Alice Curtis Desmond & Hamilton Fish Lib
Annual Report For Public And Association Libraries - 2021

	CURRENT YEAR	*PREVIOUS YEAR*

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, except for questions related to the current library director/manager (questions 1.37 through 1.44).

1.1	Library ID Number	3200482455	*3200482455*
1.2	Library Name	ALICE CURTIS DESMOND & HAMILTON FISH LIB	*ALICE CURTIS DESMOND & HAMILTON FISH LIB*
1.3	Name Status (State use only)	00 (for no change from previous year)	*00 (for no change from previous year)*
1.4	Structure Status (State use only)	00 (for no change from previous year)	*00 (for no change from previous year)*
1.5	Community	Garrison	*Garrison*
1.6	Beginning Fiscal Reporting Year	01/01/2021	*01/01/2020*
1.7	Ending Fiscal Reporting Year	12/31/2021	*12/31/2020*
1.8	Is the library now reporting	No	*No*

on a different fiscal year than it reported on in the previous Annual Report?

1.9	If yes, please indicate the beginning date of library's new reporting year. Enter N/A if No was answered to Question 1.8.	N/A	*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	*N/A*
1.11	Beginning <u>Local</u> Fiscal Year	01/01/2021	*01/01/2020*
1.12	Ending <u>Local</u> Fiscal Year	12/31/2021	*12/31/2020*
1.13	Address Status	00 (for no change from previous year)	*00 (for no change from previous year)*
1.14	Street Address	472 ROUTE 403	*472 ROUTE 403*
1.15	City	GARRISON	*GARRISON*
1.16	Zip Code	10524	*10524*
1.17	Mailing Address	P.O. BOX 265	*P.O. BOX 265*
1.18	City	GARRISON	*GARRISON*
1.19	Zip Code	10524	*10524*
1.20	Telephone Number (enter 10 digits only and hit the Tab key; enter N/A if no telephone number)	(845) 424-3020	*(845) 424-3020*
1.21	Fax Number (enter 10 digits only and hit the Tab key; enter N/A if no fax number)	(845) 424-4061	*(845) 424-4061*

1.22	E-Mail Address to Contact the Library (Enter N/A if no e-mail address)	director@desmondfishlibrary.org	*director@desmondfishlibrary.org*
1.23	Library Home Page URL (Enter N/A if no home page URL)	desmondfishlibrary.org	*desmondfishlibrary.org*
1.24	Population Chartered to Serve (per 2010 Census)	7,021	*7,021*
1.25	Indicate the type of library as stated in the library's charter (select one):	ASSOCIATION	*ASSOCIATION*
1.26	Indicate the area chartered to serve as stated in the library's charter (select one):	Other	*Other*
1.27	During the reporting year, has there been any change to the library's legal service area boundaries? Changes must be the result of a Regents charter action. Answer Y for Yes, N for No.	N	*N*
1.28	Indicate the type of charter the library currently holds (select one):	Absolute	*Absolute*
1.29	Date the library was granted its absolute charter or the date of the provisional charter if the library does not have an absolute charter	12/10/1987	*12/10/1987*
1.30	Date the library was last registered	04/21/1983	*04/21/1983*
1.31	Federal Employer Identification Number	132933774	*132933774*

1.32	County	PUTNAM	*PUTNAM*
1.33	School District	Garrison Union Free School	*Garrison Union Free School*
1.34	Town/City	Garrison	*Garrison*
1.35	Library System	Mid-Hudson Library System	*Mid-Hudson Library System*

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

1.36a	President/CEO Name	N/A	*N/A*
1.36b	President/CEO Phone Number	N/A	*N/A*
1.36c	President/CEO Email	N/A	*N/A*

NOTE: For questions 1.37 through 1.44, report all information for the <u>current</u> library director/manager.

1.37	First Name of Library Director/Manager	Dede	*Jennifer*
1.38	Last Name of Library Director/Manager	Farabaugh	*McCreery*
1.39	NYS Public Librarian Certification Number		*25930*
1.40	What is the highest education level of the library manager/director?	Master's Degree	*Master's Degree*
1.41	If the library manager/director holds a Master's Degree, is it a Master's Degree in Library/Information Science?	Y	*Y*
1.42	Do all staff working in the budgeted Librarian (certified) positions reported in 6.4 have an active NYS Public Librarian Certificate? If No, list the name and e-mail address of each staff	N/A	*N/A*

member without an active
certificate in a Note.

| 1.43 | E-mail Address of the Director/Manager | director@desmondfishlibrary.org | *director@desmondfishlibrary.org* |

| 1.44 | Fax Number of the Director/Manager | (845) 424-4061 | *(845) 424-4061* |

| 1.45 | Does the library charge fees for library cards to people residing outside the system's service area? | N | *N* |

Public Votes/Contracts

| 1.46 | Was all or part of the library's funding 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. | N | *N* |

| 1. | Name of municipality or district holding the public vote | N/A | *N/A* |

| 2. | Indicate the type of municipality or district holding the public vote | N/A | *N/A* |

| 3. | Date the vote was held (mm/dd/2021) | N/A | *N/A* |

| 4. | Was the vote successful? Y/N | N/A | *N/A* |

| 5. | What type of public vote was it? | N/A | *N/A* |

6a.	Most recent prior year approved appropriation from a public vote:	N/A	*N/A*
6b.	Proposed increase in appropriation as a result of the vote held on the date reported in question number 3:	N/A	*N/A*
6c.	Total proposed appropriation (sum of 6a and 6b):	N/A	*N/A*

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.	Y	*Y*
1.	Name of municipality or district holding the public vote	Garrison Union Free School District	*Garrison Union Free School District*
2.	Indicate the type of municipality or district holding the public vote	School District	*School District*
3.	Date the last successful vote was held (mm/dd/yyyy)	05/21/2019	*05/20/2019*
4.	What type of public vote was it?	school district ballot proposition (Ed. Law §259(1)(a))	*school district ballot proposition (Ed. Law §259(1)(a))*
5.	What was the total dollar amount of the appropriation from tax dollars resulting	$300,000	*$300,000*

from the last successful
vote?

Unusual Circumstances

1.48	Does the reporting library have a contractual agreement with a municipality or district to provide library services to residents of an area not served by a chartered library? Enter Y for Yes, N for No. If yes, please complete one record for *each* contract. If no, go to question 1.49.	N	*N*
1.	Name of contracting municipality or district	N/A	*N/A*
2.	Is this a written contractual agreement?	N/A	*N/A*
3.	Population of the geographic area served by this contract	N/A	*N/A*
4.	Dollar amount of contract	N/A	*N/A*
5.	Enter the appropriate code for range of services provided (select one):	N/A	*N/A*
1.49	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	Y	*Y*

> circumstance(s) and the
> impact on the library using
> the Note; if no, please go to
> Part 2, Library Collection.

Note: Our building sum pump failed in January 2021, which caused our entire basement to flood, including our computer lab. We were not able to host any programming downstairs, but did so online and outside when available.

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 read 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	5,533	*5,622*
2.2	Adult Non-fiction Books	9,077	*9,123*
2.3	Total Adult Books (Total questions 2.1 & 2.2)	14,610	*14,745*
2.4	Children's Fiction Books	7,493	*7,520*
2.5	Children's Non-fiction Books	3,184	*3,696*
2.6	Total Children's Books (Total questions 2.4 & 2.5)	10,677	*11,216*
2.7	Total Cataloged Books (Total questions 2.3 & 2.6)	25,287	*25,961*

Other Print Materials

2.8	Total Uncataloged Books	25	*0*
2.9	Total Print Serials	65	*67*
2.10	All Other Print Materials	812	*807*
2.11	Total Other Print Materials (Total questions 2.8 through 2.10)	902	*874*
2.12	Total Print Materials (Total questions 2.7 and 2.11)	26,189	*26,835*

ALL OTHER MATERIALS

Electronic Materials

2.13	Electronic Books	23,920	*13,250*
2.14	Local Electronic Collections	4	*9*
2.15	NOVELNY Electronic Collections	15	*15*
2.16	Total Electronic Collections (Total questions 2.14 and 2.15)	19	*24*
2.17	Audio - Downloadable Units	5,315	*4,815*
2.18	Video - Downloadable Units	1085	*1,314*
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.)	478	*6*

2.20	Total Electronic Materials (Total questions 2.13, 2.16, 2.17, 2.18 and 2.19)	30,817	*19,409*

Non-Electronic Materials

2.21	Audio - Physical Units	2,202	*2,565*
2.22	Video - Physical Units	5,289	*5,244*
2.23	Other Circulating Physical Items	83	*83*
2.24	Total Physical Items in Collection (Total questions 2.21 through 2.23)	7,574	*7,892*

Grand Total/Additions to Holdings

2.25	**GRAND TOTAL HOLDINGS** (Total questions 2.12, 2.20 and 2.24)	64,580	*54,136*

ADDITIONS TO HOLDINGS - Do <u>not</u> subtract withdrawals or discards.

2.26	Cataloged Books	1,013	*955*
2.27	All Other Print Materials	0	*0*
2.28	Electronic Materials	3,344	*977*
2.29	All Other Materials	175	*151*
2.30	Total Additions (Total questions 2.26 through 2.29)	4,532	*2,083*

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

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

LIBRARY USE

3.1	Library visits (total annual attendance)	28,614	*18,125*
3.1a	Regarding the number of Library Visits entered, is this an annual count or an annual estimate based on a typical week or weeks?	ES - Annual Estimate Based on Typical Week(s)	*ES - Annual Estimate Based on Typical Week(s)*
3.2	Registered resident borrowers	2,623	*2,514*
3.3	Registered non-resident borrowers	175	*175*

Please report information on WRITTEN POLICIES as of 12/31/21.

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

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

3.10	Does the library have a board-approved sexual harassment prevention policy?	Y	*Y*

Please report information on ACCESSIBILITY as of 12/31/21.

ACCESSIBILITY (Answer Y for Yes, N for No)

3.11	Does the library provide service to persons who cannot visit the library (homebound persons, persons in nursing homes, persons in jail, etc.)?	Y	*Y*
3.12	Does the library have assistive devices for persons who are deaf and hearing impaired (TTY/TDD)?	N	*N*
3.13	Does the library have large print books?	Y	*Y*
3.14	Does the library have assistive technology for people who are visually impaired or blind?	Y	*Y*

3.15 - If so, what do you have?

screen reader, such as JAWS, Windoweyes or NVDA	No	No
refreshable Braille commonly referred to as a refreshable Braille display	No	No
screen magnification software, such as Zoomtext	Yes	No
electronic scanning and reading software, such as OpenBook	No	No

3.16	Is the library registered for	Y	*Y*

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)?

Library Sponsored Programs/Summer Reading Program

SYNCHRONOUS PROGRAM SESSIONS and ATTENDANCE

For Questions 3.19, 3.19a, 3.19b,

- If you have broken out Synchronous Program Sessions for Children by age group, 0–5 and 6–11, please complete Q3.19a and Q3.19b. Enter the total in Q3.19.
- If you have not broken out Synchronous Program Sessions by age group, enter the Number of Children's Programs in Q3.19, and enter N/A in Q3.19a and Q3.19b.

For Questions 3.26, 3.26a, 3.26b,

- If you have broken out Synchronous Children's Program Attendance by age group, 0–5 and 6–11, please complete Q3.26a and Q3.26b. Enter that total in Q3.26.
- If you have not broken out Synchronous Children's Program Attendance by age group, enter the Children's Program Attendance in Q3.26, and enter N/A in Q3.26a and Q3.26b.

3.17	Number of Synchronous Program Sessions Targeted at Adults Age 19 or Older	196	*169*
3.18	Number of Synchronous Program Sessions Targeted at Young Adults Ages 12-18	13	*13*
3.19	Number of Children's Programs	220	*300*

Note: Our longterm children's librarian left in June 2021, and we were very short-staffed for much of 2021.

3.19a	Number of Synchronous Program Sessions Targeted at Children Ages 0-5	N/A	
3.19b	Number of Synchronous Program Sessions Targeted at Children Ages 6-11	N/A	

| 3.20 | Number of Synchronous General Interest Program Sessions | 32 | *51* |

| 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) | 461 | |

| 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. | 241 | *533* |

| 3.21a | Number of Synchronous In-Person Onsite Program Sessions | 117 | |

| 3.21b | Number of Synchronous In-Person Offsite Program Sessions | 2 | |

| 3.21c | Number of Synchronous Virtual Program Sessions | 283 | |

| 3.22 | One-on-One Program Sessions | 536 | *470* |

| 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 | *Yes* |

3.24	Attendance at Synchronous Programs Targeted at Adults Age 19 or Older	3,831	*2,232*
3.25	Attendance at Synchronous Programs Targeted at Young Adults Ages 12-18	59	*96*
3.26	Children's Program Attendance	1,223	*2,637*
3.26a	Attendance at Synchronous Programs Targeted at Children Ages 0-5	N/A	
3.26b	Attendance at Synchronous Programs Targeted at Children Ages 6-11	N/A	
3.27	Attendance at Synchronous General Interest Programs	957	*751*
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)	6,070	
3.28	Total Attendance at Synchronous Programs (Total questions 3.24, 3.25, 3.26a, 3.26b, 3.27). This is the Total Number for those libraries who are breaking out Children's Programming questions by age.	4,847	*5,716*
3.28a	Synchronous In-Person Onsite Program Attendance	2,102	
3.28b	Synchronous In-Person Offsite Program Attendance	72	

3.28c	Synchronous Virtual Program Attendance	2,745	
3.29	One-on-One Program Attendance	532	*470*
3.29a	Total Number of Asynchronous Program Presentations	0	
3.29b	Total Views of Asynchronous Program Presentations within 7 Days	0	

Please report information on SUMMER READING PROGRAMS for the 2021 calendar year.

SUMMER READING PROGRAM

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	Yes
b.	Program(s) for young adults	Yes	Yes
c.	Program(s) for Adults	Yes	Yes
d.	Summer Reading at New York Libraries name and/or logo used	Yes	Yes
e.	Collaborative Summer Library Program (CSLP Manual, provided through the New York State Library, used)	Yes	Yes
f.	N/A	No	No
3.31	Library outlets offering the summer reading program	0	*1*
3.32	Children registered for the library's summer reading program	N/A	*42*

3.33	Young adults registered for the library's summer reading program	N/A	*5*
3.34	Adults registered for the library's summer reading program	N/A	*81*
3.35	Total number registered for the library's summer reading program (total 3.32 + 3.33 + 3.34)	0	*128*
3.36	Children's program sessions - Summer 2021	51	*82*
3.37	Young adult program sessions - Summer 2021	4	*4*
3.38	Adult program sessions - Summer 2021	34	*58*
3.39	Total program sessions - Summer 2021 (total 3.36 + 3.37 + 3.38)	89	*144*
3.40	Children's program attendance - Summer 2021	241	*591*
3.41	Young adult program attendance - Summer 2021	9	*79*
3.42	Adult program attendance - Summer 2021	546	*383*
3.43	Total program attendance - Summer 2021 (total 3.40 + 3.41 + 3.42)	796	*1,053*

COLLABORATORS

3.44	Public school district(s) and/or BOCES	0	*1*
3.45	Non-public school(s)	0	*0*

3.46	Childcare center(s)	0	*0*
3.47	Summer camp(s)	0	*0*
3.48	Municipality/Municipalities	0	*0*
3.49	Literacy provider(s)	0	*0*
3.50	Other (describe using the State note)	8	*8*

Note: Collaborated with Local Business to offer summer reading prizes and with seven other Putnam County Libraries to offer County-wide Teen Talent Contest

3.51	Total Collaborators (total 3.44 through 3.50)	8	*9*

Early/Adult/English Speaker/Digital Literacy

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

EARLY LITERACY PROGRAMS

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

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

a.	Focus on birth - school entry (kindergarten)	Yes	Yes
b.	Focus on parents & caregivers	Yes	Yes
c.	Combined audience	Yes	Yes
d.	N/A	No	No

3.54 - Number of sessions

a.	Focus on birth - school entry (kindergarten)	48	*151*
b.	Focus on parents & caregivers	51	*51*

c.	Combined audience	9	*21*

d.	N/A	0	*0*

3.55	Total Sessions	108	*223*

3.56 - Attendance at sessions

a.	Focus on birth - school entry (kindergarten)	1,343	*1,217*
b.	Focus on parents & caregivers	635	*523*
c.	Combined audience	94	*74*
d.	N/A	0	*0*

3.57	Total Attendance	2,072	*1,814*

3.58 - Collaborators (check all that apply):

a.	Childcare center(s)	Yes	Yes
b.	Public School District(s) and/or BOCES	Yes	Yes
c.	Non-Public School(s)	No	Yes
d.	Health care providers/agencies	No	Yes
e.	Other (describe using the State note)	No	No

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

ADULT LITERACY

3.59	Did the library offer adult literacy programs?	Yes	*No*
3.60	Total group program sessions	5	*N/A*

3.61	Total one-on-one program sessions	326	*N/A*
3.62	Total group program attendance	48	*N/A*
3.63	Total one-on-one program attendance	289	*N/A*

3.64 - Collaborators (check all that apply)

a.	Literacy NY (Literacy Volunteers of America)	No	No
b.	Public School District(s) and/or BOCES	No	No
c.	Non-Public Schools	No	No
d.	Other (see instructions and describe using Note)	Yes	No

Note: Putnam County Libraries Association; Society for Financial Awareness; Alzheimer's Association

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)

3.65	Did the library offer programs for English Speakers of Other Languages (ESOL)? (Enter Y for Yes, N for No)	Y	*Y*
3.66	Children's program sessions	32	*33*
3.67	Young adult program sessions	0	*0*
3.68	Adult program sessions	0	*0*
3.69	Total program sessions (total 3.66 + 3.67 + 3.68)	32	*33*
3.70	One-on-one program sessions	0	*0*

3.71	Children's program attendance	148	*235*
3.72	Young adult program attendance	N/A	*N/A*
3.73	Adult program attendance	N/A	*N/A*
3.74	Total program attendance (total 3.71 + 3.72 + 3.73)	148	*235*
3.75	One-on-one program attendance	N/A	*N/A*

3.76 - Collaborators (check all that apply):

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

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

DIGITAL LITERACY

3.77	Did the library offer digital literacy programs?	Y	*Y*
3.78	Total group program sessions	13	*76*
3.79	Total one-on-one program sessions	335	*443*
3.80	Total group program attendance	139	*464*
3.81	Total one-on-one program	335	*443*

attendance

3.82   Did your library offer teen-
        led activities during the   N   *N*
        2021 calendar year?

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	5,027	*3,683*
4.2	Adult Non-fiction Books	4,294	*3,532*
4.3	Total Adult Books (Total questions 4.1 & 4.2)	9,321	*7,215*
4.4	Children's Fiction Books	8,088	*4,972*
4.5	Children's Non-fiction Books	2,025	*945*
4.6	Total Children's Books (Total questions 4.4 & 4.5)	10,113	*5,917*
4.7	Total Cataloged Book Circulation (Total question 4.3 & 4.6)	19,434	*13,132*

CIRCULATION OF OTHER MATERIALS

4.8	Circulation of Adult Other Materials	4,757	*4,339*
4.9	Circulation of Children's Other Materials	505	*171*
4.10	Circulation of Other Physical Items (Total questions 4.8, 4.9)	5,262	*4,510*

4.11	Physical Item Circulation (Total questions 4.7 & 4.10)	24,696	*17,642*

ELECTRONIC USE

4.12	Use of Electronic Material	5,258	*6,601*
4.13	Successful Retrieval of Electronic Information	806	*2,612*
4.14	Electronic Content Use (Total questions 4.12 & 4.13)	6,064	*9,213*
4.15	Total Circulation of Materials (Total questions 4.11 & 4.12)	29,954	*24,243*
4.16	Total Collection Use (Total questions 4.13 & 4.15)	30,760	*26,855*
4.17	Grand Total Circulation of Children's Materials (Total questions 4.6 & 4.9)	10,618	*6,088*

REFERENCE TRANSACTIONS

4.18	Total Reference Transactions	1,954	*1,872*
4.18a	Regarding the number of Reference Transactions entered, is this an annual count or an annual estimate based on a typical week or weeks?	ES - Annual Estimate Based on Typical Week(s)	*ES - Annual Estimate Based on Typical Week(s)*
4.19	Does the library offer virtual reference?	Y	*Y*

Interlibrary Loan

INTERLIBRARY LOAN - MATERIALS RECEIVED (BORROWED)

4.20	TOTAL MATERIALS RECEIVED	6,243	*4,525*

INTERLIBRARY LOAN - MATERIALS PROVIDED (LOANED)

4.21	TOTAL MATERIALS PROVIDED	9,751	*8,258*

5. TECHNOLOGY AND TELECOMMUNICATIONS

Report all information as of December 31, 2021.

SYSTEMS AND SERVICES

5.1	Automated circulation system?	Y	*Y*
5.2	Online public access catalog (OPAC)?	Y	*Y*
5.3	Electronic access to the OPAC from outside the library?	Y	*Y*
5.4	Annual number of visits to the library's web site		*18,846*
5.5	Does the library use Internet filtering software on any computer?	N	*N*
5.6	Does your library use social media?	Y	*Y*
5.7	Does the library file for E-rate benefits?	N	*N*
5.8	Is the library part of a consortium for E-rate benefits?	N	*N*
5.9	If yes, in which consortium are you participating?	N/A	*N/A*
5.10	Name of the person responsible for the library's Information Technology (IT) services	Ryan Biracree	*Ryan Biracree*

| 5.11 | IT contact's telephone number (enter 10 digits only and hit the Tab key) | (845) 424-3020 | *(845) 424-3020* |

| 5.12 | IT contact's email address | ryan@desmondfishlibrary.org | *ryan@desmondfishlibrary.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. | 34 | *34* |

BUDGETED POSITIONS IN FULL-TIME EQUIVALENTS

6.2	Library Director (certified)	1	*1*
6.3	Vacant Library Director (certified)	0	*0*
6.4	Librarian (certified)	1	*0*
6.5	Vacant Librarian (certified)	0	*0*
6.6	Library Manager (not certified)	0	*0*
6.7	Vacant Library Manager (not certified)	0	*0*
6.8	Library Specialist/Paraprofessional (not certified)	1	*2*
6.9	Vacant Library Specialist/Paraprofessional (not certified)	0	*0*

6.10	Other Staff	8	*6*
6.11	Vacant Other Staff	0	*0*
6.12	TOTAL PAID STAFF (Total questions 6.2, 6.4, 6.6, 6.8 & 6.10)	11.00	*9.00*
6.13	VACANT TOTAL PAID STAFF (Total questions 6.3, 6.5, 6.7, 6.9 & 6.11)	0.00	*0.00*

SALARY INFORMATION

6.14	FTE - Entry Level Librarian (certified)	1	*N/A*
6.15	Salary - Entry Level Librarian (certified)	$53,000	*N/A*
6.16	FTE - Library Director (certified)	1	*1*
6.17	Salary - Library Director (certified)	$75,000	*$71,000*
6.18	FTE - Library Manager (not certified)	N/A	*N/A*
6.19	Salary - Library Manager (not certified)	N/A	*N/A*

Note: We don't have a Library Manager--hence no salary is listed.

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.

1.	Is governed by written bylaws which define the structure and governing functions of the library board of trustees, and	Y	*Y*

which shall be reviewed
and re-approved by the
board of trustees at least
once every five years or
earlier if required by law.

2.   Has a community-based,
      board-approved, written
      long-range plan of service   Y   *Y*
      developed by the library
      board of trustees and staff.

3.   Provides a board-approved
      written annual report to the
      community on the library's
      progress in meeting its
      mission, goals and   Y   *Y*
      objectives, as outlined in
      the library's long-range
      plan of service.

4.   Has board-approved written
      policies for the operation of
      the library, which shall be
      reviewed and updated at   Y   *Y*
      least once every five years
      or earlier if required by law.

5.   Annually prepares and
      publishes a board-
      approved, written budget,
      which enables the library to Y   *Y*
      address the community's
      needs, as outlined in the
      library's long-range plan of
      service.

6.   Periodically evaluates the
      effectiveness of the library's
      programs, services and
      collections to address   Y   *Y*
      community needs, as
      outlined in the library's
      long-range plan of service.

7.   Is open the minimum
      standard number of public   Y   *N*
      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:

8a.	space	Y	*Y*
8b.	lighting	Y	*Y*
8c.	shelving	Y	*Y*
8d.	seating	Y	*Y*
8e.	power infrastructure	Y	*Y*
8f.	data infrastructure	Y	*Y*
8g.	public restroom	Y	*Y*
9.	Provides programming to address community needs, as outlined in the library's long-range plan of service.	Y	*Y*

10. Provides

10a.	a circulation system that facilitates access to the local library collection and other library catalogs	Y	*Y*
10b.	equipment, technology, and internet connectivity to address community needs and facilitate access to information.	Y	*Y*
11.	Provides access to current library 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.	Y	*Y*
12.	Employs a paid director in accordance with the	Y	*Y*

provisions of
Commissioner's Regulation
90.8.

13. Provides library staff with
annual technology training,
appropriate to their
position, to address   Y   *Y*
community needs, as
outlined in the library's
long-range plan of service.

14. Establishes and maintains
partnerships with other
educational, cultural or
community organizations
which enable the library to Y   *Y*
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 here to read
general instructions before completing this section.

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

8.1	Main Library	1	*1*
8.2	Branches	0	*0*
8.3	Bookmobiles	0	*0*
8.4	Other Outlets	0	*0*
8.5	TOTAL PUBLIC SERVICE OUTLETS (Total questions 8.1 - 8.4)	1	*1*

PUBLIC SERVICE HOURS - Report hours to <u>two</u> decimal places.

8.6	Minimum Weekly Total Hours - Main Library	48.00	*47.00*
8.7	Minimum Weekly Total	0.00	*0.00*

Hours - Branch Libraries

8.8	Minimum Weekly Total Hours - Bookmobiles	0.00	*0.00*
8.9	Minimum Weekly Total Hours - Total Hours Open (Total questions 8.6 - 8.8)	48.00	*47.00*
8.10	Annual Total Hours - Main Library	2,405.00	*941.00*
8.11	Annual Total Hours - Branch Libraries	0.00	*0.00*
8.12	Annual Total Hours - Bookmobiles	0.00	*0.00*
8.13	Annual Hours Open - Total Hours Open (Total questions 8.10 through 8.12)	2,405.00	*941.00*

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 physically closed to the public for any period of time due to the Coronavirus (COVID-19) pandemic?	Yes	*Yes*
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?	Yes	*Yes*
CV3	Did the library allow users to complete registration for library cards online without having to come to the library during the	Yes	*Yes*

Coronavirus (COVID-19)
pandemic?

CV4   Did the library provide
       reference service via the
       Internet or telephone when
       the building was physically   Yes   *Yes*
       closed to the public during
       the Coronavirus (COVID-
       19) pandemic?

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

CV6   Did the library intentionally
       provide Wi-Fi Internet
       access to users outside the   Yes   *Yes*
       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   No   *No*
       outlets during the
       Coronavirus (COVID-19)
       pandemic?

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

CV9   Number of Weeks an Outlet
       Had Limited Occupancy   52
       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.

If you have multiple libraries, you may 1) enter the data for the Service Outlet Information section directly into the survey as usual or 2) send Baker and Taylor the data for this section to be uploaded into 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 here. Complete this form and email it to collectconnect@baker-taylor.com

1.	Outlet Name	Alice Curtis Desmond and Hamilton Fish Library	*Alice Curtis Desmond and Hamilton Fish Library*
2.	Outlet Name Status	00 (for no change)	*00 (for no change)*
3.	Street Address	472 route 403	*472 route 403*
4.	Outlet Street Address Status	00 (for no change)	*00 (for no change)*
5.	City	Garrison	*Garrison*
6.	Zip Code	10524	*10524*
7.	Phone (enter 10 digits only)	(845) 424-3020	*(845) 424-3020*
8.	Fax Number (enter 10 digits only)	(845) 424-4061	*(845) 424-4061*
9.	E-mail Address	director@desmondfishlibrary.org	*director@desmondfishlibrary.org*
10.	Outlet URL	Http://DesmondFishLibrary.org	*Http://DesmondFishLibrary.org*
11.	County	Putnam	*Putnam*
12.	School District	Garrison Union Free School District	*Garrison Union Free School District*
13.	Library System	Mid-Hudson Library System	*Mid-Hudson Library System*
14.	Outlet Type Code (select one):	CE	*CE*

15.	Public Service Hours Per Year for This Outlet	2,405	*941*
16.	Number of Weeks This Outlet is Open	52	*24*
16a	Number of weeks an outlet closed due to COVID-19	0	*28*
16b	Number of weeks an outlet had limited occupancy due to COVID-19	52	*14*
17.	Does this outlet have meeting space available for public use (non-library sponsored programs, meetings and/or events)?	Y	*Y*
18.	Is the meeting space available for public use even when the outlet is closed?	N	*Y*
19.	Total number of non-library sponsored programs, meetings and/or events at this outlet	15	*81*
20.	Enter the appropriate outlet code (select one):	LO	*LO*
21.	Who owns this outlet building?	Library Board	*Library Board*
22.	Who owns the land on which this outlet is built?	Library Board	*Library Board*
23.	Indicate the year this outlet was initially constructed	1980	*1980*
24.	Indicate the year this outlet underwent a major renovation costing $25,000 or more	2020	*2020*

25.	Square footage of the outlet	9,467		*9,467*
26.	Number of Internet Computers Used by General Public	12		*24*

Note: Number of public computers was reduced due to social distancing for COVID

27.	Number of uses (sessions) of public Internet computers per year	742		*687*
27a	Reporting Method for Number of Uses of Public Internet Computers Per Year	ES - Annual Estimate Based on Typical Week(s)		
28.	Type of connection on the outlet's public Internet computers	Cable		*Cable*
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.	Maximum <u>upload</u> speed of connection on the outlet's public Internet computers			*8 Greater than or equal to 15 mbps and less than 25 mbps*
31.	Internet Provider	Cablevision/Optimum		*Cablevision/Optimum*
32.	WiFi Access	No restrictions to access		*No restrictions to access*
33.	Wireless Sessions	7,204		*8,355*
33a	Reporting Method for Wireless Sessions	ES - Annual Estimate Based on Typical Week(s)		
34.	Does the outlet have a building entrance that is physically accessible to a person in a wheelchair?	Y		*Y*
35.	Is every public part of the outlet accessible to a person	Y		*Y*

in a wheelchair?

36.	Does your **outlet** have a Makerspace?	Y	*Y*
37.	*LIBID*	3200482455	*3200482455*
38.	*FSCSID*	NY0251	*NY0251*
39.	*Number of Bookmobiles in the Bookmobile Outlet Record*	0	*0*
40.	*Outlet Structure Status*	00 (for no change from previous year)	*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) | 11 | *10* |

NUMBER OF TRUSTEES AND TERMS

10.2	Does your library have a range of trustees stated in the library's charter documents (incorporation)?	Yes	*Yes*
10.3	If yes, what is the range?	5-25	*5-25*
10.4	If your library has a range, how many voting positions are stated in the library's current by-laws?	25	*25*
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 (incorporation) state a specified term for trustees? If no, please explain in a Note. | Yes | *Yes* |

| 10.7 | If yes, what is the trustee term length, as stated in your library's charter documents (incorporation)? | 3 years | *3 years* |

BOARD MEMBER SELECTION

| 10.8 | Enter Board Member Selection Code (select one): | EA - board members are elected by the library association membership | *EA - board members are elected by the library association membership* |

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	Anita	*Anita*
10.10	Last Name	Prentice	*Prentice*
10.11	Mailing Address	848 Route 9D	*848 Route 9D*
10.12	City	Garrison	*Garrison*
10.13	Zip Code (5 digits only)	10524	*10524*
10.14	Phone (enter 10 digits only)	(845) 424-3663	*(845) 424-3663*
10.15	E-mail Address	anitaprentice@gmail.com	*anitaprentice@gmail.com*
10.16	Term Begins - Month	January	*January*
10.17	Term Begins - Year (yyyy)	2020	*2020*
10.18	Term Expires - Month	December	*December*

10.19	Term Expires - Year (yyyy)	2022	*2022*
10.20	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	*Yes*
10.21	The date the Oath of Office was taken (mm/dd/yyyy)	N/A	*N/A*
10.22	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
10.23	Is this a brand new trustee?	N	*N*

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.

1.	Status	Filled	*Filled*
2.	First Name of Board Member	Elizabeth	*Elizabeth*
3.	Last Name of Board Member	Anderson	*Anderson*
4.	Mailing Address	PO Box 246	*PO Box 246*
5.	City	Garrison	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*

7.	E-mail address	anderson@beekmanwealth.com	*anderson@beekmanwealth.com*
8.	Office Held or Trustee	Vice President	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2025	*2021*
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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Sarah	*Sarah*
3.	Last Name of Board Member	Bayne	*Bayne*

4.	Mailing Address	854 Route 9D	*854 Route 9D*
5.	City	Garrison	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	Sarahbayne1@gmail.com.	*Sarahbayne1@gmail.com.*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2021	*2021*
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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*

2.	First Name of Board Member	Erik	*Robert*
3.	Last Name of Board Member	Brown	*Culp*
4.	Mailing Address	80 Parsonage Street	*37 Philipse Brook Rd.*
5.	City	Cold Spring, NY	*Garrison, NY*
6.	Zip Code (5 digits only)	10516	*10524*
7.	E-mail address	erikbrown24@gmail.com	*raculp@optonline.net*
8.	Office Held or Trustee	Trustee	*Vice President*
9.	Term Begins - Month	March	*January*
10.	Term Begins - Year (year)	2021	*2020*
11.	Term Expires	October	*December*
12.	Term Expires - Year (yyyy)	2024	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*

16.	Is this a brand new trustee?	Y	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Robert	*Sundance*
3.	Last Name of Board Member	Culp	*DiGiovanni*
4.	Mailing Address	37 Philipse Brook Rd.	*2 Putnam Ridge Road*
5.	City	Garrison, NY	*Garrison, NY*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	raculp@optonline.net	*sundanced@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*2021*
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	*Yes*

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

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

| 16. | Is this a brand new trustee? | N | *N* |

| 1. | Status | Filled | *Filled* |

| 2. | First Name of Board Member | Sundance | *Eliza* |

| 3. | Last Name of Board Member | DiGiovanni | *Fish* |

| 4. | Mailing Address | 2 Putnam Ridge Road | *8 Harrison Street #2* |

| 5. | City | Garrison, NY | *New York* |

| 6. | Zip Code (5 digits only) | 10524 | *10013* |

| 7. | E-mail address | sundanced@gmail.com | *elizamacfish@gmail.com* |

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

| 9. | Term Begins - Month | January | *January* |

| 10. | Term Begins - Year (year) | 2018 | *2021* |

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

| 12. | Term Expires - Year (yyyy) | 2022 | *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 | Yes | *Yes* |

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	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Eliza	*Hamilton*
3.	Last Name of Board Member	Fish	*Fish*
4.	Mailing Address	8 Harrison Street #2	*105 Hudson St., Suite 407*
5.	City	New York	*New York, NY*
6.	Zip Code (5 digits only)	10013	*10013*
7.	E-mail address	elizamacfish@gmail.com	*HF@HamiltonFish.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2024	*2021*

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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Hamilton	*Kyle*
3.	Last Name of Board Member	Fish	*Good*
4.	Mailing Address	105 Hudson St., Suite 407	*85 Lower Station Road*
5.	City	New York, NY	*Garrison, NY*
6.	Zip Code (5 digits only)	10013	*10524*
7.	E-mail address	HF@HamiltonFish.com	*kylegoodnyc@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*

10.	Term Begins - Year (year)	2020	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*2021*
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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Kyle	*Peter*
3.	Last Name of Board Member	Good	*Hofmann*
4.	Mailing Address	85 Lower Station Road	*Po Box 450*
5.	City	Garrison, NY	*Garrison, NY*
6.	Zip Code (5 digits only)	10524	*10524*

7.	E-mail address	kylegoodnyc@gmail.com	*drphofmann@aol.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2021*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2021	*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.	Yes	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Peter	*Jonathan*
3.	Last Name of Board Member	Hofmann	*Kruk*

4.	Mailing Address	Po Box 450	*24 Mountain View Dr.*
5.	City	Garrison, NY	*Cold Spring, NY*
6.	Zip Code (5 digits only)	10524	*10516*
7.	E-mail address	drphofmann@aol.com	*jonathankruk@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2018	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2020	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*

2.	First Name of Board Member	Derrick	*Susan*
3.	Last Name of Board Member	Hopkins	*Landstreet*
4.	Mailing Address	341 Avery Road	*644 Wolcott Ave.*
5.	City	Garrison, NY	*Beacon, NY*
6.	Zip Code (5 digits only)	10524	*12508*
7.	E-mail address	derrickshopkins@outlook.com	*susan.crossroads@gmail.com*
8.	Office Held or Trustee	Treasurer	*Secretary*
9.	Term Begins - Month	March	*January*
10.	Term Begins - Year (year)	2021	*2021*
11.	Term Expires	October	*December*
12.	Term Expires - Year (yyyy)	2024	*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.	Yes	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or	N/A	*N/A*

county clerk (mm/dd/yyyy

16.	Is this a brand new trustee?	Y	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Jonathan	*George*
3.	Last Name of Board Member	Kruk	*Lansbury*
4.	Mailing Address	24 Mountain View Dr.	*267 Avery Rd.*
5.	City	Cold Spring, NY	*Garrison, NY*
6.	Zip Code (5 digits only)	10516	*10524*
7.	E-mail address	jonathankruk@gmail.com	*george@lansbury.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*2021*
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	Yes	*Yes*

from beginning date to
ending date.

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

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

| 16. | Is this a brand new trustee? | N | *N* |

| 1. | Status | Filled | *Filled* |

| 2. | First Name of Board Member | Susan | *David* |

| 3. | Last Name of Board Member | Landstreet | *Lilburne* |

| 4. | Mailing Address | 644 Wolcott Ave. | *29 Garrison Landing* |

| 5. | City | Beacon, NY | *Garrison, NY* |

| 6. | Zip Code (5 digits only) | 12508 | *10524* |

| 7. | E-mail address | susan.crossroads@gmail.com | *lilburne@highlands.com* |

| 8. | Office Held or Trustee | Secretary | *Trustee* |

| 9. | Term Begins - Month | January | *January* |

| 10. | Term Begins - Year (year) | 2019 | *2020* |

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

| 12. | Term Expires - Year (yyyy) | 2021 | *2022* |

| 13. | Is the trustee serving a full term? If No, add a Note. The Note should identify the previous trustee whose | Yes | *Yes* |

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	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*

1.	Status	Filled	*Filled*
2.	First Name of Board Member	George	*Frank*
3.	Last Name of Board Member	Lansbury	*Lucente*
4.	Mailing Address	267 Avery Rd.	*19 Old West Point East*
5.	City	Garrison, NY	*Garison, NY*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	george@lansbury.com	*lucente@aol.com*
8.	Office Held or Trustee	Vice President	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2021*
11.	Term Expires	December	*December*

12.	Term Expires - Year (yyyy)	2021	*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.	Yes	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*

1.	Status	Filled	*Filled*
2.	First Name of Board Member	David	*Stacy*
3.	Last Name of Board Member	Lilburne	*Morrison*
4.	Mailing Address	29 Garrison Landing	*171 Avery Road*
5.	City	Garrison, NY	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	lilburne@highlands.com	*slm1711@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*

9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*2021*
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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Frank	*Frederick*
3.	Last Name of Board Member	Lucente	*Osborn III*
4.	Mailing Address	19 Old West Point East	*P.O. Box 347*
5.	City	Garison, NY	*Garrison*

6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	lucente@aol.com	*Osbornf@aol.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2021	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Stacy	*Timothy*

3.	Last Name of Board Member	Morrison	*Rasic*
4.	Mailing Address	171 Avery Road	*6 Canopus Hill Road*
5.	City	Garrison	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	slm1711@gmail.com	*trasic@jankorasic.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2020*
11.	Term Expires	July	*December*
12.	Term Expires - Year (yyyy)	2021	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*

#	Question	Response	Response
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Frederick	*Michael*
3.	Last Name of Board Member	Osborn III	*Rauch*
4.	Mailing Address	P.O. Box 347	*966 Old Albany Post Road*
5.	City	Garrison	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	Osbornf@aol.com	*mbr.rauch@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*

15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*Y*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Timothy	*Arthur*
3.	Last Name of Board Member	Rasic	*Ross*
4.	Mailing Address	6 Canopus Hill Road	*43 Snake Hill Rd.*
5.	City	Garrison	*Garrison, NY*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	trasic@jankorasic.com	*arthur.ross@gmail.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2018	*2019*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2020	*2021*
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	Yes	*Yes*

term, which was to run
from beginning date to
ending date.

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

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

16.	Is this a brand new trustee?	N	*N*

1.	Status	Filled	*Filled*
2.	First Name of Board Member	Michael	*Jennifer*
3.	Last Name of Board Member	Rauch	*Schmalz*
4.	Mailing Address	966 Old Albany Post Road	*300 Lane Gate Rd.*
5.	City	Garrison	*Cold Spring, NY*
6.	Zip Code (5 digits only)	10524	*10516*
7.	E-mail address	mbr.rauch@gmail.com	*jennifermschmalz@icloud.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*2022*
13.	Is the trustee serving a full term? If No, add a Note. The Note should identify	Yes	*Yes*

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	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	Y	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Arthur	*Kristin*
3.	Last Name of Board Member	Ross	*Sorenson*
4.	Mailing Address	43 Snake Hill Rd.	*1000 Old Albany Post Road*
5.	City	Garrison, NY	*Garrison*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	arthur.ross@gmail.com	*kristin.sorenson@wpaog.org*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2020*

11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2021	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Jennifer	*Richard*
3.	Last Name of Board Member	Schmalz	*Syrek*
4.	Mailing Address	300 Lane Gate Rd.	*PO Box 344*
5.	City	Cold Spring, NY	*Cold Spring, NY*
6.	Zip Code (5 digits only)	10516	*10516*
7.	E-mail address	jcmarrinan@icloud.com	*rsyrek1012@gmail.com*

8.	Office Held or Trustee	Trustee	*Financial Officer*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2020	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2022	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	*Filled*
2.	First Name of Board Member	Kristin	*Neal*
3.	Last Name of Board Member	Sorenson	*Zuckerman*
4.	Mailing Address	1000 Old Albany Post Road	*663 Old Albany Post Rd.*

5.	City	Garrison	*Garrison, NY*
6.	Zip Code (5 digits only)	10524	*10524*
7.	E-mail address	kristin.sorenson@wpaog.org	*nzuckerman@yahoo.com*
8.	Office Held or Trustee	Trustee	*Trustee*
9.	Term Begins - Month	January	*January*
10.	Term Begins - Year (year)	2019	*2020*
11.	Term Expires	December	*December*
12.	Term Expires - Year (yyyy)	2021	*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	*Yes*
14.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A	*N/A*
15.	The date the Oath of Office was filed with town or county clerk (mm/dd/yyyy)	N/A	*N/A*
16.	Is this a brand new trustee?	N	*N*
1.	Status	Filled	
2.	First Name of Board Member	Richard	

3.	Last Name of Board Member	Syrek

4.	Mailing Address	PO Box 344

5.	City	Cold Spring, NY

6.	Zip Code (5 digits only)	10516

7.	E-mail address	rsyrek1012@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.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A

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

16.	Is this a brand new trustee?	N

1.	Status	Filled
2.	First Name of Board Member	Neal
3.	Last Name of Board Member	Zuckerman
4.	Mailing Address	663 Old Albany Post Rd.
5.	City	Garrison, NY
6.	Zip Code (5 digits only)	10524
7.	E-mail address	nzuckerman@yahoo.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.	The date the Oath of Office (mm/dd/yyyy) was taken	N/A

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

16.   Is this a brand new trustee? N

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   Anita Prentice   *Anita Prentice*

2.   Has the trustee participated
        in trustee education in the   Y   *N*
        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.

11.1   Does the library receive
        any local public funds? If
        yes, complete one record   Y   *Y*
        for each taxing authority; if
        no, go to question 11.3.

1.   Source of Funds   Town   *County*

2.   Name of funding County,
        Municipality or School   Town of Philipstown   *Putnam County*
        District

3.   Amount $27,500   *$15,750*

4.   Subject to public vote held N/A   *N*

in reporting year or in a
previous reporting year(s).

| 5. | Written Contractual Agreement | N/A | *N* |

| 1. | Source of Funds | School District | *Town* |

| 2. | Name of funding County, Municipality or School District | Garrision Unified Free School | *Town of Philipstown* |

| 3. | Amount | $300,000 | *$27,500* |

| 4. | Subject to public vote held in reporting year or in a previous reporting year(s). | Y | *N* |

| 5. | Written Contractual Agreement | N | *N* |

| 1. | Source of Funds | County | *School District* |

| 2. | Name of funding County, Municipality or School District | Putnam | *Garrison Union Free School District* |

| 3. | Amount | $15,000 | *$300,000* |

| 4. | Subject to public vote held in reporting year or in a previous reporting year(s). | N | *Y* |

| 5. | Written Contractual Agreement | N | *N* |

| 11.2 | **TOTAL LOCAL PUBLIC FUNDS** | $342,500 | *$343,250* |

SYSTEM CASH GRANTS TO MEMBER LIBRARY

| 11.3 | Local Library Services Aid | $2,365 | *$1,444* |

(LLSA)

11.4	Record all Central Library Services Aid monies received from system headquarters	$0	$0

11.5	Additional State Aid received from the System	$25,000	$0

Note: Library Aid Grant from Sandy Galef

11.6	Federal Aid received from the System	$0	$0

11.7	Other Cash Grants	$0	$1,800

11.8	**TOTAL SYSTEM CASH GRANTS** (Add Questions 11.3, 11.4, 11.5, 11.6 and 11.7)	$27,365	$3,244

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	$0

Federal Aid/Other Receipts

FEDERAL AID FOR LIBRARY OPERATION

11.10	LSTA	$0	$0

11.11	Other Federal Aid	$0	$0

11.12	**TOTAL FEDERAL AID** (Add Questions 11.10 and 11.11)	$0	$0

11.13	**CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE**	$0	$0

OTHER RECEIPTS

| 11.14 | Gifts and Endowments | $14,210 | *$68,198* |

Note: Includes ILC Internship donation

| 11.15 | Fund Raising | $77,439 | *$71,759* |

| 11.16 | Income from Investments | $31 | *$991* |

| 11.17 | Library Charges | $1,035 | *$257* |

| 11.18 | Other | $21,070 | *$240,236* |

Note: Includes NYS Construction grant

| 11.19 | **TOTAL OTHER RECEIPTS** (Add Questions 11.14, 11.15, 11.16, 11.17 and 11.18) | $113,785 | *$381,441* |

| 11.20 | **TOTAL OPERATING FUND RECEIPTS** (Add Questions 11.2, 11.8, 11.9, 11.12, 11.13 and 11.19) | $483,650 | *$727,935* |

| 11.21 | **BUDGET LOANS** | $0 | *$62,200* |

Transfers/Grant Total

TRANSFERS

| 11.22 | From Capital Fund (Same as Question 14.8) | | *$0* |

| 11.23 | From Other Funds | $293,649 | *$0* |

Note: Endowment Funds

| 11.24 | **TOTAL TRANSFERS** (Add Questions 11.22 and 11.23) | $293,649 | *$0* |

| 11.25 | BALANCE IN OPERATING FUND - Beginning Balance for Fiscal Year Ending 2021 (Same as Question 12.40 of | $372,494 | *$372,494* |

previous year if fiscal year
has not changed)

Note: Due to new treasurer and director, this is the amount we can account for.

| 11.26 | **GRAND TOTAL RECEIPTS, BUDGET LOANS, TRANSFERS AND BALANCE** (Add Questions 11.20, 11.21, 11.24 and 11.25; Same as Question 12.40) | $1,149,793 | *$1,162,629* |

12. OPERATING FUND DISBURSEMENTS

Staff/Collection/Capital/Operation and Maintenance

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	$77,000	*$76,000*
12.2	Other Staff	$263,677	*$278,317*
12.3	**Total Salaries & Wages Expenditures** (Add Questions 12.1 and 12.2)	$340,677	*$354,317*
12.4	**Employee Benefits Expenditures**	$93,148	*$94,082*
12.5	**Total Staff Expenditures (Add Questions 12.3 and 12.4)**	$433,825	*$448,399*

COLLECTION EXPENDITURES

| 12.6 | Print Materials Expenditures | $15,169 | *$15,004* |
| 12.7 | Electronic Materials Expenditures | $3,982 | *$5,819* |

12.8	Other Materials Expenditures	$3,104	*$7,302*

Note: For most of 2021 we were unstaffed, missing a library assistant, a children's librarian for six months and a new director. Less staff meant less expenses overall.

12.9	**Total Collection Expenditures** (Add Questions 12.6, 12.7 and 12.8)	$22,255	*$28,125*

CAPITAL EXPENDITURES FROM OPERATING FUNDS

12.10	From Local Public Funds (71PF)	$0	*$0*

12.11	From Other Funds (71OF)	$131,650	*$137,163*

Note: Including planning board fees, reading garden and walking path projects

12.12	**Total Capital Expenditures** (Add Questions 12.10 and 12.11)	$131,650	*$137,163*

Note: Planning board fees, solar, walking path and reading garden expenses

OPERATION AND MAINTENANCE OF BUILDINGS

Repairs to Building & Building Equipment

12.13	From Local Public Funds (72PF)	$0	*$0*

12.14	From Other Funds (72OF)	$26,109	*$51,989*

12.15	**Total Repairs** (Add Questions 12.13 and 12.14)	$26,109	*$51,989*

12.16	Other Disbursements for Operation & Maintenance of Buildings	$81,387	*$66,967*

12.17	**Total Operation & Maintenance of Buildings** (Add Questions 12.15 and 12.16)	$107,496	*$118,956*

MISCELLANEOUS EXPENSES

12.18	Office and Library Supplies	$4,480	*$6,065*

12.19	Telecommunications	$3,772		*$3,923*
12.20	Postage and Freight	$969		*$1,944*
12.21	Professional & Consultant Fees	$34,163		*$20,085*

Note: Including professional audit and increased bookkeeping expenses due to new treasurer and new director

12.22	Equipment	$6,288		*$5,756*
12.23	Other Miscellaneous	$3,573		*$41,801*
12.24	**Total Miscellaneous Expenses** (Add Questions 12.18, 12.19, 12.20, 12.21, 12.22 and 12.23)	$53,245		*$79,574*

Contracts/Debt Service/Transfers/Grand Total

12.25	**CONTRACTS WITH PUBLIC LIBRARIES AND/OR PUBLIC LIBRARY SYSTEMS IN NEW YORK STATE**	$7,249		*$7,498*

DEBT SERVICE

Capital Purposes Loans (Principal and Interest)

12.26	From Local Public Funds (73PF)	$0		*$0*
12.27	From Other Funds (73OF)	$0		*$0*
12.28	**Total** (Add Questions 12.26 and 12.27)	$0		*$0*

Other Loans

12.29	Budget Loans (Principal and Interest)	$0		*$0*
12.30	Short-Term Loans	$0		*$0*
12.31	**Total Debt Service** (Add	$0		*$0*

Questions 12.28, 12.29 and
12.30)

12.32	**TOTAL OPERATING FUND DISBURSEMENTS** (Add Questions 12.5, 12.9, 12.12, 12.17, 12.24, 12.25 and 12.31)	$755,720	*$819,715*

TRANSFERS

Transfers to Capital Fund

12.33	From Local Public Funds (76PF)	$0	*$0*
12.34	From Other Funds (76OF)	$81,103	*$0*
12.35	**Total Transfers to Capital Fund** (Add Questions 12.33 and 12.34; same as Question 13.8)	$81,103	*$0*
12.36	**Transfer to Other Funds**	$0	*$0*
12.37	**TOTAL TRANSFERS** (Add Questions 12.35 and 12.36)	$81,103	*$0*
12.38	**TOTAL DISBURSEMENTS AND TRANSFERS** (Add Questions 12.32 and 12.37)	$836,823	*$819,715*
12.39	BALANCE IN OPERATING FUND - Ending Balance for the Fiscal Year Ending 2021	$312,970	*$342,914*
12.40	**GRAND TOTAL DISBURSEMENTS, TRANSFERS & BALANCE** (Add Questions 12.38 and 12.39; same as Question 11.26)	$1,149,793	*$1,162,629*

ASSURANCE

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).	04/11/2022	*03/13/2021*

FISCAL AUDIT

12.42	Last audit performed (mm/dd/yyyy)	04/01/2021	*05/10/2019*
12.43	Time period covered by this audit (mm/dd/yyyy) - (mm/dd/yyyy)	01/01/2020-12/31/2020	*01/01/2018 - 12/31/2018*
12.44	Indicate type of audit (select one):	Private Accounting Firm	*Private Accounting Firm*

CAPITAL FUND

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

13. CAPITAL FUND RECEIPTS

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

REVENUES FROM LOCAL SOURCES

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

STATE AID FOR CAPITAL PROJECTS

| 13.4 | State Aid Received for Construction | $21,070 | *$0* |

Note: Walking Path grant

| 13.5 | Other State Aid | $25,000 | *$0* |

Note: Library Aid from Sandy Galef

| 13.6 | **Total State Aid** (Add Questions 13.4 and 13.5) | $46,070 | *$0* |

FEDERAL AID FOR CAPITAL PROJECTS

| 13.7 | **TOTAL FEDERAL AID** | $0 | *$0* |

INTERFUND REVENUE

| 13.8 | Transfer from Operating Fund (Same as Question 12.35) | $81,103 | *$0* |

Note: Includes year-end walking path garden/bench donations

| 13.9 | **TOTAL REVENUES** (Add Questions 13.3, 13.6, 13.7 and 13.8) | $127,173 | *$0* |

| 13.10 | **NON-REVENUE RECEIPTS** | $0 | *$0* |

| 13.11 | **TOTAL CASH RECEIPTS** (Add Questions 13.9 and 13.10) | $127,173 | *$0* |

| 13.12 | BALANCE IN CAPITAL FUND - Beginning Balance for Fiscal Year Ending 2021 (Same as Question 14.11 of previous year, if fiscal year has not changed) | $0 | *$0* |

| 13.13 | **TOTAL CASH RECEIPTS AND BALANCE**(Add Questions 13.11 and 13.12; same as Question 14.12) | $127,173 | *$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 here to read general instructions before completing this section.

PROJECT EXPENDITURES

14.1	Construction	$94,693	*$0*

14.2	Incidental Construction	$5,231	*$0*

Note: Includes 2021 Planning Board Fees & walking path blueprints

Other Disbursements

14.3	Purchase of Buildings	$0	*$0*

14.4	Interest	$0	*$0*

14.5	Collection Expenditures	$0	*$0*

14.6	Total Other Disbursements (Add Questions 14.3, 14.4 and 14.5)	$0	*$0*

14.7	**TOTAL PROJECT EXPENDITURES** (Add Questions 14.1, 14.2 and 14.6)	$99,924	*$0*

14.8	**TRANSFER TO OPERATING FUND** (Same as Question 11.22)	$0	*$0*

14.9	**NON-PROJECT EXPENDITURES**	$0	*$0*

14.10	**TOTAL CASH DISBURSEMENTS AND TRANSFERS** (Add Questions 14.7, 14.8 and 14.9)	$99,924	*$0*

14.11	**BALANCE IN CAPITAL FUND** - Ending Balance for the Fiscal Year Ending 2021	$27,249	*$0*

14.12	**TOTAL CASH**	$127,173	*$0*

DISBURSEMENTS AND BALANCE (Add Questions 14.10 and 14.11; same as Question 13.13)

15. CENTRAL LIBRARIES

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

16. FEDERAL TOTALS

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

16.1	Total ALA-MLS	1.70	*0.85*
16.2	Total Librarians	2.55	*2.55*
16.3	All Other Paid Staff	6.80	*5.10*
16.4	Total Paid Employees	9.35	*7.65*
16.5	State Government Revenue	$27,365	*$1,444*

Note: Includes Library Aid in amount of $25,000 for Remote Learning Grant

16.6	Federal Government Revenue	$0	*$0*
16.7	Other Operating Revenue	$113,785	*$445,441*
16.8	Total Operating Revenue	$483,650	*$790,135*
16.9	Other Operating Expenditures	$167,990	*$206,028*
16.10	Total Operating Expenditures	$624,070	*$682,552*
16.11	Total Capital Expenditures	$231,574	*$137,163*
16.12	Print Materials	25,377	*26,028*
16.13	Total Registered Borrowers	2,798	*2,689*

16.14	Other Capital Revenue and Receipts	$81,103	*$0*
16.15	Number of Internet Computers Used by General Public	12	*24*
16.16	Total Uses (sessions) of Public Internet Computers Per Year	742	*687*
16.17	Wireless Sessions	7,204	*8,355*
16.18	Total Capital Revenue	$127,173	*$0*

17. FOR NEW YORK STATE LIBRARY USE ONLY

17.1	*LIB ID*	3200482455	*3200482455*
17.2	*Interlibrary Relationship Code*	ME	*ME*
17.3	*Legal Basis Code*	NP	*NP*
17.4	*Administrative Structure Code*	SO	*SO*
17.5	*FSCS Public Library Definition*	Y	*Y*
17.6	*Geographic Code*	OTH	*OTH*
17.7	*FSCS ID*	NY0251	*NY0251*
17.8	*SED CODE*	480404700039	*480404700039*
17.9	*INSTITUTION ID*	800000039683	*800000039683*

SUGGESTED IMPROVEMENTS

| Library Name: | ALICE CURTIS DESMOND & HAMILTON FISH LIB | *ALICE CURTIS DESMOND & HAMILTON FISH LIB* |

Library System:	Mid-Hudson Library System	*Mid-Hudson Library System*
Name of Person Completing Form:	Dede Farabaugh	*Jennifer McCreery*
Phone Number:	(845) 424-3020	*(845) 424-3020*
I am satisfied that this resource (Collect) is meeting library needs:	Agree	*Agree*
Applying this resource (Collect) will help improve library services to the public:	Agree	*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!		