

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	45-10-S13004		
1. Recipient Name				Arizona Department of Administration	4. EIN:	866004791	
3. Street Address				100 N 15th Avenue, Suite 305	6. Report Date (MM/DD/YYYY)	7/28/2017	
5. City, State, Zip Code				Phoenix, AZ 85007	7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2017	
				8. Final Report Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	9. Report Frequency	Quarterly <input checked="" type="checkbox"/>	
10a. Project/Grant Period				Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	1/31/2018
11. List the individual projects in your approved Project Plan							
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category				
1	Stakeholders Engaged	244	Actual number of individuals reached via stakeholder meetings during the quarter				
2	Individuals Sent to Broadband Conferences	0	Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter				
3	Staff Hired (Full-Time Equivalent)(FTE)	0	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)				
4	Contracts Executed	0	Actual number of contracts executed during the quarter				
5	Governance Meetings	3	Actual number of governance, subcommittee, or working group meetings held during the quarter				
6	Education and Outreach Materials Distributed	300	Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any website or social media account supported by SLIGP during the quarter				
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter				
8	Phase 2 - Coverage	5	For each Phase 2 milestone category, please provide the status of the activity during the quarter: <ul style="list-style-type: none"> • Stage 1 - Process Development • Stage 2 - Data Collection in Progress • Stage 3 - Collection Complete; Analyzing/Aggregating Data • Stage 4 - Data Submitted to FirstNet • Stage 5 - Continued/Iterative Data Collection • Stage 6 - Submitted Iterative Data to FirstNet 				
9	Phase 2 – Users and Their Operational Areas	5					
10	Phase 2 – Capacity Planning	5					
11	Phase 2 – Current Providers/Procurement	0					
12	Phase 2 – State Plan Decision	0					
11a. Describe your progress meeting each major activity/milestone approved in the Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project milestones or information.							
1. Continued to engage the AZPSBN working group through monthly governance conference calls 2. Established the State Plan Review Team; provided guidance and training on State Plan Portal; established review processes and timelines 3. Established regular working calls with AT&T and FirstNet to resolve and explain aspects of the state plan. 4. Continued Tribal Outreach and Education - Navajo Nation; Hualapai Tribe; Fort McDowell-Yavapai Nation; Tohono O'odham Tribe 5. Engaged various public safety/first responder stakeholders including regional wireless cooperatives; Arizona law enforcement and fire chiefs; Arizona State Forestry, and establish on going cooperation 6. Continued meetings with state leadership to keep them informed of the project and timelines. 7. Continuing to work on State Executive Interoperability Committee (SIEC). Governance structure development. 8. Continued update of the azfirstnet.az.gov website.							
11b. If the project team anticipates requesting any changes to the approved Baseline Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Report must be approved by the Department of Commerce before implementation.							

11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.

11d. Describe any success stories or best practices you have identified. Please be as specific as possible.

During the quarter, efforts were focused on establishing the State Plan Review team to evaluate the state plan once released. Arizona's review team membership was developed to ensure that proper representation across all public safety, as well as state, county, local, tribal, rural and urban interests were represented. The team was also broken down into several subcommittees – Operations; Technical and Security; Policy; Legal; Procurement and Budget. The State Plan Review team is comprised of over 50 members with expertise in various disciplines and will provide a comprehensive review of the state plan and recommendation to the Governor.

12. Personnel

12a. If the project is not fully staffed, describe how any lack of staffing may impact the project's time line and when the project will be fully staffed.

12b. Staffing Table - Please include all staff that have contributed time to the project. Please do not remove individuals from this table.

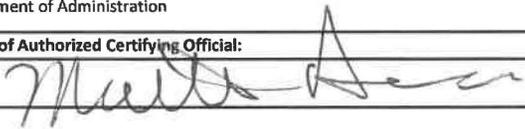
Job Title	FTE%	Project (s) Assigned	Change
Executive Manager	25%	Management oversight	No Change
Statewide Interoperability Coordinator (SWIC)	40%	Management oversight and integration with current interoperability initiatives	No Change
Senior Program Advisor	100%	Management oversight and select sub-projects	No Change
Sr. Project Manager	90%	Finance, performance tracking and deliverable reporting, and grants management	No Change
Finance & Planning	15%	Finance oversight	No Change
SPOC	40%	Single point of contact	No Change
Statewide Grant Administrator	50%	Management oversight	No Change

13. Subcontracts (Vendors and/or Subrecipients)

13a. Subcontracts Table – Include all subcontractors. The totals from this table must equal the "Subcontracts Total" in Question 14f.

Name	Subcontract Purpose	Type (Vendor/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
Knowledge Services	Staff Aug	State Vendor	N	Y	January-16	January-18	\$500,000.00	\$0.00
Mission Critical Partners (MCP)	SME	State Vendor	N	Y	October-15	January-18	\$800,065.00	\$0.00
IWC Highground	Marketing Materials	State Vendor	N	Y	March-15	June-15	\$30,000.00	\$0.00

13b. Describe any challenges encountered with vendors and/or subrecipients.

14. Budget Worksheet						
Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.						
Project Budget Element (1)	Federal Funds Awarded (2)	Approved Matching Funds (3)	Total Budget (4)	Federal Funds Expended (5)	Approved Matching Funds Expended (6)	Total funds Expended (7)
a. Personnel Salaries	\$410,019.60	\$238,800.59	\$648,820.19	195,473.46	217,882.55	\$413,356.01
b. Personnel Fringe Benefits	\$89,731.20	\$153,175.68	\$242,906.88	66,351.17	81,952.86	\$148,304.03
c. Travel	\$222,852.41		\$222,852.41	75,994.28		\$75,994.28
d. Equipment			\$0.00	-		\$0.00
e. Materials/Supplies	\$149,061.27		\$149,061.27	108,013.40		\$108,013.40
f. Subcontracts Total	\$2,039,482.72	\$100,000.00	\$2,139,482.72	1,654,104.44		\$1,654,104.44
g. Other		\$409,665.75	\$409,665.75		392,676.67	\$392,676.67
h. Indirect			\$0.00			\$0.00
i. Total Costs	\$2,911,147.20	\$901,642.02	\$3,812,789.22	2,099,936.75	692,512.08	\$2,792,448.83
j. % of Total	76%	24%	100%	75%	25%	100%
15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose(s) set forth in the award documents.						
16a. Typed or printed name and title of Authorized Certifying Official:				16c. Telephone (area code, number, and extension)	602-542-7567	
Matt Hanson for Craig Brown, Director Arizona Department of Administration				16d. Email Address:	matthew.hanson@azdoa.gov	
16b. Signature of Authorized Certifying Official: 				Date:	7/28/17	