U.S. Department of Commerce Performance Progress Report						2. Award or Grant Number: 4. EIN:	36-10-S13036 146013200
1. Recipient Name	New York State Division of H	omeland Security and Eme	ergency Services			6. Report Date	7/29/2015
3. Street Address	1220 Washington Ave, State	Campus Building 7A, Suite	610			(MM/DD/YYYY) 7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2015
5. City, State, Zip Code	Albany, NY 12226					8. Final Report Yes No	9. Report Frequency Quarterly
10a. Project/Grant Period							
Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	1/31/2018		GENERAL PROPERTY.		
11. List the individual projects	in your approved Project Pla	n					
	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	165					
2	Broadband Conferences	3					
3	Staff Hires	0.04					
4	Contract Executions	0					
5	Governance Meetings	1					
6	Education and Outreach	900*					
7	Subrecipient Agreement Executed	None - none planned					
8	Phase 2 - Coverage	Stage 2					
9	Phase 2 – Users and Their Operational Areas	Stage 2					
10	Phase 2 – Capacity Planning	Stage 2					
11	Phase 2 – Current Providers/Procurement	Stage 2					
12	Phase 2 – State Plan Decision	Stage 0					
11a. Describe your progress n the next quarter; and any addi	경기에 가는 것이 되었다면 보다 한 것이 되었다. 그 사람들은 사람들은 경기를 하게 되었다면 하다 보다 없었다.	[전기] 전 경기 전기 입사 시간 [10] 하나 보고 있다고 있다고 있다고 있다고 있다고 있다고 있다고 있다고 있다고 있다	Baseline Report for th	his project; any challenges	or obstacles encountered and mitigation strategies you h	nave employed; plann	ed major activities for
Broadband Conference on June #2 - 3 staff members attended t #3 - Reflects the GIS program su #5 - A meeting of the State Inter #6 - Estimated hit count for the	11th. (Note the NYS Broadbar he FirstNet SPOC conference i pport that is ramping up to as operable and Emergency Com New York State Public Safety &	nd Conference is an econor n Reston in April. Due to in sist in the data collection r imunication Board was hel Broadband website. An exa	nic development focu sternal travel system i napping. Id on May 27th. act report was not ava	ised event, and there were issues, the expenses will not illustrate this repo	any, NY. We also presented at the NYS 911 Coordinators As two sessions on PSBB).  be charged/reported in this quarter. They will likely appear that was due. If the information is provided after the due date	r in the next quarter.	il to the SLIGP office.
Commerce before implemental		to the approved baseline	neport in the next qu	iarrei, uescribe triose belo	w. Note that any substantive changes to the baseline Rep	ort must be approved	by the Department of
New York requested and receive	ed a 30 day extension to the SI	JGP budget modification.	A revised budget was	submitted in July.			

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

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.

Note that the FTE% reflects actual percentage of hours spent working on SLIGP during this quarter.

12b. Staffing Table

Job Title	FTE%	Project (s) Assigned	Change Continues Work	
SWIC	0.2	Overall SLIGP and policy oversight and liasion		
Radio Engineer #1	0.3	SLIGP/State FirstNet primary	Continues Work	
Radio Engineer #2	0.13	Support SLIGP and FirstNet Activities	Continues Work	
Agency Budget Analyst	0.04	Supports communications office budget/fiscal. Assists in preparation of SLIGP budget reports.	Continues Work	
Senior Adminstrative Analyst	0.07	Supports office activities, including the interop board and its working groups	Continues Work	
Senior Administrative Assistant	0.16	Support office outreach and project management efforts.	Continues Work	
GIS Program Supvervisor	0.04	Supervises GIS staff, provides overall GIS liasion effort on data collection and mapping	Begins SLIGP work.	
3. Subcontracts (Vendors and/or Su	brecipients)	•		

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
New York State Technology Enterprise Corporation (NYSTEC)	Outreach, project management, support	Vendor	Not needed (existing State contract)	Υ	8/1/2013	07/31/2016 (plan to do no-cost extension)	\$2,013,960.00	\$0.00
TBD (not required, removed from budget modification)	Website development	Vendor	N	N			\$84,864.00	\$0.00

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

No challenges at this time. We will plan to extend, at no cost, our NYSTEC contract to fit the new grant term.

14. Budget Worksheet							
	budget for the entire award, which is the SF-424A on	file.					
Only list matching funds that the Department of Con	nmerce 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)		
a. Personnel Salaries	\$0.00	\$706,815.00	\$706,815.00	\$0.00	\$75,557.39	\$75,557.39	
b. Personnel Fringe Benefits	\$0.00	\$405,995.00	\$405,995.00	\$0.00	\$41,354.97	\$41,354.97	
c. Travel	\$301,320.00	\$0.00	\$301,320.00	\$15,549.85	\$0.00	\$15,549.85	
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
e. Materials/Supplies	\$18,940.00	\$0.00	\$18,940.00	\$522.65	\$0.00	\$522.65	
f. Subcontracts Total	\$2,098,824.00	\$0.00	\$2,098,824.00	\$321,673.45	\$0.00	\$321,673.45	
g. Other	\$2,448,128.00	\$103,993.00	\$2,552,121.00	\$0.00	\$0.00	\$0.00	
h. Indirect	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	
i. Total Costs	\$4,867,212.00	\$1,216,803.00	\$6,084,015.00	\$337,745.95	\$116,912.36	\$454,658.31	
j. % of Total	80%	20%	100%	74%	26%	100%	
15. Certification: I certify to the best of my knowled	ige and belief that this report is correct and complete	e for performance of activities for	or the purpose(s) set forth	in the award documents.			
16a. Typed or printed name and title of Authorized	Certifying Official:			16c. Telephone (area			
Robert M. Barbato, Director, Office of Interoperable and Emergency Communications				code, number, and extension)	518-322-4915		
16b. Signature of Authorized Certifying Official:				16d. Email Address:	robert.barbato@dhses.ny.gov		
Nobert M. Berlato				Date: 7/29/15	7/29/2015		