

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	27-10-S13027
				4. EIN:	416007161
1. Recipient Name	State of Minnesota			6. Report Date (MM/DD/YYYY)	7/30/2017
3. Street Address	445 Minnesota St			7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2017
5. City, State, Zip Code	St Paul, MN 55101			8. Final Report Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	9. Report Frequency Quarterly <input type="checkbox"/>
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	9/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018		
11. List the individual projects in your approved Project Plan					
	Project Type (Capacity Building, SCIP Update, etc.)	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	910	Actual number of individuals reached via stakeholder meetings during the quarter		
2	Individuals Sent to Broadband Conferences	13	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	30	Actual number of governance, subcommittee, or working group meetings held during the quarter		
6	Education and Outreach Materials Distributed	1575 Pages of Documents 16463 hits on the website. Social Media Facebook 3771 people reached. 454 Followers. Twitter reached 3110 people. 118 Followers.	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 6	For each Phase 2 milestone category, please provide the status of the activity during the quarter: • 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 5			
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;					

Outreach and Education:

Convergence Tabletop Exercise & Planning Meetings, 60 attendees
Univ. of MN, Morris Active Shooter Exercise, tested phones from AT&T
SuperBowl 52 Meetings - 1 Meeting in April - 40 attendees
EMS Teaching and Learning Conference - booth with handouts
AT&T Coverage Webinar
Governor's Staff Meeting with FirstNet/AT&T, confidential handouts were returned
Presentation to Minnesota Indian Affairs Council
Under One Roof Conference hosted by American Red Cross - Booth with handouts
Meeting with EMS Health Partners 3 attendees

Governance: Monthly Interoperable Data Committee Meetings (Apr, May & June)
Monthly StateWide Emergency Communications Board Meetings (Apr, May & June)
Governor's Executive Team Meetings (Apr, May & June)
Regional Radio Boards - for Seven Regions (21 meetings)

Conferences:

MN PS Communications Conference 310 attendees.
PSCR 8 Attendees
SPOC Meeting in Phoenix 5 Attendees

Social Media:

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
Nothing new to report this quarter.

11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.								
Nothing new to report this quarter.								
11d. Describe any success stories or best practices you have identified. Please be as specific as possible.								
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.								
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					
FirstNet Program Manager	100%	FirstNet Program Activities						
Director, ECN	50%	Oversight of all activities						
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
MnFCP	Comprehensive consultation	Vendor	Y	Y	11/4/2013	2/28/2018	\$1,541,600.00	\$385,400.00
NE ECB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
NW ECB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
MESB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
SE ESB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
SR ECB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
SW ECB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
CM ECB	Regional consultation Support	Vendor; Joint Powers Entity	N	Y	4/27/2014	10/31/2017	\$37,288.80	\$9,322.20
Odyssey, Best Western, and Innovative Presentations	Partial (40%) conference expenses	Vendor	Y	Y	4/1/2015	10/31/2017	\$106,172.40	\$26,543.10
13b. Describe any challenges encountered with vendors and/or subrecipients.								
nothing for this quarter								

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.

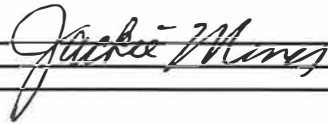
Project Budget Element (1)	Federal Funds Awarded (2)	Approved Matching Funds (3)	Total Budget (4)	Federal Funds Expended (5)	Approved Matching Funds Expended (6)	Total funds Expended (7)
a. Personnel Salaries	\$138,179.00	\$34,545.00	\$172,724.00	\$127,138.28	\$33,088.86	\$160,227.14
b. Personnel Fringe Benefits	\$38,689.00	\$9,672.00	\$48,361.00	\$32,146.06	\$8,081.80	\$40,227.86
c. Travel	\$34,400.00	\$8,600.00	\$43,000.00	\$35,498.54	\$8,939.24	\$44,437.78
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$16,000.00	\$4,000.00	\$20,000.00	\$6,219.71	\$1,554.95	\$7,774.66
f. Subcontracts Total	\$2,099,118.00	\$524,779.00	\$2,623,897.00	\$1,305,380.31	\$346,985.91	\$1,652,366.22
g. Other	\$50,540.00	\$12,635.00	\$63,175.00	\$8,815.14	\$2,203.79	\$11,018.93
h. Indirect	\$12,734.00	\$3,184.00	\$15,918.00	\$12,881.89	\$3,374.78	\$16,256.67
i. Total Costs	\$2,389,660.00	\$597,415.00	\$2,987,075.00	\$1,528,079.93	\$404,229.33	\$1,932,309.26
j. % of Total	80%	20%	100%	79%	21%	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:

Jackie Mines, Director

16b. Signature of Authorized Certifying Official:



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

651-201-7550

16d. Email Address:

jackie.mines@state.mn.us

Date: Aug 24, 2017 Rev 2