

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):

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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	Public Library	Research Library/Archives
Aquarium	History Museum	School Library or School District applying on behalf of a School Library or Libraries
Arboretum/Botanical Garden	Library Association	Science/Technology Museum
Art Museum	Library Consortium	Special Library
Children's/Youth Museum	Museum Library	Specialized Museum**
Community College	Museum Services Organization/ Association	State Library
Digital Library	Native American Tribe/Alaska 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	Institution of higher education other than listed above
Historic House/Site	Public Library	Other

* 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)

IMLS PROGRAM INFORMATION SHEET

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

IMLS PROGRAM INFORMATION SHEET

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 21st Century Librarian Program

1. *Select one:*

- Planning
- National Forum
- Project
- Research in Service to Practice

2. *Select one:*

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

3. *Select one*

- Lifelong Learning
- Community Catalysts
- National Digital Infrastructures and Initiatives

b. National Leadership Grants for Libraries

1. *Select one:*

- Planning
- National Forum
- Project
- Research in Service to Practice

2. *Select one:*

- Lifelong Learning
- Community Catalysts
- National Digital Infrastructures and Initiatives

c. Native American Basic

d. Native American Library Services Enhancement

1. *Select one:*

- Preservation and Revitalization
- Educational Programming
- Digital Services

e. Native Hawaiian Library Services

1. *Select one:*

- Preservation and Revitalization
- Educational Programming
- Digital Services

4. Agency Level Goals

Select the IMLS Agency-Level Goal that best aligns with your proposed project.

Promote Lifelong Learning

Build Capacity

Increase Public Access

Please review in the NOFO the specific performance measure statement choices and the information you will be required to collect for each in Promote Lifelong Learning and Build Capacity projects.

f. Accelerating Promising Practice for Small Libraries

g. Museums for America

1. *Select one:*

- Lifelong Learning
- Community Anchors and Catalysts
- Collections Stewardship and Public Access

h. Museums Empowered

1. *Select one:*

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

i. Inspire! Grants for Small Museums

1. *Select one:*

- Lifelong Learning
- Community Anchors and Catalysts
- Collections Stewardship and Public Access

j. National Leadership Grants for Museums

1. *Select one:*

- Collections Care and Public Access
- Data, Analysis, and Assessment
- Digital Platforms and Applications
- Diversity and Inclusion
- Professional Development

2. *Select one:*

- Non-research, \$50,000–\$1,000,000
- Research, \$50,000–\$1,000,000
- Rapid prototyping, \$5,000–\$50,000

k. Museum Grants for African American History and Culture

1. *Select one:*

- \$5,000–\$50,000
- \$50,001–\$250,000

l. Native American/Native Hawaiian Museum Services

IMLS PROGRAM INFORMATION SHEET

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? Yes No
- b. Is it your institution **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
- c. Does your institution own or use tangible objects, either animate or inanimate? 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:

IMLS PROGRAM INFORMATION SHEET

8. Project Elements (Museums for America and Inspire! Grants for Small Museums 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).

LIFELONG LEARNING

If you are applying in the Lifelong Learning 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 | Public Programs |
| Family Programs | |

COMMUNITY ANCHORS AND CATALYSTS

If you are applying in the Community Anchors and Catalysts 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-Focused Planning Activities |
| Civic Engagement | Community Outreach/Audience Development |
| Community-Driven Exhibitions and Programs | Digital Media |

COLLECTIONS STEWARDSHIP AND PUBLIC ACCESS

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

- | | |
|--|--------------------------|
| Cataloguing, Inventorying, Registration | Conservation Treatment |
| Collections Information Management | Curation |
| Collections Planning | Database Management |
| Conservation Environmental Improvement/Rehousing | Digital Asset Management |
| Conservation Survey | Digitization |

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 | |