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

U.S. Department of Commerce 2. Award or Grant Number #35-10-S13035								
		Pe	rformance Progress Report	4. EIN				
				85-6000565				
20, 2000	cipient Name		Table 10	6. Report Date (MM/DD/YYYY)				
	exico Department of Inform		01/30/2014					
3. Street	t Address 715 Alta Vista	7. Reporting Period End Da 12/31/2013	Date:					
5. City, State, Zip Code 8. Final Report 9. Report Fre								
Santa Fe, NM 87505						□ Yes x Quarterly		
					x No			
1	ject/Grant Period Date: (09/01/2013)	10b. En	d Date: (08/31/2016)					
	the individual projects in y	our annr	royed Project Plan					
II. List	Project Type (Capacity Bu		Project Deliverable Quantity	Total Federal	Total Federa	Funding Amount expended	Percent of Total Federal Funding	
	SCIP Update,	mamb,	(Number & Indicator	Funding Amount	I	this reporting period	Amount expended	
	Outreach, Training etc.)		Description)		production of the control of the con	annes on free story of the same	The state of the s	
1	Stakeholders Meetings	141742122721740A3A	0					
2	Training Sessions		NA					
3	Broadband Conferences		0					
4	4 Staff Hires		0					
5	5 Contract Executions		0					
6	6 Statutory/Regulatory Changes		NA					
7	Governance Meetings		0					
8	Education & Outreach		0					
	Materials							
			3					
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.								
NA for this quarter								
441 1511				(Barattan Baran 2 at		deseth the balance halance	Ali - A	
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.								
NA for this quarter								
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OMB Control No. 0660-0038 Expiration Date: 8/31/2016

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

NA for this quarter

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

NA for this quarter

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.

This will not affect the projects timeline. Documentation requesting establishment and approval of the term positions completed and the recruitment process will be started in Q1, 2014 according to the current plan. Positions for the Financial Specialist – Advanced and the Administrative Services Coordinator will be the first positions posted. Interviews for those positions should be completed by the end of February 2014 and positions should be filled by March 2014.

12b. Staffing Table

The following positions are expected to be filled during Q1 2014 of the project:

Job Title	FTE %	Project(s) Assigned	Change
Business Analyst	100	SLIGP	
Financial Coordinator - Advanced	33	SLIGP	New position added at 33% in place of having only one Financial position
Financial Specialist - Advanced	33	SLIGP	New position added at 33% in place of having only one Financial position
Financial Coordinator – Operational	33	SLIGP	Reduction from 100% in the last report to 33% in this reporting period due to reallocation of resource across other federal grant programs.
Administrative Services Coordinator	33	SLIGP	Reduction from 100% in the last report to 33% in this reporting period due to

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

											reallocation of	
										resource across other		
										federal grant		
											programs.	
					Add Row	Remove	e Row					
13. Subcontract	s (Vendors an	d/or Subrecipients) ·	- TBD									
		lude all subcontracto		als from this	table must eq	ual the "Sub	contracts Tot	al" in Question 14	lf.			
Name	Subcontrac	t Purpose Type		RFP/RFQ	Contract	Start Date	End Date	Total Federal	Total Matchi	ng	Project and % Assigned	
		(Vendo	r/Subrec.)	Issued	Executed			Funds	Funds Allocat	ed		
				(Y/N)	(Y/N)			Allocated				
Catalano & Plache, PLLC	3 11		endor	N	Υ	09/10/2013	09/21/2014	\$84,000	\$4,000 \$0.00		100%	
13b. Describe any challenges encountered with vendors and/or subrecipients. 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 Approved Matching Total Budget Federal Funds Approved Matching Funds Total Funds Expended (7)												
Project Budget Element (1)		Awarded (2)	Funds (3)		(4)		nded (5)	Expended (6)		***************************************		
a. Personnel Salaries		\$430,560.00		\$0.00	\$430,560.	00	\$0.00		\$0.00		\$0.00	
b. Personnel Fringe Benefits		\$150,696.00		\$0.00	\$150,696.		\$0.00	\$0.00			\$0.00	
c. Travel		\$320,000.00		\$0.00	\$320,000.	00	\$0.00		\$0.00		\$0.00	
d. Equipment		\$0.00				\$0.00	\$0.00					
e. Materials/Supplies		\$48,625.00	\$0.00		\$48,625.	00	\$0.00	\$0.00			\$0.00	
f. Subcontracts Total		\$372,000.00	\$474,856.00		\$846,856.	00	\$0.00	\$0.00			\$0.00	
g. Other	g. Other \$461,298.00		\$0.00	\$461,298.	00	\$0.00	\$0.00		\$0.00			
H. Indirect Cost	H. Indirect Cost \$116,244.00		\$0.00	\$116,244.	00	\$0.00	\$0.00		\$0.00			
h. Total Costs \$1,899,423.00 \$4		474,856.00	\$2,374,279.	00	\$0.00	\$0.00		\$0.00				
i. % of Total 80% 20%												
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.												

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

16a. Typed or printed name and title of Authorized Certifying Official	16c. Telephone (area code, number, and extension)				
Department of Information Technology Deputy Secretary Jacqueline Miller	505-827-2051 16d. Email Address				
16b. Signature of Authorized Certifying Official	Jacque.Miller@state.nm.us 16e. Date Report Submitted (month, day, year) 01/30/2014				

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.