



Native American Library Services Applicant Webinar - Budgets

- **Audio:** You may play the audio on your computer or via phone. Call **1-888-272-8702**. When prompted, enter **2053175#**.
- **Recording:** After the webinar, a recording will be emailed to all reviewers.
- **Slides:** To download these slides, click File, then Save, and select Whiteboard. Be sure to save the slides as a .pdf!
- **Questions:** Type your questions in the chat box. We will hold a Q&A session at the end of the presentation.

All participants will be muted during the presentation. If you encounter any technical issues, please type your question in the chat box and someone will assist you.

What Will We Cover Today?

- Native American Library Services Basic Grants program
 - Application
 - Budget Form
 - Reporting

Native American Library Services Basic Grants

Program Goals	Support existing library operations and maintain core library services. Also provide funding for continuing education of library staff or hiring of consultant to do a library assessment. Non-competitive.
Deadline	April 1, 2019
Amount and Length	\$6,000 - \$10,000 (up to \$3,000 for Education/Assessment activities) – One year
Cost Share	Not required
Eligibility	Federally recognized tribes; Alaska Native villages and corporations

Before You Apply

- Acquire a D-U-N-S® Number for your institution, if you don't already have one: <http://fedgov.dnb.com/webform>
- Register your institution with the System of Award Management (SAM), or ensure your existing SAM registration is active: <http://www.sam.gov/>
- Create a Grants.gov account for your institution, or ensure your existing Grants.gov account is active: <http://www.grants.gov/>
- Read the Notice of Funding Opportunity, and download the current versions of the application forms from it.

Notice of Funding Opportunity

All application requirements and instructions can be found in the Notice of Funding Opportunity on our website:

NATIVE AMERICAN LIBRARY SERVICES BASIC GRANT FY 2019 NOTICE OF FUNDING OPPORTUNITY

Federal Awarding Agency:	Institute of Museum and Library Services
Funding Opportunity Title:	Native American Library Services Basic Grant
Announcement Type:	Notice of Funding Opportunity
Funding Opportunity Number:	NAG-BASIC-FY19
Catalog of Federal Financial Assistance (CFDA) Number:	45.311
Due Date:	Submit through Grants.gov by 11:59 p.m. U.S. Eastern Time on April 1, 2019.
Anticipated Date of Notification of Award Decisions:	July 2019 (subject to the availability of funds and IMLS discretion)
Beginning Date of Period of Performance:	Projects must begin on August 1, 2019.

Remember this number for Grants.gov

Table of Application Components

- Serves as a checklist
- Identifies document formats and naming conventions

D2a. Table of Application Components

Component	Format	File name to use
Required Documents		
Please see the guidance in Section D2c for more information.		
The Application for Federal Domestic Assistance/Short Organizational Form (SF-424S)	Grants.gov form	n/a
IMLS Program Information Sheet	IMLS PDF form	Programinfo.pdf
Library Services Plan Narrative (three pages max.)	PDF document	Plan.pdf
IMLS Budget Form	IMLS PDF form	Budget.pdf
Conditionally Required Documents		
Please see the guidance in Section D2d for more information.		
Digital Product Form	IMLS PDF document	Digitalproduct.pdf

Application Components

- Application Cover Form (SF-424S)
- IMLS Program Information Sheet
- Library Services Plan
- IMLS Budget Form
- Digital Product Form, if applicable

All documents must be saved and submitted in PDF format!

Library Services Plan

- No more than 3 single-spaced pages
- Address the questions in the same order in which they are listed below:
 - What are you focusing on during the year?
 - Why is it important?
 - How will you carry out your plan successfully?
 - What results do you anticipate?
- Include a budget summary
- Describe, separately, education/assessment activities or travel, if applicable
- **Must be PDF format!**

IMLS Budget Form

IMLS BUDGET FORM

a.	Legal name (5a from SF-4245):	
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b. Requested Grant Period From: (MM/DD/YYYY) Through: (MM/DD/YYYY)

c. If this is a revised budget, indicate application/grant number:

1. Salaries and Wages

[illegible]

2. Fringe Benefits

[illegible]

IMLS Budget Form

- Download (see link in NOFO)
- Follow the instructions (link in NOFO)
- You must have Java Script enabled in your browser
- Delete browser cache before starting
- Fill in all lines and then save
- Only fill out Year 1
- No cost share
- No indirect

[illegible]

Generally Allowable Costs

Examples of allowable costs

- Library personnel
- Materials, supplies, and equipment
- Services
- Education/Assessment



[Link to 2 CFR](#)

Unallowable Costs



Examples of unallowable costs

- general fundraising costs, such as development office staff or time devoted to general fundraising
- contributions to endowments
- general advertising or public relations costs designed solely for promotional activities other than those related to the specific project
- construction expenses
- reconstruction or renovation of historic sites
- social activities, ceremonies, receptions, or entertainment
- pre-award costs
- indirect costs
- advocacy or grant-writing activities

[Link to 2 CFR](#)

How can funds be used?

- Salaries, wages, fringe benefits:
 - Permanent staff salary and benefits
 - Temporary and project staff
- Supplies, materials, and equipment:
 - Collection development—books, electronic resources, subscriptions, software, special collections
 - Equipment—computers, wireless equipment, E-Readers, copiers, printers
 - Library software for staff, visitors, specific educational programs, etc.
 - Furnishings like tables, chairs, rugs, circulation desk, shelving, book drop, computer stations (not construction or renovation)
 - Library supplies in general or for specific projects and activities like making

How can funds be used?

- Contracts (e.g., for services) or Subawards
 - Programs: literacy skills, job readiness, health awareness, cultural knowledge, visual arts, creative writing workshops, computer training
 - Tutors
 - Program-related supplies
 - Internet access
 - Technical training and support
 - Digitization of local materials
- Other costs
 - Fees to join a consortium to share resources and databases
 - Fees for membership in library-related organizations
 - Renewal fees for library automation technical support and upgrades

Education/Assessment Activities

- Up to \$3,000 but NOT required
- Describe separately in your Library Services Plan
- Can include:
 - Costs to attend or present: continuing education courses; conferences; other training; and related travel
 - Include registration, travel, hotel, per diem
 - Temporary staff costs when regular staff are attending courses, etc.
 - Consultant for onsite professional library assessment, including technology and digitization
- Must be PDF format!

Your Responsibilities and Obligations as a Grantee

1. Conduct your project activities.
2. Adhere to the award terms and conditions, including:
 - a. Request approval for changes in activities, personnel, and budget.
 - b. Follow government-wide requirements for implementing federal grants (including **2 CFR Part 200**)
 - c. Acknowledge IMLS support of your project.
3. Submit financial and narrative reports on time, using IMLS-designated templates.
4. Keep in touch with your program officer.
5. Maintain documentation of all activities and expenditures that affect your award. Follow your institution's accepted business practices.

Your Approved Budget

IMLS BUDGET FORM

a.	Legal name (5a from SF-424S):
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b. Requested Grant Period From: (MM/DD/YYYY) Through: (MM/DD/YYYY)

c. If this is a revised budget, indicate application/grant number:

1. Salaries and Wages

[illegible]

IMLS BUDGET FORM

a.	Legal name (5a from SF-4245):	
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3. Travel

2. Fringe	From/to and Purpose	Year 1		Year 2		Year 3		Total		
		Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grant Fund	Cost Share	Grand Tot
	Subtotal									

4. Supplies, Materials, and Equipment

[illegible]

5. Contracts and Subawards

[illegible]

OMB Control #: 3137-0092, Expiration date: 7/31/2016

IMLS-CLR-F-0030

IMLS BUDGET FORM

a.	Legal name (5a from SF-424S):
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6. Student Support

[illegible]

7. Other Costs

[illegible]

IMLS BUDGET FORM

a.	Legal name (5a from SF-424S):
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9. Indirect Costs (Read the instructions about Indirect Costs before completing this section.)

☐ Current indirect cost rate(s) have been negotiated with a federal agency. Name of Agency: _____ Expiration Date: _____

Indirect cost proposal has been submitted to a federal agency but not yet	Name of Agency:	Proposal Date:
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☐ finalized.

☐ Applicant chooses a rate not to exceed 10% of

8. Total I

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[illegible]

Subj

[illegible]

10. Total Project Costs

[illegible]

OMB Control #: 3137-0092, Expiration date: 7/31/2016

IMLS-CLR-F-0030

Common Budget Changes

- Changing personnel ✓
 - Email program office with new contact information
- ~~Extension on grant period to finish project~~
 - ~~Email program office with written request and reason for the extension~~

Getting pre-approval for changes

Changing your budget needs prior written approval for:

- ☐ A change in the project scope
- ☐ Adding new costs
- ☐ Changes with participant support
- ☐ New plans for sub-awarding or contracting
- ☐ Changes in cost-sharing
- ☐ A change in budget that is over 10% of the total budget

When requesting approval for budget revisions, use the same format for budget information that was used in the application. All requests for budget revisions must be dated and signed by an Authorized Official. IMLS has 30 days to review.

Getting pre-approval for changes

When requesting approval for budget revisions, use the same format for budget information that was used in the application. All requests for budget revisions must be dated and signed by an Authorized Official.

IMLS has 30 days to review.

Requesting payment

OMB Number: 4040-0012
Expiration Date: 01/31/2019

REQUEST FOR ADVANCE OR REIMBURSEMENT	1. TYPE OF PAYMENT REQUESTED	<div>a. "X" one or both boxes <input type="checkbox"/> ADVANCE <input type="checkbox"/> REIMBURSEMENT</div> <div>b. "X" the applicable box <input type="checkbox"/> FINAL <input type="checkbox"/> PARTIAL</div>	2. BASIS OF REQUEST <div><input type="checkbox"/> CASH <input type="checkbox"/> ACCRUAL</div>
3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>		4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	
5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>		6. EMPLOYER IDENTIFICATION NUMBER <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	7. FINANCIAL ASSISTANCE IDENTIFICATION NUMBER <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>
8. PERIOD COVERED BY THIS REQUEST From: <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div> To: <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div>			
9. RECIPIENT ORGANIZATION Name: <div style="border: 1px solid black; width: 200px; height: 15px; display: inline-block;"></div> Street1: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Street2: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> City: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> County: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> State: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Province: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> Country: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> ZIP / Postal Code: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>			
10. PAYEE (Where check is to be sent if different than item 9) Name: <div style="border: 1px solid black; width: 200px; height: 15px; display: inline-block;"></div> Street1: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Street2: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> City: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> County: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> State: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Province: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div> Country: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> ZIP / Postal Code: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>			

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED				
PROGRAMS/FUNCTIONS/ ACTIVITIES	(a)	(b)	(c)	TOTAL
a. Total program outlays to date (As of date) <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>	\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>	\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>	\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>	\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>
b. Less: Cumulative program income				
c. Net program outlays (Line a minus line b)				
d. Estimated net cash outlays for advance period				
e. Total (Sum of lines c & d)				
f. Non-Federal share of amount on line e				
g. Federal share of amount on line e				
h. Federal payments previously requested				
i. Federal share now requested (Line g minus line h)				
j. Advances required by month, when requested by Federal grantor agency for use in making pre-scheduled advances				
1st month				
2nd month				
3rd month				
12. ALTERNATE COMPUTATION FOR ADVANCES ONLY				
a. Estimated Federal cash outlays that will be made during period covered by the advance				\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period				<div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>
c. Amount requested (Line a minus line b)				\$ <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>
13. CERTIFICATION				
I certify that to the best of my knowledge and belief the data on the reverse are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.				
SIGNATURE OR AUTHORIZED CERTIFYING OFFICIAL			DATE REQUEST SUBMITTED	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
TYPED OR PRINTED NAME AND TITLE				
Prefix: <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div> First Name: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Middle Name: <div style="border: 1px solid black; width: 100px; height: 15px; display: inline-block;"></div>				
Last Name: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div> Suffix: <div style="border: 1px solid black; width: 40px; height: 15px; display: inline-block;"></div>				
Title: <div style="border: 1px solid black; width: 150px; height: 15px; display: inline-block;"></div>				
TELEPHONE (AREA CODE, NUMBER, EXTENSION)				
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>				
This space for agency use				
Public reporting burden for this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0004), Washington, DC 20503.				
PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.				

E-mail completed SF270s to: grantsadmin@imls.gov

Tip on requesting payment

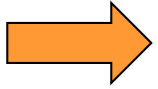
- Reimbursements
 - Fill out section 11
- Advances
 - Fill out section 12
 - For immediate cash needs
 - Requests must be submitted no earlier than 15 business days prior to the beginning of the period for which funds are requested
 - Must be fully disbursed within 30 days of receipt
- Put grant # in subject line
 - Email completed form to grantsadmin@imls.gov
- Keep copies!
- You must draw down all funds within 90 days after the grant period

Reporting

- Provides transparency and accountability for grantees
- Informs IMLS and elected officials how the funds are being used and what is successful
- Allows IMLS to evaluate program effectiveness
- Provides project examples to other grantees and potential applicants



Reporting Resources





Things to Remember

- Basic Grants have a two-page combined Financial and Performance Report
- Emailed to imlsreporting@imls.gov
 - Include grant number in subject line



Performance Reporting

- Use the form provided on the IMLS website
- Describe both project successes and challenges
- Describe changes, such as budget amendments, extensions, and personnel changes with or without IMLS approval
- Tell us about the outcomes



Contact Us

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Questions?

