U.S. Department of Commerce SLIGP 2.0 Performance Progress Report							2. Award or Grant Number:	53-10-S18053		
SLIGP 2.0 Performance Progress Report								91-6001095		
1. Recipient Name	Washington State Military Department						6. Report Date (MM/DD/YYYY)	01/28/2021		
3. Street Address	Building 20 Aviation Drive						7. Reporting Period End Date: (MM/DD/YYYY)	12/31/2020		
5. City, State, Zip Code	Camp Murray, WA 98430						8. Final Report Yes □ No ☑	9. Report Frequency Quarterly X		
10a. Project/Grant Period	•									
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	03/31/2021							
11. List the individual projects in yo	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	during the Reporting Quarte	er								
1	Governance Meetings	No	0		nce, subcommittee, or working group n					
2	Individuals Sent to Broadband Conferences	No	0	Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training track related to the NPSBN using SLIGP grant funds during the quarter						
3	Convened Stakeholder Events	No	0	Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.						
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).						
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.						
6	Subrecipient Agreements Executed	No	0	Actual number of agreements executed during the quarter.						
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing	or No if data sharing policies and/or agreements were developed during this reporting quarter.					
8	Further Identification of Potential Public Safety Users	No		es or No if further identification of potential public safety users occurred during this reporting quarter.						
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for future emergecy communications technology transitions occurred during this reporting quarter.						
10	Identified and Planned to Transition PS Apps & Databases	No		Yes or No if public safety applications or databases within the State or territory were identified and transition plans were developed this reporting quarter						
11	Identify Ongoing Coverage Gaps	No		Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds during this reporting quarter.						
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-	SMLA Phase Only) Yes or No if participa	ated in data collection	activities as requeste	d by FirstNet or		
Activities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter								
13	Stakeholders Engaged			Actual number of individu	als reached via stakeholder meetings o	r events during the qu	ıarter.			
14	Education and Outreach Materials Distributed In- Person			Actual number of materia	ls distributed in-person during this quar	rter.				

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15	Education and Outreach Materials distributed Electronically			Actual volume of hits or in quarter.	npressions to any	website, e-newslet	ter, social media post,	or other account suppo	rted by SLIGP during the
No grant funded activities for the	each activity reported in Question is quarter due to continued ded lement projects. Over the next of	dicated COVID-19 respon	se. Required cost matc	h was updated to reflect SI			•	•	
12. Personnel									
	ude all staff that have contribut	ted time to the project w	ith current quarter's ut	ilization. Please only includ	le FTF staff employ	ved hy the state no	t contractors. Please d	lo not remove individual	s from this table.
Job Title	FTE%		dan en quanter o at		ect (s) Assigned	, ea 2 y 1.10 state 110			Change
Grant Coordinator	2%	Assist in report process	ing	•	(1)				None
Program Manager	2%	Review reports							None
		·							
13. Contractual (Contract and/c	or Subrecipients)								
13a. Contractual Table – Include	all contractors. The totals fron	n this table should equal	the "Contractual" in Qu	uestion 14f.					
Name	Subcontrac	•	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
OCIO/WaTech	Oversight and management	t SLIGP 2.0 activites.	Subrecipient	N	N	03/01/2018	06/28/2019	\$200,622.76	\$47,742.00
			+						
12h Novembiro description and	hallanaa wadataa ayabanaa		/ou oubus sinionts						
	challenges, updates, or changes or the streement has closed the agreement		<u> </u>	lami Camilasa (MaTash) affa	ativa Ivaa 20 201	0 The sweet was an	ill b.a. a.di.a.i.	stand by the Militany De	
contracts executed for this repo	•	nt with washington state	e consolidated recinion	logy services (Warecin) ene	cuve Julie 20, 201	o. The grant progra	Will low be during	sered by the mintary of	partificiti with no new

01/26/2021

Date:

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 D	epartment of Commerce has a	already approved.							
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	\$107,267.00	\$64,167.00	\$171,434.00	\$107,267.00	\$64,167.00	\$171,434.00	\$3,187.12	\$2,620.00	\$5,807.12
b. Personnel Fringe Benefits	\$26,852.00	\$17,967.00	\$44,819.00	\$26,852.00	\$17,967.00	\$44,819.00	\$1,220.80	\$917.00	\$2,137.80
c. Travel	\$7,674.00		\$7,674.00	\$7,674.00	\$0.00	\$7,674.00	\$22.16		\$22.1
d. Equipment			\$0.00			\$0.00			\$0.00
e. Materials/Supplies		\$2,303.00	\$2,303.00		\$2,303.00	\$2,303.00	\$2.04		\$2.0
f. Contractual	\$558,207.00	\$90,563.00	\$648,770.00	\$558,207.00	\$90,563.00	\$648,770.00	\$200,622.76	\$47,742.57	\$248,365.3
g. Other			\$0.00			\$0.00			\$0.0
h. Indirect			\$0.00			\$0.00			\$0.0
i. Total Costs	\$700,000.00	\$175,000.00	\$875,000.00	\$700,000.00	\$175,000.00	\$875,000.00	\$205,054.88	\$51,279.57	\$256,334.4
j. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%
15. Certification: I certify to the bes	t of my knowledge and belief	that this report is correc	t and complete for pe	rformance of activities for	the purpose(s) set	t forth in the awar	d documents.		
16a. Typed or printed name and title of Authorized Certifying Official:							16c. Telephone (area		
Sierra Wardell, Financial Operations Section Manager, Emergency Management Division, Washington Military Department						code, number, and extension)	253-512-7121		
16b. Signature of Authorized Certifying Official:						16d. Email Address:	sierra.wardell@mil.wa.gov		

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