

# IMLS PROGRAM INFORMATION SHEET

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

## 1. Applicant Information

a. Legal Name as it appears in SAM.gov (5a from SF424S):

b. Organizational D-U-N-S® Number (5f from SF-424S):

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

c. Expiration date of your SAM.gov registration

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

e. Organizational Unit Address (if different from Legal Name address)

Street 1

Street 2

City

County

State

Zip+4/Postal Code

|  |  |  |  |  |  |
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f. Organizational Unit Type (check one):

Academic Library

Library Association

School Library or School District  
applying on behalf of a School  
Library or Libraries

Aquarium

Library Consortium

Arboretum/Botanical Garden

Museum Library

Science/Technology Museum

Art Museum

Museum Services

Special Library

Children's/Youth Museum

Organization/Association

Specialized Museum\*\*

Community College

Native American Tribe/Alaska

State Library

Digital Library

Native/Native Hawaiian  
Organization

State Museum Agency

Four-year College

Natural History/Anthropology  
Museum

State Museum Library

General Museum\*

Nature Center

Zoo

Graduate School of Library and  
Information Science

Planetarium

Historic House/Site

Public Library

Institution of higher education  
other than listed above

Historically Black College or  
University (HBCU)

Research Library/Archives

Other

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)

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## 2. Organizational Financial Information

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

| Fiscal Year | Total Revenue* | Total Expenses** | Surplus or Deficit |
|-------------|----------------|------------------|--------------------|
|             |                |                  |                    |
|             |                |                  |                    |
|             |                |                  |                    |

\* 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 greater than 10% of your annual operating budget for two or more of the three fiscal years listed above, please explain the circumstances of this surplus or deficit in the box below.

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.

d. Has your organization had an A-133 audit in the past three years?

Yes

No

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Refer to the Notice of Funding Opportunity for descriptions of these options and instructions for how to make selections.

## 3. Grant Program

### a. Laura Bush 21<sup>st</sup> Century Librarian Program

1. *Select one:*

- Planning Grant
- National Forum Grant
- Project Grant
- Research Grant

2. *Select one:*

- Pre-professional
- Masters-level and Doctoral-level Programs
- Early Career Development
- Continuing Education

3. *Select one*

- Community Anchors
- National Digital Platform
- Curating Collections

### b. National Leadership Grants for Libraries

1. *Select one:*

- Sparks Grant
- Planning Grant
- National Forum Grant
- Project Grant
- Research Grant

2. *Select one:*

- Community Anchors
- National Digital Platform
- Curating Collections

### c. Native American/Native Hawaiian Library Services

1. *Select one:*

- Native American Basic Grant
- Native American Enhancement Grant
- Native Hawaiian Library Services

### d. Museums for America

1. *Select one:*

- Learning Experiences
- Community Anchors
- Collections Stewardship

2. *Select one:*

- \$5,000–\$25,000 with no cost share permitted.
- \$25,001–\$250,000 with cost share required.

### e. Museums Empowered (an MFA Special Initiative)

1. *Select one:*

- Digital Technology
- Diversity and Inclusion
- Evaluation
- Organizational Management

2. *Select one:*

- \$5,000–\$25,000 with no cost share permitted.
- \$25,001–\$250,000 with cost share required.

### f. National Leadership Grants for Museums

1. *Select one:*

- Advancing Digital Assets and Capacity
- Collection Care and Access
- Diversity and Inclusion
- Professional Development

2. *Select one:*

- Non-research grant, \$50,000–\$1,000,000 with cost share required.
- Research grant, \$50,000–\$1,000,000 with no cost share required.
- Rapid prototyping grant, \$5,000–\$50,000 with no cost share required.

### g. Museum Grants for African American History and Culture

1. *Select one:*

- \$5,000–\$25,000 with no cost share permitted.
- \$25,001–\$150,000 with cost share required.

### h. Native American/Native Hawaiian Museum Services

## 4. Performance Goals

Select one of the following three IMLS agency-level goals: (a) Learning, (b) Community, or (c) Content and Collections. Then select at least one of the performance goals listed beneath it:

### a. Learning

- Train and develop museum and library professionals
- Support communities of practice
- Develop and provide inclusive and accessible learning opportunities

### b. Community

- Strengthen museums and libraries as essential partners in addressing the needs of their communities

### c. Content and Collections

- Broaden access and expand use of the Nation's content and collections
- Improve management of the Nation's content and collections
- Improve preservation, conservation, and care of the Nation's content and collections

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If you select a performance goal listed beneath Learning or Community for your project, please review in the NOFO the specific performance measure statement choices and the information you will be required to collect for each.

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## 5. Funding Request

a. IMLS funds requested:  b. Cost share amount:

## 6. Population Served

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

- |  |  |
|--|--|
| General Population   | Museum and/or Library Professionals                    |
| Early Childhood/Preschool (0-5 years)  | Native Americans/Alaska Natives/Native Hawaiians       |
| Middle Childhood/Primary School (6-12 years)                                       | People with Mental or Physical Challenges/Disabilities |
| Adolescents/High School (13-19 years)  | People Who Are Low Income/Economically Disadvantaged   |
| Adults   | Rural Populations                                      |
| Aging, Elderly, Senior Citizens (65+ years)  | Scholars/Researchers                                   |
| Ethnic or Racial Minority Populations other than Native Americans/Native Hawaiians | Unemployed   |
| Families/Intergenerational   | Urban Populations                                      |
| Immigrants/Refugees  | Other  |
| Military Families  |  |

If other, please specify:

## 7. Museum Profile (Museum Applicants Only)

a. Is your institution organized on a permanent basis for essentially educational or aesthetic purposes, and is it **either** a private not-for-profit organization that has tax-exempt status under the Internal Revenue Code **or** a unit of state or local government? Yes No

b. Does your institution own or use tangible objects, either animate or inanimate? Yes No

c. Does your institution care for these objects? Yes No

d. Does your institution exhibit these objects to the general public at least 120 days a year through facilities your institution owns or operates? Yes No

e. Your institution's attendance for the 12-month period prior to the application

f. Year your institution was first open and exhibiting to the public:

g. Total number of days your institution was open to the public for the 12-month period prior to application:

h. Does your institution employ at least one professional staff member, or the full-time 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 your institution? Yes No

i. Number of full-time paid institution staff:

j. Number of full-time unpaid institution staff:

k. Number of part-time paid institution staff:

l. Number of part-time unpaid institution staff:

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## 8. Project Elements (Museums for America Only)

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

### LEARNING EXPERIENCES

If you are applying in the Learning Experiences Project Category, select the **primary** element that is core to your proposed project from the list below (**check only one**):

|                 |                                   |
|-----------------|-----------------------------------|
| Adult Programs  | Interpretation                    |
| Digital Media   | K-12 Programs, With Schools       |
| Early Learning  | K-12 Programs, Out of School      |
| Exhibitions     | Professional Development/Training |
| Family Programs | Public Programs                   |

### COMMUNITY ANCHORS

If you are applying in the Community Anchors Project Category, select the **primary** element that is core to your proposed project from the list below (**check only one**):

|   |   |
|---|---|
| Audience Research and Evaluation          | Community Outreach/Audience Development |
| Civic Engagement                          | Digital Media                           |
| Community-Driven Exhibitions and Programs | Professional Development/Training       |
| Community-Focused Planning Activities     |   |

### COLLECTIONS STEWARDSHIP

If you are applying in the Collections Stewardship Project Category, select the **primary** element that is core to your proposed project from the list below (**check only one**):

| Access and Use        | Collections Management                  | Conservation                                     |
|-----------------------|---|--|
| Database Management   | Cataloguing, Inventorying, Registration | Conservation Environmental Improvement/Rehousing |
| Digitization          | Collections Information Management      | Conservation Survey                              |
| Software Applications |   | Conservation Treatment                           |
| Website Development   | Collections Planning                    | Professional Development/Training                |

Please identify the material type(s) that will be affected by your project:

|                    |                        |
|--------------------|------------------------|
| Animals, living    | Photographic Materials |
| Animals, preserved | Plants, living         |
| Architecture       | Plants, preserved      |
| Books and Paper    | Sculpture              |
| Electronic Media   | Textiles               |
| Objects            | Wooden Artifacts       |
| Paintings          |                        |