IMLS PROGRAM INFORMATION SHEET

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

1. Applicant Information

a. Legal Name (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

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	
Art Museum	Museum Services Organization/Association	Science/Technology Museum
Children's/Youth Museum		Special Library
Community College	Native American Tribe/Alaska Native/Native Hawaiian Organization	
Digital Library		Specialized Museum**
Four-year College	Natural History/Anthropology Museum	State Library
General Museum*		State Museum Agency
Graduate School of Library and Information Science	Nature Center	State Museum Library
	Planetarium	Zoo
Historic House/Site	Public Library	
Historically Black College or University (HBCU)	Research Library/Archives	Institution of higher education other than listed above
History Museum		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)

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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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3. Grant Program

a. Laura Bush 21st Century Librarian Program
1. Select one:
Project Grant
Planning Grant
National Forum Grant
Research Grant
2. Select one:
Pre-professional
Masters-level and Doctoral-level Programs
Early Career Development
Continuing Education
3. Select one (except early career development proposals):
Community Anchors
National Digital Platform
Curating Collections

b. National Leadership Grants for Libraries
1. Select one:

Sparks Grant
Project Grant
Planning Grant
National Forum Grant
Research Grant
2. Select one:
Community Anchors
National Digital Platform
Curating Collections

c. Native American/Native Hawaiian Library Services
1. Select one:

Basic Grant Only
Basic Grant with Education/Assessment Option
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–$500,000 with cost share required.

e. National Leadership Grants for Museums
1. Select one:
Learning Experiences
Community Anchors
Collections Stewardship
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.

f. 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.

g. 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

5. Funding Request

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

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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
	Urban Populations
Families/Intergenerational	Other
Immigrants/Refugees	
Military Families	

If other, please specify:

7. Museum Profile (Museum Applicants Only)

a. Is 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 that is organized on a permanent basis for essentially educational or aesthetic purposes?   Yes   No

b. Is your institution open and exhibiting tangible objects to the general public at least 120 days a year through facilities your institution owns or operates?   Yes   No

c. Does your institution own or use these objects, whether animate or inanimate?   Yes   No

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

e. Does your institution exhibit these objects to the general public on a regular basis through facilities your institution owns or operates?   Yes   No

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

On-site: Off-site:

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

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

i. 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

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:

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8. Project Elements (Museums for America and National Leadership Grants for Museums Applicants 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/Lifelong Learning	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 Development/Community Outreach	Community-Focused Planning Activities
Audience Research and Evaluation	Digital Media
Civic Engagement	Professional Development/Training
Community-Driven Exhibitions and Programs	Visitor Experience

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	