IMLS Interim Performance Report Line Item Instructions

ederal agency and organization element o which report is submitted ederal award or other identifying number ssigned by federal agency DUNS number IN/TIN	Institute of Museum and Library Services has been filled out for you. Enter the grant log number identified in the Grant Award Notification or as instructed by IMLS. Enter the recipient organization's Data Universal Numbering System (D-U-N-S [®]) number. Enter the recipient organization's Employer or Taxpayer Identification Number (EIN or TIN) assigned by the Internal Revenue Service.
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ecipient organization	
ecipient organization	Internal Revenue Service.
ecipient organization	-
	Enter the legal name and complete address of the
	recipient organization including ZIP+4/postal code.
ecipient identifying or account number	Enter an account number or any other identifying number
	assigned by the recipient to the award. This number is for
	the recipient's use only and is not required by IMLS.
	Indicate the start date established in the Official Award
nio/udy/yi)	Notification; this date is the beginning of the period when the non-Federal entity may incur new obligations to carry
	out the authorized work.
ward period of performance and date	Indicate the end date established in the Official Award
	Notification; this date is the end of the period when the
	non-Federal entity may incur new obligations to carry out
	the authorized work.
eporting period end date (mo/day/yr)	Enter the end date of the current reporting period.
	List the URLs of any web-based content created as part of
-,, -,	the award-funded project.
eport frequency	Mark the appropriate box.
Other attachments	Mark the appropriate box. Contact the IMLS program
	office to receive instructions for transmitting additional
	attachments.
lame and title of Project Director	Enter the name and title of the current approved Project
	Director. If the person in this role has changed since the
	time the Official Award Notification was issued and you
	have not secured approval from IMLS, contact your
	program officer before completing this form.
elephone	Enter the telephone number (area code, number,
	extension) of the current approved Project Director.
mail address	Enter the email address of the current approved Project
ortification	Director.
	N/A Dravida the signature of the surrent approved Authorized
ignature of Authorized Certifying Official	Provide the signature of the current approved Authorized
hate report submitted (me/day/ur)	Certifying Official.
ate report submitted (mo/day/yr)	Enter the date on which this interim performance report
wheel or printed name and title of	is being submitted to IMLS. Enter the name and title of the current approved
	Authorized Certifying Official. If the person in this role has
	changed since the time the Official Award Notification
	was issued and you have not secured approval from IMLS,
	contact your program officer before completing this form.
	ther attachments

13d	Telephone	Enter the telephone number (area code, number,
150	Telephone	extension) of the current approved Authorized Certifying
		Official.
13e	Email address	Enter the email address of the current approved
136		Authorized Certifying Official.
14	Agonovuso only	Leave this blank.
	Agency use only	
15	Recipient Organization	Enter the legal name of the recipient organization.
16	Project Title	Enter the brief descriptive title provided on your application's SF-424S form.
17	Project Summary	Provide a brief overview (no more than 300 words)
		describing the need, problem, or challenge addressed by
		your project; who or what is benefitting from it; your
		project design, referencing partners involved in your
		work; your intended results; the extent to which you are
		achieving your intended results; and how you are
		measuring your success.
10	Activition	
18	Activities	In the first column, list the activities proposed in your application's work plan, and in the second column, list the
		activities completed during this reporting period. In the
		third column, explain any variance, such as activities not
		completed as originally planned, new activities not in the
		original plan, and significant deviations in your schedule
		of completion.
10	Changes	
19	Changes	In the first column, list any changes in your project by
		type: key personnel (including consultants and
		contractors); project budget allocations; grant period end
		date; and/or project scope. In the second column, briefly
		describe what changed, and in the third column, provide
		the date on which IMLS approved the change, if
20	Lassans Laarnad	applicable.
20	Lessons Learned	Describe observations, insights, and new understandings acquired during this reporting period, focusing on
		information that could be of use to others doing similar work.
	Submitting Your Interim Report Package	Depending on its overall file size, you must submit your
		report package in one of two ways:
		If it is less than 20MB in size, you must send it
		electronically in PDF format to imlsreporting@imls.gov. Be sure to include
		your award number in the subject line of your email.
		 If it is more than 20MB in size, you must send it is hard convenith the original signed cover sheet
		in hard copy with the original signed cover sheet
		to: Grants Administration
		Institute of Museum and Library Services
		1800 M Street, NW, 9 th Floor
		Washington, DC 20036-5802
		vvasinington, DC 20030-3802
		IMLS does not accept faxed reports.
		IMPORTANT: Please remember that records must be

maintained for three years following the date of submission of the final expenditure report, or as
otherwise required by law. (see 2 CFR part 200).