IMLS Interim Performance Report Line Item Instructions

| No. | Item | Instructions |
|------|---|--|
| 1 | Federal agency and organization element | Institute of Museum and Library Services has been filled |
| | to which report is submitted | out for you. |
| 2 | Federal award or other identifying number | Enter the grant log number identified in the Grant Award |
| | assigned by federal agency | 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 address of the |
| | | recipient organization including 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 | Indicate the start date established in the Official Award |
| | (mo/day/yr) | 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 | Indicate the end date established in the Official Award |
| | (mo/day/yr) | Notification; this date is the end of the period when the |
| | | non-Federal entity may incur new obligations to carry out |
| | | the authorized work. |
| 7 | Reporting period end date (mo/day/yr) | 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 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. 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 |
| 10 | Contification | Director. |
| 12 | Certification | N/A |
| 13a | Signature of Authorized Certifying Official | Provide the signature of the current approved Authorized |
| 4.21 | | Certifying Official. |
| 13b | Date report submitted (mo/day/yr) | Enter the date on which this interim performance report |
| 4.2 | | is being submitted to IMLS. |
| 13c | Typed or printed name and title of | Enter the name and title of the current approved |
| | Authorized Certifying Official | Authorized Certifying Official. 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 | Agency use only | Leave this blank. |
| 15 | Recipient Organization | Enter the legal name of the recipient organization. |
| 16 | Project Title | Enter the brief descriptive title provided on your application's SF-424S form. |
| 17 | Project Summary | Provide a brief overview (no more than 300 words) describing the need, problem, or challenge addressed by your project; who or what is benefitting from it; your project design, referencing partners involved in your work; your intended results; the extent to which you are achieving your intended results; and how you are measuring your success. |
| 18 | Activities | In the first column, list the activities proposed in your application's work plan, and in the second column, list the activities completed during this reporting 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. |
| 19 | Changes | 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 scope. In the second column, briefly describe what changed, and in the third column, provide the date on which IMLS approved the change, if applicable. |
| 20 | Lessons Learned | Describe observations, insights, and new understandings acquired during this reporting period, focusing on information that could be of use to others doing similar work. |
| | 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 Institute of Museum and Library Services 955 L'Enfant Plaza North, SW, Suite 4000 Washington, DC 20024-2135 |
| | | IMLS does not accept faxed reports. |
| | | IMPORTANT: Please remember that records must be |

| maintained for three years following the date of |
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| submission of the final expenditure report, or as |
| otherwise required by law. (see 2 CFR part 200). |