			Department of Comme Performance Progress			2. Award or Grant Number: 4. EIN:	44-10-S18044 05-6000522
1. Recipient Name	Rhode Island Emergency Ma	anagement Agency				6. Report Date (MM/DD/YYYY)	09/30/2018
3. Street Address 6	645 New London Ave.			- Action	,	7. Reporting Period End Date: (MM/DD/YYYY)	10/30/2018
5. City, State, Zip Code (Cranston, RI 02920					8. Final Report Yes □ No ☑	9. Report Frequency Quarterly X
10a. Project/Grant Period					(19) [1] [1] [1] [1] [2] [2] [2] [2] [3] [3] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4		EO 15 多相 5 元 均
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020				
11. List the individual projects in you	ur approved Project Plan	***************************************					
	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 d	during the Reporting Quarte	er libere en				SHOULD SEE THE	
1	Governance Meetings	Yes	1	Actual number of governa	nce, subcommittee, or working group meetings related to th	e NPSBN held during t	the quarter
9 1	Individuals Sent to Broadband Conferences	No		Actual number of individu	als who were sent to national or regional third-party confere g SLIGP grant funds during the quarter		The second secon
3 1	Convened Stakeholder Events	No		Actual number of events c	oordinated - or held using SLIGP grant funds during the quar	ter, as requested by Fi	rstNet.
4 1	Staff Hired (Full-Time Equivalent)(FTE)	No		Actual number of state pe	rsonnel FTEs who began supporting SLIGP activities during th	ne quarter (may be a d	lecimal).
5 0	Contracts Executed	No		Actual number of contract	s executed during the quarter.		
6	Subrecipient Agreements Executed	No		Actual number of agreeme	ents executed during the quarter.		
7 F	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing p	policies and/or agreements were developed during this repor	ting quarter.	
8 F	Further Identification of Potential Public Safety Users	No		Yes or No if further identifi	ication of potential public safety users occurred during this r	eporting quarter.	
9 0	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for futur	re 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 a this reporting quarter	applications or databases within the State or territory were i	dentified and transitio	on plans were developed
1 41	Identify Ongoing Coverage Gaps	No		Yes or No if participated in	n identifying ongoing coveage gaps using SLIGP funds during	this reporting quarter	
	Data Collection Activities	No			SMLA Phase Only) Yes or No if participated in data collection ata collection determination by Opt-Out (Post-SMLA) granted		d by FirstNet or
Activities for Opt-Out States only in the		the Reporting Quarter	Makinta wateria			HA LES HERE	Market Bridge
	Stakeholders Engaged		A STATE OF THE PARTY OF THE PAR	Actual number of individue	als reached via stakeholder meetings or events during the qu	arter.	
14	Education and Outreach Materials Distributed In- Person			Actual number of material	s distributed in-person during this quarter.		

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

Education and Outreach Astual volume of hits or impressions to any website, e-newslatter, social medio past, or other occasint supported. Materials distributed	y \$1,1GP during the
Electronisally quarter.	

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

2. Personnel 2. Personnel 3. Satiffication for the commitments they made in the Rhode idand State Plan. The local control work will feed into Ri State Local Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 2. Personnel 3. Satiffication for the commitments they made in the Rhode idand State Plan. The local control work will feed into Ri State Local Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 3. Satiffication for the commitments they made in the Rhode idand State Plan. The local control work will feed into Ri State Local Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 3. Satiffication for the commitments they made in the Rhode idand State Plan. The local control work will feed into Ri State Local Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 3. Satiffication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 4. Satiffication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 5. Satiffication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 5. Satiffication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 6. Satiffication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 7. Satisfication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 8. Satisfication for the Control Policy to be developed in Q4 timeframe (Oct-0x 2018). 8. Satisfication for the Control Policy timeframe (Oct-0x 2018). 8. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for the Control Policy timeframe (Oct-0x 2018). 9. Satisfication for	11a. Narrative description for eac									
22. Personnel 23a. Staffing Table - Please Include all staff that have contributed time to the project with current quarter's utilization. Please anly include FTE staff employed by the state not contractors. Please do not remove individuals from this table. 1. July Title 1. Link Operations Section Chief 1. 75%, Firsthief Program Officer 1. N										ools, as well as
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3b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients.						 				
3b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients. The technology transition plan project (expected to start Sep 2018) was put on hold pending the development of RI State Local Control Policy, draft of which is anticipated to be released early Q4.	Data Collection Project	FirstNet-directed data colle	ction	Contract	N	N	TBD	TBD	\$50,000.00	\$0.00
3b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients. The technology transition plan project (expected to start Sep 2018) was put on hold pending the development of RI State Local Control Policy, draft of which is anticipated to be released early Q4.				L		ŀ			1	
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OMB Control No. 0660-0042 Expiration Date: 01/31/2021

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	\$174,855.00		\$174,855.00	\$65,571.00		\$65,571.00	\$44,096.10		\$44,096.10
b. Personnel Fringe Benefits	\$83,008.00		\$83,008.00	\$31,128.00		\$31,128.00	\$20,363.80		\$20,363.80
c. Travel	\$10,800.00		\$10,800.00	\$4,050.00		\$4,050.00			\$0.00
d. Equipment	\$0.00		\$0.00	\$0.00		\$0.00			\$0.00
e. Materials/Supplies	\$11,500.00		\$11,500.00	\$7,125.00		\$7,125.00	\$361.97		\$361.97
f. Contractual	\$347,120.00	\$133,272.00	\$480,392.00	\$141,795.00	\$49,977.00	\$191,772.00	\$37,118.40	\$22,271.04	\$59,389.44
g. Other	\$0.00	\$23,718.00	\$23,718.00	\$0.00	\$11,859.00	\$11,859.00			\$0.00
h. Indirect	\$0.00		\$0.00			\$0.00			\$0.00
i. Total Costs	\$627,283.00	\$156,990.00	\$784,273.00	\$249,669.00	\$61,836.00	\$311,505.00	\$101,940.27	\$22,271.04	\$124,211.31
j. Proportionality Percent	79.98%	20.02%	100.00%	80.15%	19.85%	100.00%	82.07%	17.93%	100.00%
15. Certification: I certify to the be	st of my knowledge and belief	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.	نائل الرابعواج	
16a. Typed or printed name and title of Authorized Certifying Official: Marc Pappas					16c. Telephone (area code, number, and extension)	401-9	46-9996		
16b. Signature of Authorized Certif		nexe					16d. Email Address:	marc.pappas@ema.ri.gc	<u>v</u>

Public Burden Statement: 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 number. Public reporting burden for this collection of information is estimated to average 12.5 hours per response. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Michael Dame, Program Director, State and Local Implementation Grant Program, National Telecommunications and Information Administration, U.S. Department of Commerce, 1401 Constitution Avenue, NW, Room 4078, Washington, DC 20230.