U.S. Department of Commerce Performance Progress Report					44-10-S13044		
			The state of the s	4. EIN:	05-6000522		
1. Recipient Name	Rhode Island Emergency Mai	6. Report Date (MM/DD/YYYY)	10/29/2016				
3. Street Address	645 New London Ave.	7. Reporting Period End Date: (MM/DD/YYYY)	9/30/2016				
5. City, State, Zip Code	Cranston, RI 02920	8. Final Report Yes No X	9. Report Frequency Quarterly X				
10a. Project/Grant Period							
	9/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018				
11. List the individual projects	in your approved Project Pla	1					
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category				
1	Stakeholders Engaged	323	Actual number of individuals reached via stakeholder meetings during the quarter				
2	Individuals Sent to Broadband Conferences		Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant fund	ls during the quarter			
3	Staff Hired (Full-Time Equivalent)(FTE)		Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be	a decimal)			
4	Contracts Executed		Actual number of contracts executed during the quarter				
5	Governance Meetings	2	Actual number of governance, subcommittee, or working group meetings held during the quarter				
6	Education and Outreach Materials Distributed		Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any websi during the quarter	te or social media acco	ount supported by SLIGP		
7	Subrecipient Agreements Executed	1	Actual number of agreements executed during the quarter				
8	Phase 2 - Coverage	Stage 6					
9	Phase 2 - Users and Their Operational Areas	Stage 6	For each Phase 2 milestane category, please provide the status of the activity during the quarter:  Stage 1 - Process Development				
10	Phase 2 Capacity Planning	Stage 6	Stage 2 - Data Collection in Progress     Stage 3 - Collection Complete; Analyzing/Aggregating Data				
11	Phase 2 Current Providers/Procurement	Stage 6	<ul> <li>Stage 4 - Data Submitted to FirstNet</li> <li>Stage 5 - Continued/Iterative Data Collection</li> </ul>				
12	Phase 2 – State Plan Decision	Stage 2	Stage 6 - Submitted Iterative Data to FirstNet				
<ol><li>Describe your progress me the next quarter; and any addit</li></ol>			Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you h	ave employed; planne	ed major activities for		
RIEMA Preparedness Conferenc Iterative data collection, approx Data submitted to FirstNet Two people participated in SPOG State Plan Decision meeting was	e, FirstNet info session held ar imately 200 responses (soft m C webinar on July 27 I held with Governor's Chief o	nd 25 individuals attended atch) F Staff, legal team, SWIC/SI	reaching 48 individuals, one meeting included the Quality of service, Pre-emption, and Prioritization (QPP) of POC, programmatic personnel to talk about opt-out procedures				
The state is working on several o	A lot of time was spent this quarter working to resolve an issue with a discovery of vehicle borne mobile repeaters found to be operating on the low band frequencies identified for FirstNet. These did not qualify for the NTIA Relocation grant.  The state is working on several options to overcome this obstacle before the required date to vacate the frequencies  Year 2 of sub-grant agreement with RI Commerce Corp. to provide technical services for program (for administrative purposes, a new agreement was drawn up for the second year)						

11b. If the project team antic Commerce before implemen	cipates requesting any changes tation.	to the approved Baseline	Report in the next qu	arter, describe those below	w. Note that a	ny substantive cha	anges to the Baseline Re	port must be approved	by the Department of
No changes expected during I	next quarter								
11c. Provide any other inforr	nation that would be useful to	NTIA as it assesses this pro	oject's progress.						
In this report, cost share has I	been distributed across different	t budget object codes. Pers	onnel code used to ide	entify soft match captured (	on sign in shee	ts from stakeholde	er engangemant or any Fi	rstNet related activity.	
11.d. Describe any success sto	ories or best practices you have	e identified. Please be as s	pecific as possible.						
12. Personnel									•
	staffed, describe how any lack	of staffing may impact the	e project's time line a	nd when the project will b	e fully staffed				
12b. Staffing Table - Please i	nclude all staff that have contri	buted time to the project.	Please do not remove	individuals from this table					
Job Title	FTE%		Project (s) Assigned						Change
SWIC	75	RI Interoperable Communications Network, RIEMA Operations Section Chief, SWIC, SPOC						N	
13. Subcontracts (Vendors a									
13a. Subcontracts Table - Inc	clude all subcontractors. The to	otals from this table must	equal the "Subcontra	cts 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
City Works	Site mapping and GIS data co	Site mapping and GIS data collection		N (change order to exsisting contract)	Y	6/1/2015		\$100,000.00	\$20,000.00
RI Commerce (Year 1)	Sub-grant award to leverage previous BTOP broadband grant deliverables and subject matter expertise (Year 1 - pilot)			N	Υ	7/1/2015	6/30/2016	\$94,000.00	approx \$35,000 hard match
RI Commerce (Year 2)	Sub-grant award to leverage previous BTOP broadband grant deliverables and subject matter expertise (Year 2 - this represents a separate agreement from the previous)		RI Commerce Corp.	N	Υ	7/1/2016	6/30/2017	\$100,431.00	approx \$25,000 soft match
13b. Describe any challenges	encountered with vendors and	d/or subrecipients.							
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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	\$286,269.12		\$286,269.12	\$159,301.00	\$15,847.00	\$175,148.00
b. Personnel Fringe Benefits	\$119,019.38		\$119,019.38	\$72,954.00		\$72,954.00
c. Travel	\$20,800.04		\$20,800.04	\$2,630.00		\$2,630.00
d. Equipment	\$0.00		\$0.00	\$0.00		\$0.00
e. Materials/Supplies	\$5,822.04		\$5,822.04	\$1,986.00		\$1,986.00
f. Subcontracts Total	\$314,431.00		\$314,431.00	\$148,849.00	\$20,901.00	\$169,750.00
g. Other	\$9,521.42	\$188,966.00	\$198,487.42	\$0.00		\$0.00
h. Indirect	\$0.00		\$0.00	\$0.00		\$0.00
i. Total Costs	\$755,863.00	\$188,966.00	\$944,829.00	\$385,720.00	\$36,748.00	\$422,468.00
j. % of Total	80%	20%	100%	91%	9%	100%
15. Certification: I certify to the best of my knowled	ge 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 Director Peter T. Gaynor, CEM	16c. Telephone (area code, number, and extension)	(401)946-9996				
16b. Signature of Authorized Certifying Official:	16d. Email Address:	peter.gaynor@ema.ri.go	<u>ov</u>			
	Date:	11/30/2016				

Sevie P