

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	24-10-S13024	
				4. EIN:	526002033	
1. Recipient Name	State of Maryland Department of Information Technology (DoIT)			6. Report Date (MM/DD/YYYY)	4/30/2016	
3. Street Address	45 Calvert Street			7. Reporting Period End Date: (MM/DD/YYYY)	3/31/2016	
5. City, State, Zip Code	Annapolis, MD 21401			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)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Amount expended	
1	Stakeholder Meetings	0 people				
2	Broadband Conferences	0 people				
3	Staff Hires	0				
4	Contract Executions	0				
5	Governance Meetings	0 meeting				
6	Education and Outreach	Outreach work is frozen at this time.				
7	Subrecipient Agreement Executed	0				
8	Phase 2 - Coverage	Stage 4				
9	Phase 2 - Users and Their Operational Areas	Stage 4				
10	Phase 2 - Capacity Planning	Stage 4				
11	Phase 2 - Current Providers/Procurement	Stage 4				
12	Phase 2 - State Plan Decision	Stage 1				
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.						
No governance meetings or SWIC activity this quarter.						
January 2016						
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.						
N/A						

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

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

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

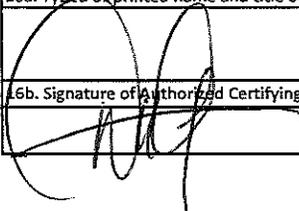
Job Title	FTE%	Project (s) Assigned	Change
Assistant Bureau Chief/Chief Information Officer; Technology and Information Management Command of the Maryland Department of State Police	20%	Law Enforcement SME for FirstNet/SLIGP work	No Change
Department of Information Technology Radio System Director	20%	Program Management at the State level for SLIGP	No Change
Department of Information Technology Systems Engineer	30%	Engineering and program management support at the State level for FirstNet work	No Change
Department of Information Technology GIS Deputy Director	10%	GIS support at the State level	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
Integrity Consulting	Broadband Technical SME	Contractor	Y	Y	12.9.14	7.31.16	\$313,560.00	\$0.00
University of Maryland Center for Health and Homeland Security	Broadband Outreach Administrator, Regional Coordinators, and Grants Management	Contractor	N	Y	8.1.13	7.31.16	\$998,275.00	\$0.00
Western Maryland Regional Coordinator and Exercise Director (Allegany County)	Western MD Regional Outreach coordinator, exercise development, and data collection activities.	Contractor	N	Y	10.30.14	7.31.16	\$75,000.00	\$0.00
Salisbury State University (ESRGC)	Broadband Website and Mapping and Data Collection Analysis	Contractor	N	Y (Task Order MOU)	6.5.14	1.31.18	\$345,000.00	\$0.00
All Hazards Consortium	Regional Coordination for MACINAC	Contractor	Y	Y	9.25.14	7.31.16	\$90,750.00	\$0.00
Motorola and Skyline	Coverage Objectives Analysis: MD FIRST Maps,	Contractor	Y	Y	3.25.15	1.31.18	\$0.00	\$63,374.00

13b. Describe any challenges encountered with vendors and/or subrecipients.
 None

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	\$0.00	\$255,438.00	\$255,438.00	\$0.00	\$68,915.60	\$68,915.60
b. Personnel Fringe Benefits	\$0.00	\$74,513.00	\$74,513.00	\$0.00	\$13,988.59	\$13,988.59
c. Travel	\$149,082.00	\$0.00	\$149,082.00	\$18,084.74	\$0.00	\$18,084.74
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$5,694.00	\$0.00	\$5,694.00	\$5,846.44	\$0.00	\$5,846.44
f. Subcontracts Total	\$1,822,585.00	\$63,374.00	\$1,885,959.00	\$1,214,757.79	\$0.00	\$1,214,757.79
g. Other	\$8,000.00	\$103,815.00	\$111,815.00	\$6,398.37	\$102,390.76	\$108,789.13
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
i. Total Costs	\$1,985,361.00	\$497,140.00	\$2,482,501.00	\$1,245,087.34	\$185,294.95	\$1,430,382.29
j. % of Total	80%	20%	100%	87%	13%	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:		
				Date:		
15b. Signature of Authorized Certifying Official:						