

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	21-10-S13021
1. Recipient Name				4. EIN:	610600439
3. Street Address				6. Report Date (MM/DD/YYYY)	7/30/2016
5. City, State, Zip Code				7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2016
				8. Final Report Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	9. Report Frequency Quarterly <input checked="" type="checkbox"/>
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	7/1/2013	10b. End Date: (MM/DD/YYYY)	12/31/2017		
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	0	Actual number of individuals reached via stakeholder meetings during the quarter		
2	Individuals Sent to Broadband Conferences	4	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	253	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	Stage 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	Stage 5			
10	Phase 2 – Capacity Planning	Stage 5			
11	Phase 2 – Current Providers/Procurement	Stage 5			
12	Phase 2 – State Plan Decision	Stage 2			
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.) Three from KY attended the April 12-13th, 2016 Spring SPOC meeting in DC. Panel discussions and breakout sessions were very informative. One breakout was a discussion on issues with QPP. FirstNet advised SPOC's on the CTT process. The RFP progress was discussed in one breakout and SPOC's were advised that the RFP response deadline had been extended to May 31st. (2.) Derek attended the PSCR in San Diego. (3.) Three Public Safety Group meetings were held in Q12. (4.) KY is working with new FirstNet regional advisor, Ehrin Ehlert. (5.) North Carolina is hosting a regional QPP CCT training meeting in August for FirstNet. They have asked each state to bring up to 5 subject matter experts. Ky expects to send 4-5 including SPOC. (6.) Kentucky's next Governance Body (KWIEC) meeting is scheduled for August 31st. (7.) Ky FirstNet team will take part in the Ky Emergency Services Conference in Louisville, Sept 6-8.					
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.					
No Changes.					

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

KY continues to update our website with local and national FirsNet information. The KyFirstNet team is planning to participate in several upcoming state conferences to continue outreach to specific groups.

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

Ky will use state first responder conferences to continue outreach, i.e., Emergency Services Conference, Ky Sheriff's association, local fire and rescue venues, etc.

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
SWIC	75%	Provide Oversight of SLIGP Project	
Staff Member	100%	Provide Administrative Support	
Staff Member	100%	Provide Project Support	

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
Micheal Baker & Associates	Website Development	Vendor	N	Y	2/20/2014	6/30/2017		
Micheal Baker & Associates	Data Collection	Vendor	N	Y	2/20/2014	6/30/2017		
Micheal Baker & Associates	Outreach & Education	Vendor	N	Y	2/20/2014	6/30/2017		

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

Due to FirstNet information trickling down slowly, our vendor was not as engaged in outreach as previous quarters.

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	\$227,240.00	\$318,840.00	\$546,080.00	\$149,571.78	\$262,562.26	\$412,134.04
b. Personnel Fringe Benefits	\$6,000.00	\$144,000.00	\$150,000.00	\$5,789.12	\$130,281.52	\$136,070.64
c. Travel	\$165,000.00		\$165,000.00	\$37,363.20	\$0.00	\$37,363.20
d. Equipment	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$7,048.00	\$297.00	\$7,345.00	\$596.18	\$239.42	\$835.60
f. Subcontracts Total	\$1,268,750.00		\$1,268,750.00	\$739,851.02	\$0.00	\$739,851.02
g. Other	\$178,510.00		\$178,510.00	\$7,452.70	\$0.00	\$7,452.70
h. Indirect	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00
i. Total Costs	\$1,852,548.00	\$463,137.00	\$2,315,685.00	\$940,624.00	\$393,083.20	\$1,333,707.20
j. % of Total	80%	20%	100%	71%	29%	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)	16d. Email Address:	
Derek Nesselrode				(502) 782-2064	derek.nesselrode@ky.gov	
16b. Signature of Authorized Certifying Official:				Date:		
				8/22/16		