**INTERIM PERFORMANCE REPORT**

**Please consult attached instructions when filling out this form.**

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| --- | --- | --- | --- |
| 1. Federal agency and organization element to which report is submitted:**Institute of Museum and** **Library Services** | 2. Federal award or other identifying number assigned by federal agency: | Page | of Pages |
| 3a. D-U-N-S® number: |
| 3b. EIN/TIN:  |
| 4. Recipient organization (name and complete address, including ZIP+4/postal code): | 5. Recipient identifying or account number: |
| 6a. Award period of performance start date (mo/day/yr):  | 6b. Award period of performance enddate (mo/day/yr):  | 7. Reporting period end date (mo/day/yr):  |
| 8. Project URLs, if any: | 9. Report frequency:annual semi- annualquarterly otherIf other, describe:  |
| 10. Other attachments? Yes No  Contact the IMLS program office to receive instructions for transmitting additional attachments. |
| 11a. Name and title of Project Director: | 11b. Telephone (area code, number, extension): |
| 11c. Email address: |
| **12. Certification: By submitting this report I certify to the best of my knowledge and belief that this information is correct and complete for performance of activities for the purposes set forth in the award documents.**  |
| 13a. Signature of Authorized Certifying Official: | 13b. Date report submitted (mo/day/yr):  |
| 13c. Name and title of Authorized Certifying Official: | 13d. Telephone (area code, number, extension):  |
| 13e. Email address: |
|  | 14. Agency use only |

The purpose of the interim performance report is to provide a record of grant-funded project activities at annual intervals throughout the grant period. If you have questions concerning the interim performance reporting requirements, you may address them to the Program Officer who is assigned to your grant and whose name and contact information appear in your Official Award Notification. IMLS may share interim performance reports with grantees, potential grantees, and the general public to further the mission of the agency and the development of museum and library services. Reports may be distributed in a number of ways and formats, including online.

**15. Recipient Organization:**

**16. Project Title:**

**17. Project Summary**

**18. Activities**

|  |  |  |
| --- | --- | --- |
| **Activities Proposed in Your Application** | **Activities Completed****during the Reporting Period** | **Explanation of Any Variance** |
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**19. Changes**

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| **Type of Change** | **Description** | **Date of Approval****(if applicable)** |
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**20. Lessons Learned**

**Burden Estimate and Request for Public Comments:** Public reporting burden for this collection of information is estimated to average 3.17 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comment regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Institute of Museum and Library Services, Chief Information Officer, 1800 M Street, NW, 9th Floor, Washington, DC 20036-5802, and to the Office of Management and Budget, Paperwork Reduction Project 3137-0029, Washington, DC 20503.