OMB Control No. 0660-0038 Expiration Date: 8/31/2016

		U.S	S. Department of Commerce	2. Award or Grant Number: 21-10-S13021				
	Performance Progress Report 4. EIN:							
1. Recipient Na							3)	
3. Street Addres	ss: 702 Capital Ave	nue Roor	n 195	The same of the sa			te:	
5. City, State, Zip Code Frankfort, KY 40601						8. Final Report Yes No	9. Report Frequency ✓ □ Quarterly	
10a. Project/Grant Period 10b. End Date: (06/30/2016) Start Date: (07/01/2013)						3 110		
11. List the indi	ividual projects in y	our appr	oved Project Plan	A				
Bui	Project Type (Capacity Building, SCIP Update, Outreach, Training etc.)		Project Deliverable Quantity (Number & Indicator Description)	Total Federal Funding Amount		Funding Amount expended this reporting period	Percent of Total Federal Funding Amount expended	
1 Sta	keholder Meetings		0					
2 Bro	Broadband Conferences		4					
3 Sta			1	A RESTRICTION OF THE PARTY OF T				
4 Cor			0					
5 Gov	vernance Meetings		0					
6 Edu	ucation and Outread		0					
strategies you h Milestone activit employees have	nave employed; pla ties: At this time w been working on t	nned ma re have no he SLIGP	jor activities for the next quarter ot held any Stakeholder Meetings project. We do expect in future o	; and any additional p however, we do antic quarters to hire other	iroject milestor ipate the meet personnel.	nes or information.	acles encountered and mitigation larter. Currently two existing state	
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.								
We don't anticipate any changes at this time.								
11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.								
In this quarter a	majority of our tim	ne has bee	en spent coordinating with specifi	ic administrative and f	inancial person	nel to get forms reviewed, sig	ned and submitted.	

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11d. Describe a	ny success stories or best	t practices you I	have idei	ntified. Ple	ease be as spe	cific as pos	sible.			
12. Personnel	- Habite terre								VII. (WANTED TO THE TOTAL TO TH	
	ect is not fully staffed, de ot fully staffed at this time	en e					ne line and	when the project wi	ll be fully staffed.	
	Job Title		FTE %				Project(s)	Assigned		Change
SWIC			50%	Provide oversight of the SLIGP project						Started work on SLIGP
Staff Member			50%	Provide	administrstiv	e support				Started work on SLIGP
					Add Row	Remov	ve Row			
13. Subcontract	ts (Vendors and/or Subre	cipients)								
13a. Subcontra	cts Table – Include all sub	contractors. T	he totals	from this	table must ec	ual the "Su	bcontracts	Total" in Question 14	4f.	
Name	Subcontract Purpose	Type (Vendor/Sub		RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
Website Development		Vendor		N	N			\$225,000		
Data Collection		Vendor		N	N			\$500,000		
Contractor/ Consultant		Vendor		N	N			\$543,750		
	any challenges encountered			subrecipio			ve Row	n.		

		39						
14. Budget Worksheet								
Columns 2, 3 and 4 must mat	ch vour current pro	iect budget for the entire	award which is th	ne SF-424A on file				
Only list matching funds that		-		ic of 4247 off file.				
,		, ,						
Project Budget Element (1)	Federal Funds	Approved Matching	Total Budget	Federal Funds	Approved Matching Funds	Total Funds Expended (7)		
	Awarded (2)	Funds (3)	(4)	Expended (5)	Expended (6)	3		
a. Personnel Salaries	\$112,500.00	\$318,840.00	\$431,340.00	\$6,434.00	\$15,738.00	\$22,172.00		
b. Personnel Fringe Benefits	\$54,000.00	\$144,000.00	\$198,000.00	\$3,317.00	\$2,632.00	\$5,949.00		
c. Travel	\$165,000.00	\$0.00	\$165,000.00	\$9,014.00	\$0.00	\$9,014.00		
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		
e. Materials/Supplies	\$7,048.00	\$297.00	\$7,345.00	\$0.00	\$0.00	\$0.00		
f. Subcontracts Total	\$1,268,750.00	\$0.00	\$1,268,750.00	\$0.00	\$0.00	\$0.00		
g. Other	\$245,250.00	\$0.00	\$245,250.00	\$0.00	\$0.00	\$0.00		
h. Total Costs	\$1,852,548.00	\$463,137.00	\$2,315,685.00	\$18,765.00	\$18,370.00	\$37,135.00		
i. % of Total	80%	20%	100%	51%	49%	100%		
15. Certification: I certify to t	he best of my know	vledge and belief that thi	s report is correct	and complete for pe	erformance of activities for the pu	rpose(s) set forth in the award		
documents.								
16a. Typed or printed name	and title of Authori	zed Certifying Official:		16c. Telephone (area code, number, and extension)				
Derek Nesselrode				(502) 782-2064				
				16d. Email Address				
				derek.nesselrode@ky.gov				
16b Signature of Authorized	Certifying Official			16e. Date Report Submitted (month, day, year)				
	2		-	November 25, 2013				

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. Public reporting burden for this collection of information is estimated to average 10 hours per response for the application process, 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 Michael Dame, Director, State and Local Implementation Grant Program, Office of Public Safety Communications, National Telecommunications and Information Administration, U.S. Department of Commerce (DOC), 1401 Constitution Avenue, N.W., HCHB, Room 7324, Washington, D.C. 20230.