Tompkins County Public Library Annual Report For Public And Association Libraries - 2021

1. GENERAL LIBRARY INFORMATION

Library/Director Information

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

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

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

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

Report all information in Part 1 as of December 31, 2021, <u>except</u> for questions related to the <u>current</u> library director/manager (questions 1.37 through 1.44).

-	- · · -	
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	01/01/2021
1.7	Ending Fiscal Reporting Year	12/31/2021
1.8 fiscal yea Annual I	Is the library now reporting on a different ar than it reported on in the previous Report?	No
1.9 of library	If yes, please indicate the beginning date y's new reporting year. Enter N/A if No	N/A

1.10 Please indicate the ending date of N/A library's new reporting year. Enter N/A if No was answered to Question 1.8.

was answered to Question 1.8.

1.11 Beginning <u>Local</u> Fiscal Year 01/01/2021

1.12	Ending Local Fiscal Year	12/31/2021
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 and hit t	Telephone Number (enter 10 digits only the Tab key; enter N/A if no telephone	(607) 272-4557
1.21 the Tab	Fax Number (enter 10 digits only and hit key; enter N/A if no fax number)	(607) 272-8111
1.22 (Enter N	E-Mail Address to Contact the Library N/A if no e-mail address)	tvadakin@tcpl.org
1.23 no home	Library Home Page URL (Enter N/A if e page URL)	http://tcpl.org
1.24 Census)	Population Chartered to Serve (per 2010	101,564
1.25 the libra	Indicate the type of library as stated in ary's charter (select one):	PUBLIC
1.26 stated in	Indicate the area chartered to serve as the library's charter (select one):	County
boundar	During the reporting year, has there been nge to the library's legal service area ries? Changes must be the result of a charter action. Answer Y for Yes, N for	N
1.28 currently	Indicate the type of charter the library y holds (select one):	Absolute
	Date the library was granted its absolute or the date of the provisional charter if the does not have an absolute charter	06/29/1973
1.30	Date the library was last registered	01/23/1970
1.31	Federal Employer Identification Number	161098211

1.32	County	TOMPKINS			
1.33	School District	Ithaca City School District			
1.34	Town/City	Ithaca			
1.35	Library System	Finger Lakes 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				
	For questions 1.37 through 1.44, report all imanager.	information for the <u>current</u> library			
1.37	First Name of Library Director/Manager	Teresa			
1.38	Last Name of Library Director/Manager	Vadakin			
1.39 Number	NYS Public Librarian Certification	21644			
1.40 library m	What is the highest education level of the nanager/director?	Master's Degree			
	If the library manager/director holds a Degree, is it a Master's Degree in Information Science?	Y			
Librarian an active list the n	Do all staff working in the budgeted in (certified) positions reported in 6.4 have e NYS Public Librarian Certificate? If No, ame and e-mail address of each staff without an active certificate in a Note.	Y			
1.43	E-mail Address of the Director/Manager	tvadakin@tcpl.org			
1.44	Fax Number of the Director/Manager	(607) 272-8111			
1.45 cards to j service a	Does the library charge fees for library people residing outside the system's rea?	N			

Public Votes/Contracts

Was all or part of the library's funding 1.46 N subject to a public vote(s) held during Calendar Year 2021? (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 1.47. Name of municipality or district holding N/A 1. the public vote 2. Indicate the type of municipality or N/A district holding the public vote 3. Date the vote was held (mm/dd/2021) N/A Was the vote successful? Y/N N/A 4. What type of public vote was it? 5. N/A 6a. Most recent prior year approved N/A appropriation from a public vote: 6b. Proposed increase in appropriation as a N/A result of the vote held on the date reported in

6c. Total proposed appropriation (sum of 6a N/A and 6b):

question number 3:

This question should only be answered if "No" was answered in Q1.46 OR the library has votes from different municipalities/districts that were held in different years, both current and prior.

- 1.47 Did the library receive funding from an appropriation which was approved by public vote in a prior year? (Prior to Calendar Year 2021) Enter Y for Yes, N for No. If Yes, complete one record for the vote from each funding source. If No, go to question 1.48.
- 1. Name of municipality or district holding N/A the public vote
- 2. Indicate the type of municipality or district holding the public vote
- 3. Date the last successful vote was held N/A (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?

Unusual Circumstances

- 1.48 Does the reporting library have a N 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 1.49.
- 1. Name of contracting municipality or N/A district
- 2. Is this a written contractual agreement? N/A
- 3. Population of the geographic area served N/A by this contract
- 4. Dollar amount of contract N/A
- 5. Enter the appropriate code for range of N/A services provided (select one):
- 1.49 For the reporting year, has the library Y 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 Note; if no, please go to Part 2, Library Collection.

2. LIBRARY COLLECTION

Print/Electronic/Other Holdings

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

NOTE: This section of the survey (2.1-2.25) 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. Count electronic materials at the administrative entity level (main library); do not duplicate numbers at each branch.

PRINT MATERIALS

Cataloged Books

2.1	Adult Fiction Books	73,421
2.2	Adult Non-fiction Books	57,697
2.3 2.2)	Total Adult Books (Total questions 2.1 &	131,118
2.4	Children's Fiction Books	42,541
2.5	Children's Non-fiction Books	26,640
2.6 2.4 & 2.5	Total Children's Books (Total questions 5)	69,181
2.7 2.3 & 2.6	Total Cataloged Books (Total questions 6)	200,299

Other Print Materials

2.8	Total Uncataloged Books	0
2.9	Total Print Serials	1,988
2.10	All Other Print Materials	0
2.11 question	Total Other Print Materials (Total s 2.8 through 2.10)	1,988
2.12	Total Print Materials (Total questions 2.7	202,287

ALL OTHER MATERIALS

Electronic Materials

and 2.11)

2.13	Electronic Books	26,309
2.14	Local Electronic Collections	2
2.15	NOVELNY Electronic Collections	15
	Total Electronic Collections (Total ns 2.14 and 2.15)	17

2.17	Audio - Downloadable Units	8,741
2.18	Video - Downloadable Units	0
such as edigital pl	Other Electronic Materials (Include at are not included in the above categories, e-serials; electronic files; collections of hotographs; and electronic government ats, reference tools, scores and maps.)	229
2.20 question	Total Electronic Materials (Total s 2.13, 2.16, 2.17, 2.18 and 2.19)	35,296

Non-Electronic Materials

2.21	Audio - Physical Units	15,867
2.22	Video - Physical Units	19,025
2.23	Other Circulating Physical Items	1,720
2.24 question	Total Physical Items in Collection (Total s 2.21 through 2.23)	36,612

Grand Total/Additions to Holdings

2.25 **GRAND TOTAL HOLDINGS** (Total 274,195 questions 2.12, 2.20 and 2.24)

ADDITIONS TO HOLDINGS - Do not subtract withdrawals or discards.

2.26	Cataloged Books	11,975
2.27	All Other Print Materials	911
2.28	Electronic Materials	4,967
2.29	All Other Materials	1,516
2.30 through	Total Additions (Total questions 2.26 2.29)	19,369

3. LIBRARY PROGRAMS, POLICIES, AND SERVICES

Visits/Borrowers/Policies/Accessibility

Report all information on questions 3.1 through 3.29 as of the end of the <u>fiscal</u> year reported in Part 1; report information on questions 3.30 through 3.82 for the 2021 <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)	112,983			
	Regarding the number of Library Visits is this an annual count or an annual based on a typical week or weeks?	CT - Annual Count			
3.2	Registered resident borrowers	32,241			
3.3	Registered non-resident borrowers	5,570			
	eport information on WRITTEN POLICIES (EN POLICIES (Answer Y for Yes, N for				
3.4 policy?	Does the library have an open meeting	Y			
3.5 the confi	Does the library have a policy protecting identiality of library records?	Y			
3.6 policy?	Does the library have an Internet use	Y			
3.7	Does the library have a disaster plan?	Y			
3.8 conflict	Does the library have a board-approved of interest policy?	Y			
3.9 whistle b	Does the library have a board-approved blower policy?	Y			
3.10 sexual ha	Does the library have a board-approved arassment prevention policy?	Y			
	eport information on ACCESSIBILITY as on SIBILITY (Answer Y for Yes, N for No)	of 12/31/21.			
(homebo	3.11 Does the library provide service to Y persons who cannot visit the library (homebound persons, persons in nursing homes, persons in jail, etc.)?				
3.12 for pers (TTY/T	ons who are deaf and hearing impaired	Y			
3.13 books?	Does the library have large print	Y			
	Does the library have assistive ogy for people who are visually d or blind?	Y			
3.15 - If	3.15 - If so, what do you have?				

screen reader, such as JAWS, Windoweyes or NVDA	No
refreshable Braille commonly referred to as a refreshable Braille display	No
screen magnification software, such as Zoomtext	Yes
electronic scanning and reading software, such as OpenBook	No
3.16 Is the library registered for services from either the New York State Talking Book and Braille Library (New York State Library, Albany) or the Andrew Heiskell Braille and Talking Book Library (The New York Public Library, New York)?	Y
Library Sponsored Programs/Summer Reading Program	
SYNCHRONOUS PROGRAM SESSIONS and	ATTENDANCE
For Questions 3.19, 3.19a, 3.19b,	
0–5 and 6–11, please complete Q3.19If you have not broken out Synchron	s Program Sessions for Children by age group, and Q3.19b. Enter the total in Q3.19. nous Program Sessions by age group, enter the Q3.19, and enter N/A in Q3.19a and Q3.19b.
For Questions 3.26, 3.26a, 3.26b,	
0–5 and 6–11, please complete Q3.26If you have not broken out Synchron	s Children's Program Attendance by age group, fa and Q3.26b. Enter that total in Q3.26. nous Children's Program Attendance by age a Attendance in Q3.26, and enter N/A in Q3.26a
3.17 Number of Synchronous Program Sessions Targeted at Adults Age 19 or Older	275
3.18 Number of Synchronous Program Sessions Targeted at Young Adults Ages 12-18	88
3.19 Number of Children's Programs	245

127

118

3.19a Number of Synchronous Program Sessions Targeted at Children Ages 0-5

3.19b Number of Synchronous Program Sessions Targeted at Children Ages 6-11

3.20 Number of Synchronous General Interest Program Sessions	3
3.20a Total Number of Synchronous Program Sessions for those libraries who are not reporting the number of Children's Programs in Q3.19a and Q3.19b (Total questions 3.17, 3.18, 3.19, 3.20)	
3.21 Total Number of Synchronous Program Sessions (Total questions 3.17, 3.18, 3.19a, 3.19b, 3.20). This is the Total Number for those libraries who are breaking out Children's Programming questions by age.	611
3.21a Number of Synchronous In-Person Onsite Program Sessions	145
3.21b Number of Synchronous In-Person Offsite Program Sessions	160
3.21c Number of Synchronous Virtual Program Sessions	306
3.22 One-on-One Program Sessions	2,188
3.23 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
3.24 Attendance at Synchronous Programs Targeted at Adults Age 19 or Older	7,791
3.25 Attendance at Synchronous Programs Targeted at Young Adults Ages 12-18	639
3.26 Children's Program Attendance	5,465
3.26a Attendance at Synchronous Programs Targeted at Children Ages 0-5	3,524
3.26b Attendance at Synchronous Programs Targeted at Children Ages 6-11	1,941
3.27 Attendance at Synchronous General Interest Programs	278
3.27a Total Attendance at Synchronous Programs for those libraries who are not reporting the Children's Program Attendance in Q3.26a and Q3.26b (Total questions 3.24, 3.25, 3.26, 3.27)	

3.26b, 3 librarie	Total Attendance at Synchronous ms (Total questions 3.24, 3.25, 3.26a, 3.27). This is the Total Number for those s who are breaking out Children's mming questions by age.	14,173
3.28a Progra	Synchronous In-Person Onsite m Attendance	3,391
3.28b Program	Synchronous In-Person Offsite m Attendance	9,246
3.28c Attenda	Synchronous Virtual Program ance	1,536
3.29	One-on-One Program Attendance	2,188
3.29a Progra	Total Number of Asynchronous m Presentations	23
3.29b Present	Total Views of Asynchronous Program ations within 7 Days	231
	report information on SUMMER READI ER READING PROGRAM	ING PROGRAMS for the 2021 calendar year.
3.30 - Indicate which of the following apply to the summer reading program(s) offered by the library during the summer of 2021 (check all that apply):		
a.	Program(s) for children	Yes
b.	Program(s) for young adults	Yes
c.	Program(s) for Adults	Yes
d. Librari	Summer Reading at New York es name and/or logo used	Yes
U	Collaborative Summer Library m (CSLP Manual, provided through the rk State Library, used)	Yes
f.	N/A	No
3.31 reading	Library outlets offering the summer program	1
3.32 summe	Children registered for the library's reading program	3,285
3.33 library	Young adults registered for the summer reading program	56
3.34 summe	Adults registered for the library's reading program	125

3.35 library's 3.33 + 3.	summer reading program (total 3.32 +	3,466
3.36 2021	Children's program sessions - Summer	97
3.37 Summer	Young adult program sessions - 2021	23
3.38 2021	Adult program sessions - Summer	11
3.39 (total 3.3	Total program sessions - Summer 2021 36 + 3.37 + 3.38)	131
3.40 Summer	Children's program attendance - 2021	3,684
3.41 Summer	Young adult program attendance - 2021	342
3.42 2021	Adult program attendance - Summer	125
3.43 2021 (tot	Total program attendance - Summer tal 3.40 + 3.41 + 3.42)	4,151
COLLA	BORATORS	
3.44 BOCES	Public school district(s) and/or	4
3.45	Non-public school(s)	1
3.46	Childcare center(s)	5
3.47	Summer camp(s)	1
3.48	Municipality/Municipalities	1
3.49	Literacy provider(s)	0
3.50	Other (describe using the State note)	10
3.51 3.50)	Total Collaborators (total 3.44 through	22

Early/Adult/English Speaker/Digital Literacy

Please report information on EARLY LITERACY PROGRAMS for the 2021 calendar year. EARLY LITERACY PROGRAMS

3.52 progra	Did the library offer early literacy ms? (Enter Y for Yes, N for No)	Y
3.53 - I	ndicate types of programs offered (check	c all that apply)
a. (kinder	Focus on birth - school entry garten)	Yes
b.	Focus on parents & caregivers	No
c.	Combined audience	No
d.	N/A	No
3.54 - N	Number of sessions	
a. (kinder	Focus on birth - school entry garten)	100
b.	Focus on parents & caregivers	0
c.	Combined audience	0
d.	N/A	0
3.55	Total Sessions	100
3.56 - A	Attendance at sessions	
a. (kinder	Focus on birth - school entry garten)	1,335
b.	Focus on parents & caregivers	0
c.	Combined audience	0
d.	N/A	0
3.57	Total Attendance	1,335
3.58 - 0	Collaborators (check all that apply):	
a.	Childcare center(s)	Yes
b. BOCES	Public School District(s) and/or	Yes
c.	Non-Public School(s)	Yes
d.	Health care providers/agencies	No
e.	Other (describe using the State note)	Yes
Please	report information on ADIILT LITERA	CV for the 2021 calendar veg

Please report information on ADULT LITERACY for the 2021 calendar year. ADULT LITERACY

3.59 program	Did the library offer adult literacy ns?	Yes	
3.60	Total group program sessions	3	
3.61	Total one-on-one program sessions	23	
3.62	Total group program attendance	17	
3.63	Total one-on-one program attendance	23	
3.64 - C	follaborators (check all that apply)		
a. Americ	Literacy NY (Literacy Volunteers of a)	No	
b. BOCES	Public School District(s) and/or	Yes	
c.	Non-Public Schools	No	
d. using N	Other (see instructions and describe ote)	No	
Please report information on PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL) for the 2021 calendar year. PROGRAMS FOR ENGLISH SPEAKERS OF OTHER LANGUAGES (ESOL)			
	Did the library offer programs for Speakers of Other Languages (ESOL)? Y for Yes, N for No)	Y	
English	Speakers of Other Languages (ESOL)?	Y 15	
English (Enter	Speakers of Other Languages (ESOL)? Y for Yes, N for No)		
English (Enter ')	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions	15	
English (Enter) 3.66 3.67	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 +	15 0	
English (Enter) 3.66 3.67 3.68 3.69	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 +	15 0 17	
English (Enter) 3.66 3.67 3.68 3.69 3.67 + 3	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 + 3.68)	15 0 17 32	
English (Enter) 3.66 3.67 3.68 3.69 3.67 + 3 3.70	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 + 5.68) One-on-one program sessions	15 0 17 32	
English (Enter) 3.66 3.67 3.68 3.69 3.67 + 3 3.70 3.71	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 + 5.68) One-on-one program sessions Children's program attendance	15 0 17 32 0 241	
English (Enter) 3.66 3.67 3.68 3.69 3.67 + 3 3.70 3.71 3.72	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 + 3.68) One-on-one program sessions Children's program attendance Young adult program attendance Adult program attendance Total program attendance (total 3.71 +	15 0 17 32 0 241 0 12	
English (Enter) 3.66 3.67 3.68 3.69 3.67 + 3 3.70 3.71 3.72 3.73 3.74	Speakers of Other Languages (ESOL)? Y for Yes, N for No) Children's program sessions Young adult program sessions Adult program sessions Total program sessions (total 3.66 + 3.68) One-on-one program sessions Children's program attendance Young adult program attendance Adult program attendance Total program attendance (total 3.71 +	15 0 17 32 0 241 0 12	

a. America	a)	No	
b. BOCES	Public School District(s) and/or	No	
c.	Non-Public School(s)	Yes	
d.	Other (describe using the Note)	No	

Please report information on DIGITAL LITERACY for the 2021 calendar year.

DIGITAL LITERACY

3.77 program	Did the library offer digital literacy ns?	Y
3.78	Total group program sessions	29
3.79	Total one-on-one program sessions	12
3.80	Total group program attendance	170
3.81	Total one-on-one program attendance	12
3.82 activitie	Did your library offer teen-led s during the 2021 calendar year?	Y

4. LIBRARY TRANSACTIONS

Circulation/Electronic Use/Reference 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	73,559
4.2	Adult Non-fiction Books	58,548
4.3 & 4.2)	Total Adult Books (Total questions 4.1	132,107
4.4	Children's Fiction Books	176,108
4.5	Children's Non-fiction Books	34,603
4.6 question	Total Children's Books (Total as 4.4 & 4.5)	210,711
4.7 (Total q	Total Cataloged Book Circulation uestion 4.3 & 4.6)	342,818

CIRCULATION OF OTHER MATERIALS

4.8	Circulation of Adult Other Materials	61,060
4.9 Materia		14,549
4.10 (Total q	Circulation of Other Physical Items uestions 4.8, 4.9)	75,609
	Physical Item Circulation (Total ns 4.7 & 4.10)	418,427
ELECT	TRONIC USE	
4.12	Use of Electronic Material	104,985
4.13 Informa		9,907
	Electronic Content Use (Total ns 4.12 & 4.13)	114,892
	Total Circulation of Materials (Total ns 4.11 & 4.12)	523,412
4.16 4.13 &	Total Collection Use (Total questions 4.15)	533,319
	Grand Total Circulation of Children's als (Total questions 4.6 & 4.9)	225,260
REFER	RENCE TRANSACTIONS	
4.18	Total Reference Transactions	18,096
	Regarding the number of Reference ctions entered, is this an annual count or nal estimate based on a typical week or	CT - Annual Count
4.19 reference	Does the library offer virtual ce?	Y
Interlibra	ary Loan	
INTER	LIBRARY LOAN - MATERIALS RECE	EIVED (BORROWED)
4.20	TOTAL MATERIALS RECEIVED	36,842
INTER	LIBRARY LOAN - MATERIALS PROV	/IDED (LOANED)

4.21 TOTAL MATERIALS PROVIDED 35,960

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2021.

SYSTEMS AND SERVICES

5.1	Automated circulation system?	Y

- 5.2 Online public access catalog (OPAC)? Y
- 5.3 Electronic access to the OPAC from Y outside the library?
- 5.4 Annual number of visits to the library's web site 332,225
- 5.5 Does the library use Internet filtering N software on any computer?
- 5.6 Does your library use social media? Y
- 5.7 Does the library file for E-rate N benefits?
- 5.8 Is the library part of a consortium for N E-rate benefits?
- 5.9 If yes, in which consortium are you N/A participating?
- 5.10 Name of the person responsible for the Evan Wray library's Information Technology (IT) services
- 5.11 IT contact's telephone number (enter (607) 272-4557 10 digits only and hit the Tab key)
- 5.12 IT contact's email address ITsupport@tcpl.org

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)	0
6.4	Librarian (certified)	11.71
6.5	Vacant Librarian (certified)	1.29
6.6	Library Manager (not certified)	0
6.7 certified	Vacant Library Manager (not l)	0
6.8 (not cer	Library Specialist/Paraprofessional tified)	4.0
6.9 Speciali	Vacant Library st/Paraprofessional (not certified)	0
6.10	Other Staff	21
6.11	Vacant Other Staff	0
6.12 6.2, 6.4,	TOTAL PAID STAFF (Total questions 6.6, 6.8 & 6.10)	37.71
6.13 question	VACANT TOTAL PAID STAFF (Total as 6.3, 6.5, 6.7, 6.9 & 6.11)	1.29
SALAR	Y INFORMATION	
6.14 (certifie	FTE - Entry Level Librarian d)	1
6.15 (certifie	Salary - Entry Level Librarian d)	\$55,237
6.16	FTE - Library Director (certified)	1
6.17	Salary - Library Director (certified)	\$95,000
6.18	FTE - Library Manager (not certified)	0
6.19 certified	Salary - Library Manager (not l)	\$0

7. MINIMUM PUBLIC LIBRARY STANDARDS

As of January 1, 2021 all public, free association and Indian libraries in New York State are required to meet the minimum standards listed below. Please indicate which of these standards your library meets as of December 31, 2021. Please click here to read general instructions before completing this section. Helpful information for meeting minimum public library standards is available on the State Library's website. Questions about the new standards should be directed to your library system.

Is governed by written bylaws which 1. Y define the structure and governing functions of the library board of trustees, and which shall be reviewed and re-approved by the board of trustees at least once every five years or earlier if required by law. Y Has a community-based, boardapproved, written long-range plan of service developed by the library board of trustees and staff. 3. Y Provides a board-approved written annual report to the community on the library's progress in meeting its mission, goals and objectives, as outlined in the library's longrange plan of service. Has board-approved written policies Y for the operation of the library, which shall be reviewed and updated at least once every five years or earlier if required by law. Annually prepares and publishes a Y board-approved, written budget, which enables the library to address the community's needs, as outlined in the library's long-range plan of service. **6.** Periodically evaluates the effectiveness Y of the library's programs, services and collections to address community needs, as outlined in the library's long-range plan of service. 7. Is open the minimum standard Y number of public service hours for population served. (see instructions) 8. Maintains a facility that addresses community needs, as outlined in the library's long-range plan of service, including adequate: Y 8a. space Y 8b. lighting 8c. shelving Y Y 8d. seating 8e. power infrastructure Y

Y

Y

8f.

8g.

data infrastructure

public restroom

- 9. Provides programming to address Y community needs, as outlined in the library's long-range plan of service.
- 10. Provides
- 10a. a circulation system that facilitates Y access to the local library collection and other library catalogs
- 10b. equipment, technology, and internet connectivity to address community needs and facilitate access to information.
- 11. Provides access to current library Y information in print and online, facilitating the understanding of library services, operations and governance; information provided online shall include the standards referenced in numbers (1) through (5) above.
- 12. Employs a paid director in accordance Y with the provisions of Commissioner's Regulation 90.8.
- 13. Provides library staff with annual Y technology training, appropriate to their position, to address community needs, as outlined in the library's long-range plan of service.
- 14. Establishes and maintains Y partnerships with other educational, cultural or community organizations which enable the library to address the community's needs, as outlined in the library's long-range plan of service.

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.

Y

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

PUBLIC SERVICE HOURS - Report hours to two decimal places.

8.6 Minimum Weekly Total Hours - Main 60 Library

8.7 Minimum Weekly Total Hours - 0.00 Branch Libraries

8.8 Minimum Weekly Total Hours - 0.00 Bookmobiles

8.9 Minimum Weekly Total Hours - Total 60.00 Hours Open (Total questions 8.6 - 8.8)

8.10 Annual Total Hours - Main Library 2,511.00

8.11 Annual Total Hours - Branch 0.00

Libraries

8.12 Annual Total Hours - Bookmobiles 0.00

8.13 Annual Hours Open - Total Hours 2,511.00

Open (Total questions 8.10 through 8.12)

8A. COVID

NOTE: This section of the survey (8A) collects data on the impact of the COVID-19 pandemic. Report all information in Part 8A from January 1, 2021 to December 31, 2021.

- CV1 Were any of the library's outlets No physically closed to the public for any period of time due to the Coronavirus (COVID-19) pandemic?
- CV2 Did library staff continue to provide Services to the public during any portion of the period when the building was physically closed to the public due to the Coronavirus (COVID-19) pandemic?
- CV3 Did the library allow users to complete Yes registration for library cards online without having to come to the library during the Coronavirus (COVID-19) pandemic?
- CV4 Did the library provide reference Yes service via the Internet or telephone when the building was physically closed to the public during the Coronavirus (COVID-19) pandemic?

CV5 Did the library provide 'outside' Yes service for circulation of physical materials at one or more outlets during the Coronavirus (COVID-19) pandemic?

CV6 Did the library intentionally provide Yes Wi-Fi Internet access to users outside the building at one or more outlets during COVID-19 pandemic?

CV7 Did the library increase access to Wi-Fi Internet access to users outside the building at one or more outlets during the Coronavirus (COVID-19) pandemic?

CV8 Did library staff work for other No government agencies or nonprofit organizations instead of, or in addition to, their normal duties during the Coronavirus (COVID-19) pandemic?

CV9 Number of Weeks an Outlet Had 22 Limited Occupancy Due to COVID-19

9. SERVICE OUTLET INFORMATION

Outlets should be arranged in alphabetical order if possible. br>
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.

<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 CollectConnect. If you choose to send your data for uploading, you must enter the data into the spreadsheet form available in the survey by clicking <u>here</u>. Complete this form and email it to <u>collectconnect@baker-taylor.com</u>

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	tvadakin@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. Outlet	Public Service Hours Per Year for This	2,511
16.	Number of Weeks This Outlet is Open	52
16a to COV	Number of weeks an outlet closed due ID-19	0
16b occupai	Number of weeks an outlet had limited acy due to COVID-19	22
17. Does this outlet have meeting space available for public use (non-library sponsored programs, meetings and/or events)?		Y
18. public u	Is the meeting space available for use even when the outlet is closed?	N
19. sponsor this out	Total number of non-library red programs, meetings and/or events at let	130
20. (select o	Enter the appropriate outlet code one):	LRF
21.	Who owns this outlet building?	County
22. outlet is	Who owns the land on which this built?	County
23. initially	Indicate the year this outlet was constructed	2000
24. a major	Indicate the year this outlet underwent renovation costing \$25,000 or more	2017
25.	Square footage of the outlet	60,888
26. by Gene	Number of Internet Computers Used eral Public	39

27. Interne	Number of uses (sessions) of public et computers per year	6,904
27a of Publ	Reporting Method for Number of Uses lic Internet Computers Per Year	CT - Annual Count
28. public	Type of connection on the outlet's Internet computers	Fiber
29. Maximum <u>download</u> speed of connection on the outlet's public Internet computers		11 Greater than or equal to 100 mbps and less than 1 gbps
30. on the	Maximum <u>upload</u> speed of connection outlet's public Internet computers	11 Greater than or equal to 100 mbps and less than 1 gbps
31.	Internet Provider	Clarity Connect
32.	WiFi Access	No restrictions to access
33.	Wireless Sessions	3,649
33a Session	Reporting Method for Wireless	CT - Annual Count
	Does the outlet have a building ce that is physically accessible to a in a wheelchair?	Y
35. accessi	Is every public part of the outlet ble to a person in a wheelchair?	Y
36.	Does your outlet have a Makerspace?	Y
37.	LIBID	2400613230
38.	FSCSID	NY0160
39. Bookm	Number of Bookmobiles in the obile Outlet Record	0
40.	Outlet Structure Status	00 (for no change from previous year)

10. OFFICERS AND TRUSTEES

Trustees and Terms/Board President/Trustee Names

Report information about trustee meetings as of December 31, 2021. 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, 2021 to December 31, 2021)

NUMBER OF TRUSTEES AND TERMS

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

- 10.3 If yes, what is the range? 5 to 15
- 10.4 If your library has a range, how many 15 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 documents (incorporation)?
- 10.6 Does your library's charter documents Yes (incorporation) state a specified term for trustees? If no, please explain in a Note.
- 10.7 If yes, what is the trustee term length, 3 as stated in your library's charter documents (incorporation)?

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, 2022. 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	First Name	Ingrid
10.10	Last Name	Jensen
10.11	Mailing Address	108 Auburn St
10.12	City	Ithaca
10.13	Zip Code (5 digits only)	14850
10.14	Phone (enter 10 digits only)	(203) 809-3725
10.15	E-mail Address	imj8@cornell.edu
10.16	Term Begins - Month	January

1001.	101 m 2 cg.ms 10 m (3 3 3 3)	
10.18	Term Expires - Month	December
10.19	Term Expires - Year (yyyy)	2024
previous filled, an ending d term. Ex of [name	Is the trustee serving a full term? If a Note. The Note should identify the strustee whose unexpired term is being and should identify the beginning and late of the unexpired previous trustee's cample: Trustee is filling the remainder e's term, which was to run from any date to ending date.	Yes
10.21 (mm/dd/	The date the Oath of Office was taken (yyyy)	01/25/2022
10.22 with tow	The date the Oath of Office was filed on or county clerk (mm/dd/yyyy)	02/08/2022

Term Begins - Year (yyyy)

Is this a brand new trustee?

10.17

10.23

You may 1) enter the data for the Officers and Board Members directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into CollectConnect (but do not include the Board President—this information should still be entered directly into the survey). If you choose to send your data for uploading, you must enter the data into the spreadsheet form available here. Complete this form and email it to collectconnect@baker-taylor.com.

N

2022

1.	Status	Filled
2.	First Name of Board Member	Martha
3.	Last Name of Board Member	Hardesty
4.	Mailing Address	102 W Main St
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	Vice President
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2021
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2023

13. Is the trustee serving a full term? If Yes No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.

14. The date the Oath of Office (mm/dd/yyyy) was taken

01/26/2021

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

01/27/2021

16. Is this a brand new trustee? N

1. Status **Filled**

2. First Name of Board Member **Blixy**

Last Name of Board Member 3.

Taetzsch

Mailing Address 4.

219 Horton Rd

5. City

10.

11.

12.

Newfield

6. Zip Code (5 digits only) 14867

7. E-mail address blixyt@gmail.com

8. **Office Held or Trustee** Financial Officer

9. **Term Begins - Month**

January

2022

December

Term Expires - Year (yyyy)

Term Expires

2024 Yes

13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.

Term Begins - Year (year)

14. The date the Oath of Office (mm/dd/yyyy) was taken

01/24/2022

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

01/28/2022

Is this a brand new trustee?	N
Status	Filled
First Name of Board Member	Jason
Last Name of Board Member	Moore
Mailing Address	66 Searles Rd
City	Groton
Zip Code (5 digits only)	13073
E-mail address	jmoore@tompkinsfinancial.com
Office Held or Trustee	Trustee
Term Begins - Month	January
Term Begins - Year (year)	2020
Term Expires	December
Term Expires - Year (yyyy)	2022
s trustee whose unexpired term is being nd should identify the beginning and date of the unexpired previous trustee's xample: Trustee is filling the remainder	Yes
The date the Oath of Office l/yyyy) was taken	01/15/2020
	01/15/2020 01/25/2020
l/yyyy) was taken The date the Oath of Office was filed	
l/yyyy) was taken The date the Oath of Office was filed wn or county clerk (mm/dd/yyyy)	01/25/2020
The date the Oath of Office was filed wn or county clerk (mm/dd/yyyy) Is this a brand new trustee?	01/25/2020 N
The date the Oath of Office was filed on or county clerk (mm/dd/yyyy) Is this a brand new trustee? Status	01/25/2020 N Filled
The date the Oath of Office was filed wn or county clerk (mm/dd/yyyy) Is this a brand new trustee? Status First Name of Board Member	01/25/2020 N Filled LaWanda
The date the Oath of Office was filed wn or county clerk (mm/dd/yyyy) Is this a brand new trustee? Status First Name of Board Member Last Name of Board Member	01/25/2020 N Filled LaWanda Cook
The date the Oath of Office was filed wn or county clerk (mm/dd/yyyy) Is this a brand new trustee? Status First Name of Board Member Last Name of Board Member Mailing Address	01/25/2020 N Filled LaWanda Cook 1216 E. Pointe Drive
	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 the trustee serving a full term? If a Note. The Note should identify the strustee whose unexpired term is being and should identify the beginning and date of the unexpired previous trustee's xample: Trustee is filling the remainder ie's term, which was to run from

8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	February
10.	Term Begins - Year (year)	2021
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2023
13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.		No
14. The date the Oath of Office 02/23/2021 (mm/dd/yyyy) was taken		
15. with too	The date the Oath of Office was filed vn or county clerk (mm/dd/yyyy)	02/23/2021
16.	Is this a brand new trustee?	N
1.	Status	Filled
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)	2022
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2024

13. Is the trustee serving a full term? If Yes No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.

14. The date the Oath of Office (mm/dd/yyyy) was taken

01/25/2022

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

02/15/2022

16. Is this a brand new trustee? N

1. Status **Filled**

2. First Name of Board Member Liam G.B.

Last Name of Board Member 3.

Murphy

Mailing Address 4.

78 Genung Circle

5. City Ithaca

6. Zip Code (5 digits only) 14850

7. E-mail address liamgbmurphy@twcny.rr.com

8. **Office Held or Trustee** **Trustee**

9. **Term Begins - Month** January

10. Term Begins - Year (year) 2022

11. **Term Expires** **December**

12. Term Expires - Year (yyyy) 2024 Yes

13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.

14. The date the Oath of Office (mm/dd/yyyy) was taken

02/10/2022

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

02/15/2022

16.	Is this a brand new trustee?	N
1.	Status	Filled
2.	First Name of Board Member	Nina
3.	Last Name of Board Member	Scholtz
4.	Mailing Address	63 Water Wagon Rd
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	nbscholtz@gmail.com
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2020
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2022
13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.		Yes
14. (mm/dd	The date the Oath of Office /yyyy) was taken	01/28/2020
15. with tov	The date the Oath of Office was filed vn or county clerk (mm/dd/yyyy)	01/29/2020
16.	Is this a brand new trustee?	N
1.	Status	Filled
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	January
10.	Term Begins - Year (year)	2021
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2023
13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.		
14. (mm/dd	The date the Oath of Office /yyyy) was taken	01/26/2021
15. with tov	The date the Oath of Office was filed vn or county clerk (mm/dd/yyyy)	01/27/2021
16.	Is this a brand new trustee?	N
1.	Status	Filled
2.	First Name of Board Member	Shelley
3.	Last Name of Board Member	Wong
4.	Mailing Address	108 Irving Place
5.	City	Ithaca
6.	Zip Code (5 digits only)	14850
7.	E-mail address	ssw6@cornell.edu
8.	Office Held or Trustee	Trustee
9.	Term Begins - Month	January
10.	Term Begins - Year (year)	2020
11.	Term Expires	December
12.	Term Expires - Year (yyyy)	2022

13. Is the trustee serving a full term? If Yes No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. 14. The date the Oath of Office

(mm/dd/yyyy) was taken

01/28/2020

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

01/29/2020

16. Is this a brand new trustee? N

1. Status **Filled**

2. First Name of Board Member Melisa

Last Name of Board Member 3.

Sidle

Mailing Address 4.

35 Dart Dr.

5. City Ithaca

6. Zip Code (5 digits only) 14850

7. E-mail address Melisa@sidlestudios.com

8. **Office Held or Trustee** Secretary

9. **Term Begins - Month** February

10. Term Begins - Year (year) 2021

11. **Term Expires** **December**

12. Term Expires - Year (yyyy) 2023 No

13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.

14. The date the Oath of Office (mm/dd/yyyy) was taken

02/23/2021

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

02/23/2021

16.	Is this a brand new trustee?	N	
1.	Status	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 the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.			
14. (mm/dd/	The date the Oath of Office /yyyy) was taken		
15. with tow	The date the Oath of Office was filed on or county clerk (mm/dd/yyyy)		
16.	Is this a brand new trustee?		
1.	Status	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 the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date. 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. **Status** Vacant First Name of Board Member 2. **3. Last Name of Board Member Mailing Address** 4. 5. City Zip Code (5 digits only) 6. 7. E-mail address 8. **Office Held or Trustee** 9. **Term Begins - Month**

Term Begins - Year (year)

Term Expires - Year (yyyy)

Term Expires

10.

11.

12.

- 13. Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.
- 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. Status 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 the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose unexpired term is being filled, and should identify the beginning and ending date of the unexpired previous trustee's term. Example: Trustee is filling the remainder of [name]'s term, which was to run from beginning date to ending date.
- 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?

Trustee Education

Complete one record for each person serving as a trustee as of December 31, 2021. These trustees will not be exactly the same as the trustees listed in the section above.

1. **Trustee Name Ingrid Jensen** Has the trustee participated in trustee education in the last calendar year (2021)? **Trustee Name Martha Hardesty** Has the trustee participated in trustee education in the last calendar year (2021)? **Trustee Name** 1. **Jason Moore** Has the trustee participated in trustee education in the last calendar year (2021)? **Trustee Name Blixy Taetzsch** 1. Has the trustee participated in trustee education in the last calendar year (2021)? Melisa Sidle 1. **Trustee Name**

2. Has the trustee participated in trustee ducation in the last calendar year (2021)?

1. Trustee Name LaWanda Cook

2. Has the trustee participated in trustee N education in the last calendar year (2021)?

1. Trustee Name Nina Miller

2. Has the trustee participated in trustee N education in the last calendar year (2021)?

1. Trustee Name Liam G.B. Murphy

2. Has the trustee participated in trustee N education in the last calendar year (2021)?

1. Trustee Name Nina Scholtz

2. Has the trustee participated in trustee N education in the last calendar year (2021)?

1. Trustee Name Don Trotter

2. Has the trustee participated in trustee N education in the last calendar year (2021)? 1. **Trustee Name Shelley Wong** 2. Has the trustee participated in trustee education in the last calendar year (2021)? 11. OPERATING FUNDS RECEIPTS Local Public Funds/System Cash Grants/Other State 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 school districts which are the source of funds. Does the library receive any local Y 11.1 public funds? If yes, complete one record for each taxing authority; if no, go to question 11.3. 1. **Source of Funds** County Name of funding County, Municipality Tompkins County or School District \$3,298,191 3. **Amount** Subject to public vote held in N/A reporting year or in a previous reporting year(s). 5. **Written Contractual Agreement** N/A 1. **Source of Funds** Town Name of funding County, Municipality Town of Ithaca or School District 3. \$15,000 **Amount** Subject to public vote held in N reporting year or in a previous reporting year(s). 5. **Written Contractual Agreement** Y **Source of Funds** 1. City Name of funding County, Municipality City of Ithaca 2. or School District

3.	Amount	\$14,650
4. reporti year(s).	Subject to public vote held in ng year or in a previous reporting	N
5.	Written Contractual Agreement	Y
11.2	TOTAL LOCAL PUBLIC FUNDS	\$3,327,841
SYSTE	M CASH GRANTS TO MEMBER LIBI	RARY
11.3	Local Library Services Aid (LLSA)	\$34,230
11.4 Aid mo	Record all Central Library Services nies received from system headquarters	\$116,101
11.5 System	Additional State Aid received from the	\$4,775
11.6	Federal Aid received from the System	\$7,866
11.7	Other Cash Grants	\$0
11.8 (Add Q	TOTAL SYSTEM CASH GRANTS questions 11.3, 11.4, 11.5, 11.6 and 11.7)	\$162,972
OTHE	R STATE AID	
•	State Aid other than LLSA, Central y Aid (CLDA and/or CBA), or other id reported as system cash grants	\$13,582
Federal A	Aid/Other Receipts	
FEDEF	RAL AID FOR LIBRARY OPERATION	
11.10	LSTA	\$0
11.11	Other Federal Aid	\$589,865
11.12 Questio	TOTAL FEDERAL AID (Add ons 11.10 and 11.11)	\$589,865
	CONTRACTS WITH PUBLIC RIES AND/OR PUBLIC LIBRARY MS IN NEW YORK STATE	\$0
OTHE	R RECEIPTS	
11.14	Gifts and Endowments	\$191,435
11.15	Fund Raising	\$38,000

11.16	Income from Investments	\$1,648
11.17	Library Charges	\$10,744
11.18	Other	\$215,000
11.19 Questio	TOTAL OTHER RECEIPTS (Add ons 11.14, 11.15, 11.16, 11.17 and 11.18)	\$456,827
	TOTAL OPERATING FUND PTS (Add Questions 11.2, 11.8, 11.9, 1.13 and 11.19)	\$4,551,087
11.21	BUDGET LOANS	\$0
Transfers	s/Grant Total	
TRANS	SFERS	
11.22 14.8)	From Capital Fund (Same as Question	\$0
11.23	From Other Funds	\$0
11.24 11.22 ar	TOTAL TRANSFERS (Add Questions nd 11.23)	\$0
(Same a	BALANCE IN OPERATING FUND - ing Balance for Fiscal Year Ending 2021 as Question 12.40 of previous year if ear has not changed)	\$896,272
	GRAND TOTAL RECEIPTS, ET LOANS, TRANSFERS AND NCE (Add Questions 11.20, 11.21, 11.24	\$5,447,359

12. OPERATING FUND DISBURSEMENTS

Staff/Collection/Capital/Operation and Maintenance

and 11.25; Same as Question 12.40)

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 \$933,782

12.2	Other Staff	\$992,755
12.3 (Add Q	Total Salaries & Wages Expenditures Juestions 12.1 and 12.2)	\$1,926,537
12.4	Employee Benefits Expenditures	\$1,170,438
12.5 Questio	Total Staff Expenditures (Add ons 12.3 and 12.4)	\$3,096,975
COLLI	ECTION EXPENDITURES	
12.6	Print Materials Expenditures	\$178,133
12.7	Electronic Materials Expenditures	\$64,815
12.8	Other Materials Expenditures	\$84,899
12.9 Questic	Total Collection Expenditures (Addons 12.6, 12.7 and 12.8)	\$327,847
CAPIT	AL EXPENDITURES FROM OPERATI	ING FUNDS
12.10	From Local Public Funds (71PF)	\$51,217
12.11	From Other Funds (710F)	\$0
12.12 Questic	Total Capital Expenditures (Add ons 12.10 and 12.11)	\$51,217
OPER/	ATION AND MAINTENANCE OF BUIL	LDINGS
Repair	s to Building & Building Equipment	
12.13	From Local Public Funds (72PF)	\$0
12.14	From Other Funds (72OF)	\$0
12.15 and 12.	Total Repairs (Add Questions 12.13 14)	\$0
12.16 Mainte	Other Disbursements for Operation & nance of Buildings	\$18,852
12.17 Buildin	Total Operation & Maintenance of ags (Add Questions 12.15 and 12.16)	\$18,852
MISCELLANEOUS EXPENSES		
12.18	Office and Library Supplies	\$62,266
12.19	Telecommunications	\$21,180
12.20	Postage and Freight	\$103
12.21	Professional & Consultant Fees	\$207,328

12.22	Equipment	\$24,042
12.23	Other Miscellaneous	\$42,146
12.24 Questio 12.23)	Total Miscellaneous Expenses (Add ns 12.18, 12.19, 12.20, 12.21, 12.22 and	\$357,065
Contracts	s/Debt Service/Transfers/Grand Total	
	CONTRACTS WITH PUBLIC RIES AND/OR PUBLIC LIBRARY MS IN NEW YORK STATE	\$65,800
DEBT S	SERVICE	
Capital	Purposes Loans (Principal and Interest)	
12.26	From Local Public Funds (73PF)	\$0
12.27	From Other Funds (73OF)	\$0
12.28	Total (Add Questions 12.26 and 12.27)	\$0
Other L	oans	
12.29	Budget Loans (Principal and Interest)	\$0
12.30	Short-Term Loans	\$0
12.31 12.28, 1	Total Debt Service (Add Questions 2.29 and 12.30)	\$0
	TOTAL OPERATING FUND RSEMENTS (Add Questions 12.5, 12.9, 2.17, 12.24, 12.25 and 12.31)	\$3,917,756
TRANS	FERS	
Transfe	rs to Capital Fund	
12.33	From Local Public Funds (76PF)	\$0
12.34	From Other Funds (76OF)	\$0
12.35 Questio 13.8)	Total Transfers to Capital Fund (Add ns 12.33 and 12.34; same as Question	\$0
12.36	Transfer to Other Funds	\$0
12.37 12.35 ar	TOTAL TRANSFERS (Add Questions ad 12.36)	\$0

12.38 TOTAL DISBURSEMENTS AND TRANSFERS (Add Questions 12.32 and 12.37)	\$3,917,756
12.39 BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2021	\$1,529,603
12.40 GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE (Add Questions 12.38 and 12.39; same as Question 11.26) ASSURANCE	\$5,447,359
12.41 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).	02/22/2022
FISCAL AUDIT	
12.42 Last audit performed (mm/dd/yyyy)	06/02/2021
12.43 Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	01/01/2020-12/31/2020
12.44 Indicate type of audit (select one):	Private Accounting Firm

CAPITAL FUND

Does the library have a Capital Fund? N 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 Sources	Revenues from Local Government	\$0
13.2 Sources	All Other Revenues from Local	\$0
	Total Revenues from Local Sources lestions 13.1 and 13.2)	\$0

STATE AID FOR CAPITAL PROJECTS

13.4	State Aid Received for Construction	\$0	
13.5	Other State Aid	\$0	
13.6 and 13.	Total State Aid (Add Questions 13.4 5)	\$0	
FEDER	RAL AID FOR CAPITAL PROJECTS		
13.7	TOTAL FEDERAL AID	\$0	
INTER	FUND REVENUE		
13.8 as Ques	Transfer from Operating Fund (Same stion 12.35)	\$0	
13.9 13.3, 13	TOTAL REVENUES (Add Questions 5.6, 13.7 and 13.8)	\$0	
13.10	NON-REVENUE RECEIPTS	\$0	
13.11 Questio	TOTAL CASH RECEIPTS (Add ons 13.9 and 13.10)	\$0	
(Same a	BALANCE IN CAPITAL FUND - ing Balance for Fiscal Year Ending 2021 as Question 14.11 of previous year, if ear has not changed)	\$0	
	TOTAL CASH RECEIPTS AND NCE(Add Questions 13.11 and 13.12; s 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			

\$0

14.6 Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)

(Add Q	puestions 14.1, 14.2 and 14.6)	
14.8 (Same a	TRANSFER TO OPERATING FUND as Question 11.22)	\$0
14.9	NON-PROJECT EXPENDITURES	\$ 0
14.10 AND T and 14.	TOTAL CASH DISBURSEMENTS RANSFERS (Add Questions 14.7, 14.8 9)	\$0
14.11 Ending 2021	BALANCE IN CAPITAL FUND - Balance for the Fiscal Year Ending	\$0
	TOTAL CASH DISBURSEMENTS ALANCE (Add Questions 14.10 and came as Question 13.13)	\$0

TOTAL PROJECT EXPENDITURES \$0

15. CENTRAL LIBRARIES

14.7

CENTRAL LIBRARY SERVICES AID (CLSA)

CENTRAL LIBRARY SERVICES AID (CLSA)

Statutory Education Law § 273(1)(b)

Reference: Commissioners Regulations 90.4

Central Library Services Aid is a flat sum of \$0.32 cents per capita of population within the chartered area of service of such library system with a minimum amount of \$105,000, and an additional \$71,500 to each library system for the purchase of books and materials including nonprint materials, as defined in regulations of the commissioner, for its central library.

The fiscal year for Central Library Services Aid is the calendar year. Please see the Central Library Program Guidelines at http://www.nysl.nysed.gov/libdev/clda/index.html for more information.

Library expenditures from Central Library Services Aid may only be used for adult non-fiction and foreign language library materials, including electronic content. Record the central/co-central library's actual disbursement of these State Aid funds as allocated to the Library by the public library system. Report here only those funds actually expended by the Library during the calendar year ending December 31, 2021. Do not report funds spent by the public library system on the Library's behalf.

- 15.1.1 15.1.2 Professional Salaries: Indicate total FTE and salaries for all professional central/co-central library employees (paid from CLDA funds).
- 15.1.1 Total Full-Time Equivalents (FTE) .31
- 15.1.2 Total Expenditure for Professional \$24,321

Salaries

- 15.1.3 15.1.4 Other Staff Salaries: Indicate total FTE and salaries for all other central/cocentral library employees (paid from CLDA funds).
- 15.1.3 Total Full-Time Equivalents (FTE) 1.1
- 15.1.4 Total Expenditures for Other Staff \$38,572

Salaries

15.1.5 Employee Benefits: Indicate the total \$38,208 expenditures for all central/co-central library employee benefits (paid from CLDA funds).

15.1.6 Purchased Services: Did the Y 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.

1. Expenditure Category Vendor contract for

automation

2. Provider of Services Finger Lakes Library

System

3. **Expenditure** \$15,000

15.1.7 Total Expenditure - Purchased \$15,000

Services

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

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

15.1.9 Total Expenditure - Supplies and \$0 Materials

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

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

1. Type of travel N/A

2. Expenditure N/A

15.1.12 Equipment and Furnishings: Did the N central/co-central library expend funds for equipment and furnishings with a unit cost of \$5,000 or more and having a useful life of more than one year? Enter Y for Yes, N for No.

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

1.	Type of item	N/A
2.	Quantity	N/A

3. Unit cost N/A

4. Expenditure N/A

15.1.13 Total Expenditure - Equipment and \$0 Furnishings

15.1.14 Total Expenditure (total 15.1.2, 15.1.4, \$116,101 15.1.5, 15.1.7, 15.1.9, 15.1.11 and 15.1.13)

15.1.15 Cash Balance at the Opening of the Fiscal Year (total 15.1.15a + 15.1.15b)

NOTE: The opening balance must be the same as the closing balance of the previous year.

15.1.15a CBA Cash Balance at the Opening of \$0 the Fiscal Year

15.1.15b CLDA Cash Balance at the Opening of \$0 the Fiscal Year.

15.1.16 Total Allocation received from the \$116,101 system:

15.1.17 Cash Balance at the end of the Current Fiscal Year (total 15.1.16 - 15.1.14 + 15.1.15)

15.1.18 Final Narrative: Provide a brief narrative, no more than five hundred (500) words, describing the major activities carried out with these State Aid Funds.

\$15,000 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. \$15,974 was used to support the materials receiving activity at the Central Library. \$85,127 was used to underwrite staff costs involved in selecting, acquiring, processing, maintaining, circulating, repairing and weeding of the **CBA** collection.

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	12.25
16.2	Total Librarians	15.75
16.3	All Other Paid Staff	18.38
16.4	Total Paid Employees	34.13
16.5	State Government Revenue	\$168,688
16.6	Federal Government Revenue	\$597,731
16.7	Other Operating Revenue	\$456,827
16.8	Total Operating Revenue	\$4,551,087
16.9	Other Operating Expenditures	\$441,717
16.10	Total Operating Expenditures	\$3,866,539
16.11	Total Capital Expenditures	\$51,217
16.12	Print Materials	202,287
16.13	Total Registered Borrowers	37,811
16.14	Other Capital Revenue and Receipts	\$0
16.15 by Gene	Number of Internet Computers Used eral Public	39

16.16 Total Uses (sessions) of Public Internet 6,904 **Computers Per Year**

16.17	Wireless Sessions	3,649

16.18 **Total Capital Revenue** \$0

17.1

LIB ID

17. FOR NEW YORK STATE LIBRARY USE ONLY

,,		_ 10001010
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

FSCS ID

17.8 SED CODE 610600700023

17.9 **INSTITUTION ID** 800000036374

SUGGESTED IMPROVEMENTS

TOMPKINS COUNTY Library Name:

PUBLIC LIBRARY

Library System: Finger Lakes Library

System

2400613230

Name of Person Completing Form: Teresa Vadakin

(607) 272-4557 **Phone Number:**

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 Annual Report. When providing feedback, if applicable please indicate the question number each comment/suggestion refers to. Thank you!