OMB Control No. 0660-0042 Expiration Date: 01/31/2021

	2. Award or Grant Number: 4. EIN:	23-10-S18023 01-6000001				
1. Recipient Name	State of Maine – DAFS				6. Report Date (MM/DD/YYYY)	07/30/2018
3. Street Address	145 State House Station				7. Reporting Period End Date: (MM/DD/YYYY)	06/30/2018
5. City, State, Zip Code	Augusta, ME 04333-0145				8. Final Report Yes □ No ☑	9. Report Frequency Quarterly X
10a. Project/Grant Period						
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020			
11. List the individual projects in yo	our approved Project Plan		<u> </u>			
	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 Quart	ег			(f) Silving on the line keld	
1	Governance Meetings	No	0	Actual number of governance, subcommittee, or working group meetings related to th	e NPSBN held during t	he quarter
2	Individuals Sent to Broadband Conferences	Yes	1	Actual number of individuals who were sent to national or regional third-party confere related to the NPSBN using SLIGP grant funds during the quarter	nces with a focus ared	or training track
3	Convened Stakeholder Events	No	0	Actual number of events coordinated - or held using SLIGP grant funds during the quart	ter, as requested by Fi	rstNet.
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state personnel FTEs who began supporting SLIGP activities during th	e quarter (may be a d	ecimal).
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 repor	ting quarter.	
8	Further Identification of Potential Public Safety Users	No	:	Yes or No if further identification of potential public safety users occurred during this re	eporting quarter.	
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for future emergecy communications technology transitions occurred	l during this reporting	quarter.
10	Identified and Planned to Transition PS Apps & Databases	No		Yes or No if public safety applications or databases within the State or territory were in this reporting quarter	dentified and transitio	n plans were developed
11	Identify Ongoing Coverage Gaps	Yes		Yes or No if participated in identifying angoing coveage 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 requeste	d by FirstNet or
Activities for Opt-Out Scates only In 13, 14	the Pre-SMLA Phose during Statishiciders Engaged Education and Outroach Materials Distributed in- Person Education and Outreach Meterials distributed Sections with	the Reporting Quarter		Setual number of individuals reached vierstainshalder meetings or events during the grands number of materials distributed in-persons during this quarter. Actual valume of hits or impressions to any website, a new detast, sadd media post, an quarter.		ned by SEGP during the

11a. Narrative description for each	h activity reported in Quest	ion 11 for this quarter; an	y challenges or obstacle	es encountered and mitigat	ion strategies you	have employed; p	lanned major activities	for the next quarter; an	any additional project
The SPOC is being fully funded by this SLI continued the education and outreach e in call with FPO; and a Match conversation	GP 2.0 grant. The Office of Inform	nation Technology Director of Co	ommunications and Adminst	cration is 55% match for this gran	it. During this quarter,	, one team member at the Maine Emergency	ttended a broadband confers Management Agency Direct	ence (PSCR ín San Diego, CA).	Many team members
							· Market and the control of the cont	·	
12. Personnel									
12a. Staffing Table - Please include	ie all staff that have contrib	uted time to the project w	ith current quarter's ut			yed by the state no	ot contractors. Please de	o not remove individuals	from this table.
Job Title	FTE%		-	Proje	ect (s) Assigned				Change
Program Director, FirstNetME	100%	FirstNet all aspects							All federally funded.
Director of Communications and Administration	55%	FirstNet all aspects							All match.

12b. Narrative description of any	1								
13. Contractual (Contract and/or									
13a. Contractual Table – Include :	ill contractors. The totals fro	om this table should equal	the "Contractual" in Qu Type	uestion 14f.				Two tests and the	Frankasanta a
Name	Subcontr	Subcontract Purpose		RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
Tilson	FirstNet SLIGP all aspects	- contract extension	Vendor	N	N (in progress)	10/1/2014	2/29/2020	\$267,500.00	\$0.00
					ļ				
				<u> </u>	<u> </u>				
13b. Narrative description any ch	allenges, updates, or change	es related to contracts and,	or subrecipients.		***************************************				
N/A									

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	\$202,042.00	\$121,550.00	\$323,592.00	\$75,766.00	\$45,581.00	\$121,347.00	\$24,483.42	\$19,908.50	
o. Personnel Fringe Benefits	\$101,021.00	\$60,775.00	\$161,796.00	\$37,883.00	\$22,791.00	\$60,674.00	\$8,151.14	\$6,636.17	ww
. Travel	\$51,890.00	\$0.00	\$51,890.00	\$19,459.00	\$0.00	\$19,459.00	\$1,031.72	\$0.00	
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
e. Materials/Supplies	\$3,063.00	\$0.00	\$3,063.00	\$1,263.00	\$0.00	\$1,263.00	\$0.00		
f. Contractual	\$267,500.00	\$0.00	\$267,500.00	\$97,243.00	\$0.00	\$97,243.00	\$0.00		
g. Other	\$18,620.00	\$0.00	\$18,620.00	\$6,982.00	\$0.00	\$6,982.00	\$1,248.70		·······
h. Indirect	\$30,306.00	\$18,233.00	\$48,539.00	\$11,364.00	\$6,837.00	\$18,201.00	\$376.33		
. Total Costs	\$674,442.00	\$200,558.00	\$875,000.00	\$249,960.00	\$75,209.00	\$325,169.00	\$35,301.31	\$26,544.66	
. Proportionality Percent	77.08%	22.92%			23.13%			42.92%	100.00%
15. Certification: I certify to the be	t of my knowledge and belie	that this report is correc	t and complete for pe	rformance of activities for	the purpose(s) se	t forth in the awar	d documents.	nelajum 1994.	da eti tili i i i tilika eti
16a. Typed or printed name and title of Authorized Certifying Official: David W. Maxwell, Program Director, FirstNetME						16c. Telephone (area code, number, and extension)	207-624-9793		
16b. Signature of Authorized Centif	ying Official:						16d. Email Address:	david.w.maxwell@mzin	e.gov S/ į Š

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