

| U.S. Department of Commerce Performance Progress Report | | | | 2. Award or Grant Number: | 06-10-S13006 |
|--|--|---|--|--|---|
| | | | | 4. EIN: | 680278801 |
| 1. Recipient Name | California Governor's Office of Emergency Services | | | 6. Report Date (MM/DD/YYYY) | 4/30/2017 |
| 3. Street Address | 3650 Schriever Ave | | | 7. Reporting Period End Date: (MM/DD/YYYY) | 3/31/2017 |
| 5. City, State, Zip Code | Mather, CA 95655 | | | 8. Final Report | 9. Report Frequency |
| | | | | Yes <input type="checkbox"/> | Quarterly <input checked="" type="checkbox"/> |
| | | | | No <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, Indicator Description) | Project Deliverable Quantity (Number & Indicator Description) | Description of Milestone Category | | |
| 1 | Stakeholders Engaged | 1100 | <i>Actual number of individuals reached via stakeholder meetings during the quarter</i> | | |
| 2 | Individuals Sent to Broadband Conferences | 3 | <i>Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter</i> | | |
| 3 | Staff Hired (Full-Time Equivalent)(FTE) | 1 | <i>Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)</i> | | |
| 4 | Contracts Executed | 0 | <i>Actual number of contracts executed during the quarter</i> | | |
| 5 | Governance Meetings | 1 | <i>Actual number of governance, subcommittee, or working group meetings held during the quarter</i> | | |
| 6 | Education and Outreach Materials Distributed | 350 | <i>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</i> | | |
| 7 | Subrecipient Agreements Executed | 0 | <i>Actual number of agreements executed during the quarter</i> | | |
| 8 | Phase 2 - Coverage | 5 | <i>For each Phase 2 milestone category, please provide the status of the activity during the quarter:</i> <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 | 2 | | | |
| 12 | Phase 2 – State Plan Decision | 4 | | | |
| 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. | | | | | |
| California held a CalFRN board meeting in Sacramento on February 1, 2017. | | | | | |
| 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. | | | | | |
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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.

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 |
|---|------|-------------------------------|---------|
| Public Information Officer - Mayberry | 0.35 | Public Outreach | None |
| Staff Services Manager - Jackson | 0.1 | Grant Management | None |
| Associate Governmental Program Analyst - Town | 1 | Grant Management | None |
| Associate Governmental Program Analyst - Sano | 1 | Grant Management | Added |
| Statewide Interoperability Coordinator | 0 | Telecommunications Guidance | Removed |
| Associate Governmental Program Analyst 100% | 0 | Project Management | Removed |
| Associate Governmental Program Analyst 100% | 0 | Project Management | Removed |
| Staff Services Manager II | 0 | Project Management | Removed |
| Departmental Program Manager III | 0 | Project Management | Removed |
| Associate Telecommunications Engineer - Black | 1 | Project Management | None |
| Associate Telecommunications Engineer - Khan | 1 | Project Management | Added |
| Staff Services Analyst | 0.8 | Project Management Assistance | None |
| Career Executive Assignment II Plantz | 0.4 | Project Management | None |
| Senior Telecommunications Engineer - Bjorkland | 0.8 | Project Management | None |
| Senior Telecommunications Engineer - Bond | 0.8 | Project Management | Removed |
| Associate Governmental Program Analyst - Dumetz | 0.2 | Project Management | None |
| Department Program Manager Yarbrough | 0.4 | Project Management | None |
| Associate Information Systems Analyst - Barnhurst | 0.3 | Project Management | None |
| Telecommunications Systems Manager - Villasenor | 1 | Project Management | None |

| | | | |
|--|-----|--------------------|-------|
| Telecommunications Systems Analyst II - Mathew Evans | 1 | Project Management | Noone |
| Staff Services Analyst - Romi Lal | 1 | Project Management | None |
| Associate Information Systems Analyst - Killion | 0.2 | Project Management | None |
| Telecommunications Systems Analyst II - Gomez | 1 | Project Management | Added |

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 |
|---|-------------------------------|-----------------------|----------------------|-------------------------|------------|-----------|-------------------------------|--------------------------------|
| Science Application International Corporation | Public Outreach and Education | Vendor | Yes | Y | 2/14/2014 | 2/13/2017 | \$438,750.00 | \$0.00 |

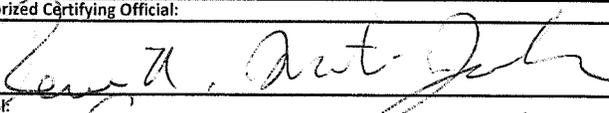
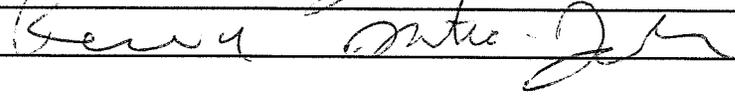
13b. Describe any challenges encountered with vendors and/or subrecipients.

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 | \$1,240,710.00 | \$920,569.00 | \$2,161,279.00 | \$650,466.00 | \$497,602.00 | \$1,148,068.00 |
| b. Personnel Fringe Benefits | \$573,994.00 | \$426,941.00 | \$1,000,935.00 | \$315,467.00 | \$235,214.00 | \$550,681.00 |
| c. Travel | \$86,800.00 | \$0.00 | \$86,800.00 | \$53,591.00 | \$0.00 | \$53,591.00 |
| d. Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| e. Materials/Supplies | \$88,855.00 | \$0.00 | \$88,855.00 | \$21,099.00 | \$0.00 | \$21,099.00 |
| f. Subcontracts Total | \$2,562,119.00 | \$71,687.00 | \$2,633,806.00 | \$435,238.00 | \$0.00 | \$435,238.00 |
| g. Other | \$249,607.00 | \$0.00 | \$249,607.00 | \$174,151.00 | \$0.00 | \$174,151.00 |
| h. Indirect | \$874,701.00 | \$0.00 | \$874,701.00 | \$416,490.00 | \$0.00 | \$416,490.00 |
| i. Total Costs | \$5,676,786.00 | \$1,419,197.00 | \$7,095,983.00 | \$2,066,502.00 | \$787,906.00 | \$2,799,318.00 |
| j. % of Total | 80% | 20% | 100% | 74% | 28% | 102% |

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.

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|--|--|---|-----------------------------|
| Renee Mota-Jackson |  | 16c. Telephone (area code, number, and extension) | 916-848-8404 |
| | | 16d. Email Address: | renee.jackson@caloes.ca.gov |
| 16b. Signature of Authorized Certifying Official: | | Date: | 7/14/17 |
|  | | | |