last Name of Board Member	Hardesty
4.	Mailing Address	24 South Street
5.	City	Trumansburg
6.	Zip Code (5 digits only)	14886
7.	E-mail address	martha.hardesty@icsd.k12.ny.us
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2017
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2017
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	No
	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)	1/12/2015
	was taken	1/12/2017

15.	The date the Oath of Office was filed with	01/18/2017
16.	town or county clerk (mm/dd/yyyy) Is this a brand new trustee?	Y
10.	Title of Board Member (select one):	Ms.
2.	First Name of Board Member	Ingrid
2. 3.	Last Name of Board Member	Jensen
<i>3</i> . 4.	Mailing Address	108 Auburn St
5.	City	Ithaca
<i>6</i> .	Zip Code (5 digits only)	14850
7.	E-mail address	imj8@cornell.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2017
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2018
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was	No
	appointed to complete the remainder of a	
14	term of a trustee who resigned their position). The last $d_{1} = 0$ of $d_{2} = 0$	
14.	The date the Oath of Office (mm/dd/yyyy) was taken	2/27/17
15.	The date the Oath of Office was filed with	
15.	town or county clerk (mm/dd/yyyy)	2/28/17
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Mr.
2.	First Name of Board Member	Luca
3.	Last Name of Board Member	Maurer
4.	Mailing Address	336 S Geneva St
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	Lmaurer@ithaca.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	May
10.	Term Begins - Year (year)	2016
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2018
13.	Is this trustee serving a full term? If No, add	
	a Note (for example, this trustee was appointed to complete the remainder of a	No
	term of a trustee who resigned their position).	
14.	The date the Oath of Office (mm/dd/yyyy)	
	was taken	06/07/2016
15.	The date the Oath of Office was filed with	06/07/2016
	town or county clerk (mm/dd/yyyy)	
16.	Is this a brand new trustee?	Y
1.	Title of Board Member (select one):	Vacant
2.	First Name of Board Member	
3.	Last Name of Board Member	
4.	Mailing Address	
_	1 14447	
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 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):	Vacant	
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 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):	Vacant	
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 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 <u>here</u> 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.	Y	
1.	Source of Funds	County	
2.	Name of funding County, Municipality or District	Tompkins County	
3.	Amount	\$3,233,201	
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	N/A	
5.	Written Contractual Agreement	N/A	
1.	Source of Funds	City	
2.	Name of funding County, Municipality or District	City of Ithaca	
3.	Amount	\$15,086	
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Ν	
5.	Written Contractual Agreement	Y	
1.	Source of Funds	Town	
2.	Name of funding County, Municipality or District	Town of Ithaca	
3.	Amount	\$10,000	
4.	Subject to public vote held in reporting year or in a previous reporting year(s).	Ν	
5.	Written Contractual Agreement	Y	
11.2	TOTAL LOCAL PUBLIC FUNDS	\$3,258,287	
SYSTE	CM CASH GRANTS TO MEMBER LIBRAR	RY	
11.3	Local Library Services Aid (LLSA)	\$26,511	
11.4	Central Library Aid (CLDA and/or CBA)	\$98,245	
11.5	Additional State Aid received from the System	\$4,000	
11.6	Federal Aid received from the System	\$0	
11.7	Other Cash Grants	\$0	
11.8	TOTAL SYSTEM CASH GRANTS (Add	\$128,756	
OTHE	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		\$0
FEDER	AL AID FOR LIBRARY OPERATION	
11.10	LSTA	\$0
11.11	Other Federal Aid	\$0
11.12	TOTAL FEDERAL AID (Add Questions 11.10 and 11.11)	\$0
11.13	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$0
OTHER	RECEIPTS	
11.14	Gifts and Endowments	\$122,051
11.15	Fund Raising	\$50,000
11.16	Income from Investments	\$988
11.17	Library Charges	\$73,115
11.18	Other \$343,011	
11.19	TOTAL OTHER RECEIPTS (Add	
	Questions 11.14, 11.15, 11.16, 11.17 and 11.18)	\$589,165
11.20	TOTAL OPERATING FUND RECEIPTS (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19)	\$3,976,208
11.21	BUDGET LOANS	\$0
TRANS	FERS	
11.22	From Capital Fund (Same as Question 14.8)	\$0
11.23	From Other Funds	\$0
11.24	TOTAL TRANSFERS (Add Questions 11.22 and 11.23)	\$0
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)	\$404,583
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)	\$4,380,791

12. OPERATING 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.

STAFF EXPENDITURES

Salaries & Wages Paid from Library Funds

12.1	Certified Librarians	\$878,094
12.2		\$1,037,498
12.3	Total Salaries & Wages Expenditures (Add Questions 12.1 and 12.2)	\$1,915,592

12.4	Employee Benefits Expenditures	\$1,047,017
12.4	Total Staff Expenditures (Add Questions	
12.3	12.3 and 12.4)	\$2,962,609
COLLE	CTION EXPENDITURES	
12.6	Print Materials Expenditures	\$191,559
12.7	Electronic Materials Expenditures	\$43,962
12.8	Other Materials Expenditures	\$68,472
12.9	Total Collection Expenditures (Add	
	Questions 12.6, 12.7 and 12.8)	\$303,993
CAPITA	AL EXPENDITURES FROM OPERATING	FUNDS
12.10	From Local Public Funds (71PF)	\$76,105
12.11	From Other Funds (71OF)	\$17,000
12.12	Total Capital Expenditures (Add Questions 12.10 and 12.11)	\$93,105
OPERA	TION AND MAINTENANCE OF BUILDIN	IGS
Repairs	to Building & Building Equipment	
12.13	From Local Public Funds (72PF)	\$0
12.14	From Other Funds (72OF)	\$0
12.15	Total Repairs (Add Questions 12.13 and 12.14)	\$0
12.16	Other Disbursements for Operation & Maintenance of Buildings	\$16,262
12.17	Total Operation & Maintenance of Buildings (Add Questions 12.15 and 12.16)	\$16,262
MISCE	LLANEOUS EXPENSES	
12.18	Office and Library Supplies	\$81,414
12.19	Telecommunications	\$20,381
12.20	Binding Expenses	\$793
12.21	Postage and Freight	\$865
12.22	Professional & Consultant Fees	\$228,021
12.23	Equipment	\$0
12.24	Other Miscellaneous	\$91,576
12.25	Total Miscellaneous Expenses (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22, 12.23 and 12.24)	\$423,050
12.26	CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE	\$67,100
DEBT S	ERVICE	
Capital	Purposes Loans (Principal and Interest)	
12.27	From Local Public Funds (73PF)	\$0
12.28	From Other Funds (73OF)	\$0
12.29	Total (Add Questions 12.27 and 12.28)	\$0
12.30	Budget Loans (Principal and Interest)	\$0
12.31	Short-Term Loans	\$0
12.32	Total Debt Service (Add Questions 12.29, 12.30 and 12.31)	\$0

12.33 **TOTAL OPERATING FUND DISBURSEMENTS** (Add Questions 12.5, \$3,866,119 12.9, 12.12, 12.17, 12.25, 12.26 and 12.32)

TRANSFERS

Transfers to Capital Fund \$0 12.34 From Local Public Funds (76PF) \$0 12.35 From Other Funds (76OF) Total Transfers to Capital Fund (Add 12.36 Questions 12.34 and 12.35; same as Question \$0 13.8)12.37 **Transfer to Other Funds** \$0 TOTAL TRANSFERS (Add Questions 12.38 \$0 12.36 and 12.37) 12.39 TOTAL DISBURSEMENTS AND TRANSFERS (Add Questions 12.33 and \$3,866,119 12.38) 12.40 BALANCE IN OPERATING FUND -Ending Balance for the Fiscal Year Ending \$514,672 2016 12.41 **GRAND TOTAL DISBURSEMENTS,** TRANSFERS & BALANCE (Add \$4,380,791 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 02/28/2017 assures that the "Annual Report" was reviewed and accepted by the Library Board on (date - mm/dd/yyyy). **FISCAL AUDIT** 05/18/2016 12.43 Last audit performed (mm/dd/yyyy) Time period covered by this audit 12.44 01/01/2015-12/31/2015 (mm/dd/yyyy) - (mm/dd/yyyy)

12.45Indicate type of audit (select one):Private Accounting Firm

CAPITAL FUND

12.46 Does the library have a Capital Fund? Enter Y for Yes, N for No. If No, stop here. If Yes, N 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 <u>here</u> to read general instructions before completing this section.

REVENUES FROM LOCAL SOURCES

- 13.1 Revenues from Local Government Sources \$013.2 All Other Revenues from Local Sources \$0
- 13.3Total Revenues from Local Sources (Add
Questions 13.1 and 13.2)\$0

STATE AID FOR CAPITAL PROJECTS

13.4	State Aid Received for Construction	
13.5	Other State Aid	\$0
13.6	Total State Aid (Add Questions 13.4 and 13.5)	\$0
FEDER	AL AID FOR CAPITAL PROJECTS	
13.7	TOTAL FEDERAL AID	\$0
INTERF	FUND REVENUE	
13.8	Transfer from Operating Fund (Same as Question 12.36)	\$0
13.9	TOTAL REVENUES (Add Questions 13.3, 13.6, 13.7 and 13.8)	\$0
13.10	NON-REVENUE RECEIPTS	\$0
13.11	TOTAL CASH RECEIPTS (Add Questions 13.9 and 13.10)	\$0
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)	\$0
13.13	TOTAL CASH RECEIPTS AND BALANCE (Add Questions 13.11 and 13.12; same as Question 14.12)	\$0

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	\$0
14.2	Incidental Construction	\$0
Other D	isbursements	
14.3	Purchase of Buildings	\$0
14.4	Interest	\$0
14.5	Collection Expenditures	\$0
14.6	Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)	\$0
14.7	TOTAL PROJECT EXPENDITURES (Add Questions 14.1, 14.2 and 14.6)	\$0
14.8	TRANSFER TO OPERATING FUND (Same as Question 11.22)	\$0
14.9	NON-PROJECT EXPENDITURES	\$0
14.10	TOTAL CASH DISBURSEMENTS AND TRANSFERS (Add Questions 14.7, 14.8 and 14.9)	\$0
14.11	BALANCE IN CAPITAL FUND - Ending Balance for the Fiscal Year Ending 2016	\$0
14.12	TOTAL CASH DISBURSEMENTS AND BALANCE (Add Questions 14.10 and 14.11; same as Question 13.13)	\$0

15. CENTRAL LIBRARIES

CENTRAL BOOK AID (CBA)

Statutory Education Law § 272, 273(1)(b)(2)

Reference: Commissioners Regulations 90.4

Central Book Aid is a flat sum of \$71,500 to each public library system. The fiscal year for Central Book Aid is the calendar year. Please see the Central Library Program Guidelines at <u>http://www.nysl.nysed.gov/libdev/clda/index.html</u> 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.

15.1.1 **Purchased Services:** Did the central/co-central library expend CBA funds for purchased services for CBA library materials? Enter Y for Yes, N for No.

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is 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	N/A
2.	Provider of Services	N/A
3.	Expenditure	N/A

- 15.1.2 Total Expenditure Purchased Services \$0
- 15.1.3 **Supplies and Materials**: Did the central/co-central library expend CBA funds for adult non-fiction and foreign language library materials? Enter Y for Yes, N for No.

Note: For questions which include a choice of "Other" in a drop-down menu, please add a State Note of explanation when "Other" is 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	N/A
2.	Quantity	N/A
3.	Unit Cost	N/A
4.	Expenditure	N/A
15.1.4	Total Expenditure - Supplies and Materials	\$0
15.1.5	Total Expenditure (total 15.1.2 and 15.1.4)	\$0
15.1.6	Cash Balance at the Opening of the Current Fiscal Year	
	NOTE: The opening balance must be the	
	same as the closing balance of the previous	

year.

15.1.7 Total Allocation received from the system.

- 15.1.8 Cash Balance at the End of the Current Fiscal Year (total 15.1.7 - 15.1.5 + 15.1.6) \$0
- 15.1.9 **Final Narrative**: Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.

CENTRAL LIBRARY DEVELOPMENT AID (CLDA)

StatutoryEducation Law § 272, 273(1)(b)(1)Reference:Commissioners Regulations 90.4
The formula is \$0.32 per capita or \$105,000
whichever is greater, 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. Note: CLDA funds which
are expended for library materials must be used
for adult non-fiction and foreign language,
including electronic content. The fiscal year for
Central Library Development Aid (CLDA) is the
calendar year.

15.2.1 - 15.2.2 **Professional Salaries:** Indicate total FTE and salaries for all professional central/co-central library employees (paid from CLDA funds).

15.2.1 Total Full-Time Equivalents (FTE) .23

15.2.2 Total Expenditure for Professional Salaries \$15,870

15.2.3 - 15.2.4 **Other Staff Salaries:** Indicate total FTE and salaries for all other central/co-central library employees (paid from CLDA funds).

- 15.2.3 Total Full-Time Equivalents (FTE) 1.19
- 15.2.4 Total Expenditures for Other Staff Salaries \$38,571
- 15.2.5 **Employee Benefits:** Indicate the total expenditures for all central/co-central library \$31,804 employee benefits (paid from CLDA funds).
- 15.2.6 **Purchased Services**: Did the central/co-central library expend CLDA funds for purchased services? Enter Y for Yes, N for No.

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

Vendor contract for automation **Expenditure** Category 1. **Polaris** 2. Provider of Services 3. Expenditure \$12,000 \$12,000 15.2.7 **Total Expenditure - Purchased Services** 15.2.8 Supplies and Materials: Did the central/co-central library expend funds for supply items, postage, adult nonfiction and Ν foreign language library materials, or equipment and furnishings with a unit cost

less than \$5,000? Enter Y for Yes, N for No.

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

explanation when "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
2.	Expenditure	N/A

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

15.2.10 Travel Expenditures: Did the central/co-central library expend funds for Ν travel? Enter Y for Yes, N for No.

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

1.	Type of travel		N/A
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- Expenditure N/A 2.
- \$0 15.2.11 Total Expenditures - Travel
- 15.2.12 Equipment and Furnishings: Did the central/co-central library expend funds for equipment and furnishings with a unit cost of N \$5,000 or more and having a useful life of more than one year? Enter Y for Yes, N for No.

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

repeating	, group.	
1.	Type of item	N/A
2.	Quantity	N/A
3.	Unit cost	N/A
4.	Expenditure	N/A
15.2.13	Total Expenditure - Equipment and Furnishings	\$0
15.2.14	Total Expenditure (total 15.2.2, 15.2.4, 15.2.5, 15.2.7, 15.2.9, 15.2.11 and 15.2.13)	\$98,245
15.2.15	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.	\$0
15.2.16	Total Allocation received from the system:	\$98,245
15.2.17	Cash Balance at the end of the Current Fiscal Year (total 15.2.16 - 15.2.14 + 15.2.15)	\$0
15.2.18	Final Narrative: Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.	\$12,000 was used to support a portion of the cost of the Polaris Integrated Library System, which is used by the Central Library for cataloging, maintaining and circulating the CBA collection. \$14,120 was used to support the materials receiving activity at the Central Library. \$72,126 was used to underwrite staff costs involved in selecting, acquiring, processing, maintaining, circulating, repairing and weeding of the CBA collection.

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	11.84
16.2	Total Librarians	14.47
16.3	All Other Paid Staff	22.10
16.4	Total Paid Employees	36.57
16.5	State Government Revenue	\$128,756
16.6	Federal Government Revenue	\$0
16.7	Other Operating Revenue	\$589,165
16.8	Total Operating Revenue	\$3,976,208
16.9	Other Operating Expenditures	\$506,412
16.10	Total Operating Expenditures	\$3,773,014
16.11	Total Capital Expenditures	\$93,105
16.12	Print Materials	177,992
16.13	Total Registered Borrowers	38,757
16.14	Other Capital Revenue and Receipts	\$0
16.15	Total Number of Internet Terminals Used by the General Public	34

17. FOR NEW YORK STATE LIBRARY USE ONLY

17.1	LIB ID	2400613230
17.2	Interlibrary Relationship Code	ME
17.3	Legal Basis Code	CO
17.4	Administrative Structure Code	SO
17.5	FSCS Public Library Definition	Y
17.6	Geographic Code	CO1
17.7	FSCS ID	NY0160
17.8	SED CODE	610600700023

SUGGESTED IMPROVEMENTS

Library Name:	TOMPKINS COUNTY PUBLIC LIBRARY	
Library System:	Finger Lakes Library System	
Name of Person Completing Form:	Susan A Currie	
Phone Number:	(607) 275-1534	
I am satisfied that this resource (Collect) is meeting library needs:	Agree	
Applying this resource (Collect) will help improve library services to the public:	Agree	
Please share with us your suggestions for improving the <i>Annual Report</i> . When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you!		