

PROGRAM INFORMATION SHEET

1. Applicant Information

- a. Legal Name (5a from SF424S):
- b. Applicant D-U-N-S® Number (5f from SF424S):
- c. Does your organization have a current Central Contractor Registration (CCR)?
 Yes No
 If yes, what is the expiration date of your registration?

d. Organizational Unit (if different from Legal Name):

e. Organizational Unit Address

- Street1:
- Street2:
- City:
- County:
- State:
- ZIP+4/Postal Code:

f. Organizational Governance (Check one):

- | | |
|--|--|
| <input type="checkbox"/> State Government | <input type="checkbox"/> Public/ Indian Housing Authority |
| <input type="checkbox"/> County Government | <input type="checkbox"/> Nonprofit with 501C3 IRS Status (Other than Institution of Higher Education) |
| <input type="checkbox"/> City or Township Government | <input type="checkbox"/> Nonprofit without 501C3 IRS Status (Other than Institution of Higher Education) |
| <input type="checkbox"/> Special District Government | <input type="checkbox"/> Private Institution of Higher Education |
| <input type="checkbox"/> Regional Organization | <input type="checkbox"/> Individual |
| <input type="checkbox"/> U.S. Territory or Possession | <input type="checkbox"/> For-Profit Organization (Other than Small Business) |
| <input type="checkbox"/> Independent School District | <input type="checkbox"/> Small Business |
| <input type="checkbox"/> Public/ State Controlled Institution of Higher Education | <input type="checkbox"/> Hispanic-serving Institution |
| <input type="checkbox"/> Indian/ Native American Tribal Government (Federally Recognized) | <input type="checkbox"/> Historically Black College or University (HBCU) |
| <input type="checkbox"/> Indian/ Native American Tribal Government (Other than Federally Recognized) | <input type="checkbox"/> Tribally Controlled College or University (TCCU) |
| <input type="checkbox"/> Indian/ Native American Tribally Designated Organization | <input type="checkbox"/> Alaska Native or Native Hawaiian Serving Institution |
| | <input type="checkbox"/> Non-domestic (non-US) Entity |
| | <input type="checkbox"/> Other (specify) |

g. Organizational Unit Type (Check one):

- | | | |
|---|---|--|
| <input type="checkbox"/> Academic Library | <input type="checkbox"/> Library Association | <input type="checkbox"/> School Library or School District applying on behalf of a School Library or Libraries |
| <input type="checkbox"/> Aquarium | <input type="checkbox"/> Library Consortium | <input type="checkbox"/> Science/Technology Museum |
| <input type="checkbox"/> Arboretum/Botanical Garden | <input type="checkbox"/> Museum Library | <input type="checkbox"/> Special Library |
| <input type="checkbox"/> Art Museum | <input type="checkbox"/> Museum Services Organization/ Association | <input type="checkbox"/> Specialized Museum ** |
| <input type="checkbox"/> Children's/Youth Museum | <input type="checkbox"/> Native American Tribe/Native Hawaiian Organization | <input type="checkbox"/> State Library |
| <input type="checkbox"/> Community College | <input type="checkbox"/> Natural History/Anthropology Museum | <input type="checkbox"/> State Museum Agency |
| <input type="checkbox"/> Four-year College | <input type="checkbox"/> Nature Center | <input type="checkbox"/> State Museum Library |
| <input type="checkbox"/> General Museum* | <input type="checkbox"/> Planetarium | <input type="checkbox"/> Zoo |
| <input type="checkbox"/> Graduate School of Library and Information Science | <input type="checkbox"/> Public Library | <input type="checkbox"/> Institution of higher education other than listed above |
| <input type="checkbox"/> Historic House/Site | <input type="checkbox"/> Research Library/Archives | <input type="checkbox"/> Other, please specify: |
| <input type="checkbox"/> Historically Black College or University (HBCU) | | |
| <input type="checkbox"/> History Museum | | |

*A museum with collections representing two or more disciplines equally (e.g., art and history)

**A museum with collections limited to one narrowly defined discipline (e.g., textiles, maritime, ethnic group)

2. Organizational Financial Information

a. Please complete the following table for the applicant Organizational Unit for the three most recently completed fiscal years.

Fiscal Year	Total Revenue*	Total Expenses**	Surplus or Deficit
FY			
FY			
FY			

* For nonprofit tax filers, Total Revenue can be found on Line 12 of the IRS Form 990.

** For nonprofit tax filers, Total Expenses can be found on Line 18 of the IRS Form 990.

b. If you had a budget surplus or deficit above or below 10% of your annual operating budget for any of the three most recently completed fiscal years, please explain the circumstances of this surplus or deficit in your application narrative.

c. Were there any material weaknesses identified in your prior year's audit report? Yes No Not applicable

A **material weakness** is a deficiency, or combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis.

If **yes**, please explain below.

d. Has your organization had an A-133 audit in the past three years? Yes No

3. Grant Program Information

a. Laura Bush 21st Century Librarian Program

Select One Funding Category:

- Project Grant
- Collaborative Planning Grant
- National Forum Planning Grant

Select One Project Category:

- Master's-level Programs
- Doctoral-level Programs
- Early Career Development
- Continuing Education
- Programs to Build Institutional Capacity

b. National Leadership Grants—Libraries

Select One Funding Category:

- Project Grant
- Collaborative Planning Grant
- National Forum Planning Grant

Select One Project Category:

- Advancing Digital Resources
- Demonstration
- Research

c. Native American/Native Hawaiian Library Services

Select One Funding Category:

- Basic Grant Only
- Basic Grant with Education/Assessment Option
- Enhancement Grant
- Native Hawaiian Library Services

d. Museums for America

Select One Project Category:

- Learning Experiences
- Community Anchors
- Collections Stewardship

e. National Leadership Grants—Museums

Select One Project Category:

- Learning Experiences
- Community Anchors
- Collections Stewardship

f. Museum Grants for African American History and Culture

g. Native American/Native Hawaiian Museum Services

h. Sparks! Ignition Grants

Select Museum or Library:

- Museum
- Library

4. Please check this box if your project addresses the Campaign for Grade Level Reading initiative:

5. Funding Request Information

a. IMLS funds requested:

b. Cost share amount:

6. Project Subject Area

Please select the subject area(s) addressed by the proposed project:

- 21st Century Skills
- Afterschool/Out-of-School
- Broadband
- Civic/Community Engagement
- Collections Care/Preservation
- Cultural Heritage/Sustainability
- Early Learning
- Economic/Community Development
- Education Support
- Environment and Energy
- Global Awareness
- Health
- Information Infrastructure/Systems/Workflows
- Learning Tools and Interactives (Information/Media Literacy)
- Lifelong Learning/ Intergenerational
- STEM (Science, Technology, Engineering, Math)
- Workforce Development/Job Assistance
- Other (specify):

7. Population Served

Please select the population(s) served by the proposed project:

- General Population
- Early Childhood/Preschool (0-5 years)
- Middle Childhood/Primary School (6-12 years)
- Adolescents/High School (13-19 years)
- Adults
- Aging, Elderly, Senior Citizens (65+ years)
- Ethnic or Racial Minority Populations
- Military Families
- People with Mental or Physical Challenges/Disabilities
- People who are Low Income/Economically Disadvantaged
- Rural Populations
- Unemployed
- Other (specify):

8. Museum Profile (Museum Applicants Only)

	Yes	No
a. Is the institution either a unit of state or local government or a private not-for-profit organization that has tax-exempt status under the Internal Revenue Code and that is organized on a permanent basis for essentially educational or aesthetic purposes?	<input type="checkbox"/>	<input type="checkbox"/>
b. Does the institution own or use tangible objects, whether animate or inanimate?	<input type="checkbox"/>	<input type="checkbox"/>
c. Does the institution care for tangible objects whether animate or inanimate?	<input type="checkbox"/>	<input type="checkbox"/>
d. Are these objects exhibited by the institution to the general public on a regular basis through facilities the institution owns or operates?	<input type="checkbox"/>	<input type="checkbox"/>
e. Is the institution open and exhibiting tangible objects to the general public at least 120 days a year through facilities the institution owns or operates?	<input type="checkbox"/>	<input type="checkbox"/>
	Onsite	Offsite
f. Institution's attendance for the 12-month period prior to the application		
g. Year the institution was first open and exhibiting to the public		
h. Total number of days the institution was open to the public for the 12-month period prior to application		
	Yes	No
i. Does the institution employ at least one professional staff member, or the fulltime equivalent, whether paid or unpaid, who is primarily engaged in the acquisition, care, or exhibition to the public of tangible objects owned or used by the institution?	<input type="checkbox"/>	<input type="checkbox"/>
j. Number of full-time paid institution staff		
k. Number of full-time unpaid institution staff		
l. Number of part-time paid institution staff		
m. Number of part-time unpaid institution staff		

9. Project Elements (Museums for America and National Leadership Grants-Museums Applicants Only)

Your response to this question will help us match your application to reviewers with appropriate experience. Begin by choosing the project category that you selected in Question 3 (Grant Program Information).

LEARNING EXPERIENCES	
If you are applying in the Learning Experiences Project Category, select the <i>primary</i> element that is core to your proposed project from the list below.	
<input type="checkbox"/>	Exhibitions
<input type="checkbox"/>	Education Programs
<input type="checkbox"/>	Interpretation
<input type="checkbox"/>	Professional Development/Training
<input type="checkbox"/>	Public Programs
<input type="checkbox"/>	Publications
<input type="checkbox"/>	Research
<input type="checkbox"/>	Technology: Public Interface (websites, social media, apps)
<input type="checkbox"/>	Other:

COMMUNITY ANCHORS	
If you are applying in the Community Anchors Project Category, select the <i>primary</i> element that is core to your proposed project from the list below.	
<input type="checkbox"/>	Audience Development/Visitor Services
<input type="checkbox"/>	Evaluation/Visitor Studies
<input type="checkbox"/>	Organizational Planning and Development
<input type="checkbox"/>	Professional Development/Training
<input type="checkbox"/>	Research
<input type="checkbox"/>	Technology: Infrastructure Improvement (software, hardware)
<input type="checkbox"/>	Other:
COLLECTIONS STEWARDSHIP	
If you are applying in the Collections Stewardship Project Category, select the <i>primary</i> element that is core to your proposed project from the list below.	
<input type="checkbox"/>	Collections Management
<input type="checkbox"/>	Conservation
	<input type="checkbox"/> Survey
	<input type="checkbox"/> Treatment
	<input type="checkbox"/> Environmental Improvement
<input type="checkbox"/>	Professional Development/Training
<input type="checkbox"/>	Rehousing
<input type="checkbox"/>	Research
<input type="checkbox"/>	Technology: Collections Related (scanning, digitization, database management)
<input type="checkbox"/>	Other:
Types of Material	
<i>For conservation projects only.</i> Please identify the material type(s) that will be primarily affected by your project.	
<input type="checkbox"/>	Animals, living
<input type="checkbox"/>	Animals, preserved
<input type="checkbox"/>	Architecture
<input type="checkbox"/>	Books and Paper
<input type="checkbox"/>	Electronic Media
<input type="checkbox"/>	Objects
<input type="checkbox"/>	Paintings
<input type="checkbox"/>	Photographic Materials
<input type="checkbox"/>	Plants, living
<input type="checkbox"/>	Plants, preserved
<input type="checkbox"/>	Textiles
<input type="checkbox"/>	Wooden Artifacts

PLEASE NOTE: Information contained within this form may be made publicly available.