**IMLS Interim Performance Report Line Item Instructions**

**Grant Year FY19**

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| **No.** | **Item** | **Instructions** |
| 1 | Federal agency and organization element to which report is submitted | Institute of Museum and Library Services has been entered for you. |
| 2 | Federal award or other identifying number assigned by federal agency | Enter the Federal Award Identification Number identified in the Official Award Notification or as instructed by IMLS. |
| 3a | DUNS number | Enter the recipient organization’s Data Universal Numbering System (D-U-N-S®) number. |
| 3b | EIN/TIN | Enter the recipient organization’s Employer or Taxpayer Identification Number (EIN or TIN) assigned by the Internal Revenue Service. |
| 4 | Recipient organization  | Enter the legal name and complete mailing address of the recipient organization, including the ZIP+4/postal code. |
| 5 | Recipient 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.  |
| 6a | Award period of performance start date (MM/DD/YYYY) | Indicate the start date established in the Official Award Notification; this date is the beginning of the period when the non-Federal entity may incur new obligations to carry out the authorized work. |
| 6b | Award period of performance end date (MM/DD/YYYY) | Indicate the end date established in the Official Award Notification; this date is the end of the period during which the non-Federal entity may incur new obligations to carry out the authorized work. |
| 7 | Reporting period end date (MM/DD/YYYY) | Enter the end date of the current reporting period.  |
| 8 | Project URLs, if any | List the URLs of any web-based content created as part of the award-funded project. |
| 9 | Report frequency | Mark the appropriate box. |
| 10 | Other attachments | Mark the appropriate box. Contact the appropriate IMLS program office to receive instructions for transmitting additional attachments. |
| 11a | Name and title of Project Director | Enter the name and title of the current approved Project Director. IMPORTANT: 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. |
| 11b | Telephone | Enter the telephone number (area code, number, extension) of the current approved Project Director. |
| 11c | Email address | Enter the email address of the current approved Project Director. |
| 12 | Certification | N/A |
| 13a | Signature of Authorized Certifying Official | Provide the signature of the current approved Authorized Certifying Official. |
| 13b | Date report submitted (MM/DD/YYYY) | Enter the date on which this final performance report is being submitted to IMLS. |
| 13c | Name and title of Authorized Certifying Official | Enter the name and title of the current approved Authorized Certifying Official. IMPORTANT: 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. |
| 13d | Telephone | Enter the telephone number (area code, number, extension) of the current approved Authorized Certifying Official. |
| 13e | Email address | Enter the email address of the current approved Authorized Certifying Official. |
| 14 | Project Title | Enter the brief descriptive title provided on your application’s SF-424S form.  |
| 15 | Project Summary | Provide a brief overview (no more than 300 words) describing the need, problem, or challenge addressed by your project; who or what benefitted from it; your project design, referencing any partners involved in your work; your intended results; the extent to which you achieved your intended results; and how you measured your overall success.  |
| 16 | Objectives and Accomplishments | In the first column, list the activities proposed in your application’s work plan, and in the second column, list the activities completed over the course of the entire grant 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. |
| 17 | Changes in the Project that had a significant impact on the reported activities | 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 approach. In the second column, briefly describe what changed, and in the third column, provide the date on which IMLS approved the change, if applicable. |
|  | 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 in hard copy with the original signed cover sheet to:

Grants Administration Office of Grants Policy and ManagementInstitute of Museum and Library Services955 L’Enfant Plaza North, SW Suite 4000Washington, DC 20024-2135IMLS 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). |