

| U.S. Department of Commerce SLIGP 2.0 Performance Progress Report | | | | 2. Award or Grant Number: | 17-10-S18017 |
|--|---|--|---|---|---|
| 1. Recipient Name | | | | 4. EIN: | 73-1641239 |
| 3. Street Address | | | | 6. Report Date (MM/DD/YYYY) | 01/31/2020 |
| 5. City, State, Zip Code | | | | 7. Reporting Period End Date: (MM/DD/YYYY) | 12/31/2019 |
| | | | | 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) | | 10b. End Date: (MM/DD/YYYY) | | | |
| 03/01/2018 | | 03/31/2020 | | 3/31/21 | |
| 11. List the individual projects in your approved Project Plan | | | | | |
| | Activity Type (Planning, Governance Meetings, etc.) | Was this Activity Performed during the Reporting Quarter? (Yes/No) | Project Deliverable Quantity (Number & Indicator Description) | Description of Milestone Category | |
| Activities/Metrics for All Recipients during the Reporting Quarter | | | | | |
| 1 | Governance Meetings | Yes | 2 | Actual number of governance, subcommittee, or working group meetings related to the NPSBN held during the quarter | |
| 2 | Individuals Sent to Broadband Conferences | No | 0 | Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training track related to the NPSBN using SLIGP grant funds during the quarter | |
| 3 | Convened Stakeholder Events | Yes | 1 | Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet. | |
| 4 | Staff Hired (Full-Time Equivalent)(FTE) | No | 0.00 | Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal). | |
| 5 | Contracts Executed | No | 0 | Actual number of contracts executed during the quarter. | |
| 6 | Subrecipient Agreements Executed | No | 0 | Actual number of agreements executed during the quarter. | |
| 7 | Data Sharing Policies/Agreements Developed | No | | Yes or No if data sharing policies and/or agreements were developed during this reporting quarter. | |
| 8 | Further Identification of Potential Public Safety Users | Yes | | Yes or No if further identification of potential public safety users occurred during this reporting quarter. | |
| 9 | Plans for Emergency Communications Technology Transitions | No | | Yes or No if plans for future emergency communications technology transitions occurred during this reporting quarter. | |
| 10 | Identified and Planned to Transition PS Apps & Databases | Yes | | Yes or No if public safety applications or databases within the State or territory were identified and transition plans were developed this reporting quarter | |
| 11 | Identify Ongoing Coverage Gaps | Yes | | Yes or No if participated in identifying ongoing coverage gaps using SLIGP funds during this reporting quarter. | |
| 12 | Data Collection Activities | No | | (Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collection activities as requested by FirstNet or following a documented data collection determination by Opt-Out (Post-SMLA) grantees. | |
| Activities for Opt-Out States only in the Pre-SMLA Phase during the Reporting Quarter | | | | | |
| 13 | Stakeholders Engaged | | | Actual number of individuals reached via stakeholder meetings or events during the quarter. | |
| 14 | Education and Outreach Materials Distributed In-Person | | | Actual number of materials distributed in-person during this quarter. | |
| 15 | Education and Outreach Materials distributed Electronically | | | Actual volume of hits or impressions to any website, e-newsletter, social media post, or other account supported by SLIGP during the quarter. | |

11a. Narrative description for each activity reported in Question 11 for this quarter; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional METRIC 1-Governance Meetings Statewide Interoperable Executive Committee (SIEC) (Oct,Nov); Regular engagements with State agency points of contact regarding expanding SIEC governance body to specifically address Broadband with a focus of strategy development to support the adoption of FN within State agencies and eventually local agencies by leading by example.
 METRIC 3 – Held 1 Regional FIRSTNET Session with Federal FIRSTNET along with AT&T Representatives. Oct 2 @ Plainfield IL. Outreach to the Public Safety Community on FirstNet Planning issues. METRIC 8 -Ongoing discussions with DOIT and CMS about focusing on Schools and providing FIRSTNET connectivity to ensure security and safety of students. Springer met with stakeholders in Regional Meetings in October along with FIRSTNET and AT&T to discuss the progress of FIRSTNET and possible agency uses. Ongoing conversations with CMS regarding use of state towers for additional ATT/FIRSTNET sites in Illinois. 10/15/19 Presented at the IPWMAN Conference in Bloomington. Planning considerations for agencies switching to FirstNet. METRIC 10 -Identified and Planned to Transition PS Apps & Databases - FIRSTNET Operational & Technical Group Monthly (Oct, Nov); Region V PSBN Monthly Call (Oct). In addition to the monthly calls, the team has been investigating how to get stakeholders to understand the importance of narrowing the scope on single application for use in Law enforcement for information sharing and situational awareness. METRIC 11 –Continued work on questionnaire to distribute to all public safety across the state to start gathering preliminary information about coverage gaps.
 METRIC Other- Monthly meetings with ATT and Local FIRSTNET representatives. Monthly discussions with Illinois Department of Innovation and Technology.
 10/23/19 ITTF Chairs Meeting. Springer gave a FirstNet project update.
 10/3/19 & 11/5/2019 ILEAS Staff Meetings – Springer gave update on FirstNet status.

12. Personnel

12a. Staffing Table - Please include all staff that have contributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individuals from this table.

| Job Title | FTE% | Project (s) Assigned | Change |
|----------------------------|------|--|--------------------------|
| Project Manager-Joe Galvin | 80% | Project Manager for National Public Safety Broadband Network (NPSBN) and Statewide Interoperability Coordinator (SWIC) for Illinois | left position on 9/15/19 |
| Grant Manager-Robert Evans | 25% | Point of Contact for State Administrative Agency (IEMA) and Liaison with National Telecommunications and Information Administration (NTIA) | |
| | | | |
| | | | |

12b. Narrative description of any staffing challenges, vacancies, or changes.
 The original project manager left IEMA during this reporting period. The new project lead is Bill Springer from ILEAS, and the Acting State Point of Contact is Bob Evans the grant program manager. Bill and Bob have both with the projects since the original award in 2014.

13. Contractual (Contract and/or Subrecipients)

13a. Contractual Table – include all contractors. The totals from this table should equal the "Contractual" in Question 14f.

| Name | Subcontract Purpose | Type (Contract/Subrec.) | RFP/RFQ Issued (Y/N) | Contract Executed (Y/N) | Start Date | End Date | Total Federal Funds Allocated | Total Matching Funds Allocated |
|---|--|-------------------------|----------------------|-------------------------|------------|-----------|-------------------------------|--------------------------------|
| Illinois Law Enforcement Alarm System (ILEAS) | 80% time for System Technology Manager (Bill Springer), 80% time for Project Support Lead (Lori) | Sub-recipient | Y | Y | 3/1/2018 | 2/29/2020 | \$334,106.42 | \$0.00 |
| TBD | | | | | | | \$311,120.86 | |
| | | | | | | | | |

13b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients.

No other contracts awarded at this time.

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.

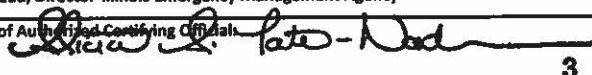
| Project Budget Element (1) | NTE Total Federal Funds Approved (2) | NTE Total Matching Funds Approved (3) | NTE Total Budget (4) | Federal Funds Obligated to Date (5) | Matching Funds Approved to Date (6) | Total Budget to Date (7) | Federal Funds Expended (8) | Approved Matching Funds Expended (9) | Total funds Expended (10) |
|------------------------------|--------------------------------------|---------------------------------------|----------------------|-------------------------------------|-------------------------------------|--------------------------|----------------------------|--------------------------------------|---------------------------|
| a. Personnel Salaries | \$247,322.00 | \$0.00 | \$247,322.00 | \$247,322.00 | \$0.00 | \$247,322.00 | \$134,152.10 | \$0.00 | \$134,152.10 |
| b. Personnel Fringe Benefits | \$210,598.72 | \$0.00 | \$210,598.72 | \$210,598.72 | \$0.00 | \$210,598.72 | \$106,994.65 | \$0.00 | \$106,994.65 |
| c. Travel | \$16,852.00 | \$40,000.00 | \$56,852.00 | \$16,852.00 | \$40,000.00 | \$56,852.00 | \$0.00 | \$31,047.12 | \$31,047.12 |
| d. Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| e. Materials/Supplies | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| f. Contractual | \$645,227.28 | \$0.00 | \$645,227.28 | \$645,227.28 | \$0.00 | \$645,227.28 | \$243,493.54 | \$0.00 | \$243,493.54 |
| g. Other | \$0.00 | \$109,492.58 | \$109,492.58 | \$0.00 | \$109,492.58 | \$109,492.58 | \$0.00 | \$51,797.74 | \$51,797.74 |
| h. Indirect | \$0.00 | \$130,507.42 | \$130,507.42 | \$0.00 | \$130,507.42 | \$130,507.42 | \$0.00 | \$68,726.82 | \$68,726.82 |
| i. Total Costs | \$1,120,000.00 | \$280,000.00 | \$1,400,000.00 | \$1,120,000.00 | \$280,000.00 | \$1,400,000.00 | \$484,640.29 | \$151,571.68 | \$636,211.97 |
| j. Proportionality Percent | 80.00% | 20.00% | 100.00% | 80.00% | 20.00% | 100.00% | 76.18% | 23.82% | 100.00% |

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:

Alicia Tate-Nadeau, Director-Illinois Emergency Management Agency

16b. Signature of Authorized Certifying Official:



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16c. Telephone (area code, number, and extension)

217-782-2700

16d. Email Address:

IEMA.Director@illinois.gov

Date: 1-21-20

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