	2. Award or Grant Number: 4. EIN:	06-10-S13006 680278801								
1. Recipient Name	California Governor's Office o	6. Report Date (MM/DD/YYYY)	1/30/2018							
3. Street Address	3650 Schriever Ave	7. Reporting Period End Date: (MM/DD/YYYY)	12/31/2017							
5. City, State, Zip Code	Mather, CA 95655			8. Final Report Yes X No	9. Report Frequency Quarterly X					
10a. Project/Grant Period										
Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018	• • •						
11. List the individual projects	in your approved Project Plar	1		•						
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category							
1	Stakeholders Engaged	100	Actual number of individuals reached via stakeholder meetings during the quarter							
2	Individuals Sent to Broadband Conferences	0	Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant fund	is during the quarter						
3	Staff Hired (Full-Time Equivalent)(FTE)	4	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)							
4	Contracts Executed	0	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	100	Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any website or social media account supported by SLIGP during the quarter							
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter							
8	Phase 2 - Coverage	5								
9	Phase 2 – Users and Their Operational Areas	5	For each Phase 2 milestone category, please provide the status of the activity during the quarter: Stage 1 - Process Development Stage 2 - Data Collection in Progress Stage 3 - Collection Complete; Analyzing/Aggregating Data Stage 4 - Data Submitted to FirstNet Stage 5 - Continued/Iterative Data Collection							
10	Phase 2 – Capacity Planning	5								
11	Phase 2 – Current Providers/Procurement	2								
12	Phase 2 – State Plan Decision	4	Stage 6 - Submitted Iterative Data to FirstNet							
		• •	Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you h	iave employed; plann	ed major activities for					
the next quarter; and any addi	tional project milestones or i	nformation.								
1	oups focused on coverage, ne		7 and December 6, 2017. SLIGP staff coordinated the Technical Advisory Group (TAG) to evaluate the State Pl products. Scores were weighted based on priorities collected from stakeholder outreach. SLIGP staff held wee		t i					
11b. If the project team anticip Commerce before implementa		to the approved Baseline	e Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Rep	ort must be approved	by the Department of					
N/A										

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

N/A

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

N/A

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.

None None Removed Added Removed Removed Removed Removed Removed Removed Removed Removed
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Telecommunications Systems Analyst II - Mathew Evans	1	Project Management							Removed			
Telecommunications Systems Analyst II - Michael Elder	1	Project Management							Added			
Telecommunications Systems Analyst II - Lori Nielsen	1	Project Management			•				Added			
Telecommunications Systems Analyst I - Timofey Semenov	1	Project Management							Added			
Staff Services Analyst - Romi Lal	1	Project Management _,						Removed ,				
Associate Information Systems Analyst - Killion	0.2	Project Management	Project Management									
Staff Services Analyst - Monique Shells	1	Project Management						Added				
13. Subcontracts (Vendors and/or Subrecipients)												
13a. Subcontracts Table – Inclu	de all subcontractors. The to	otals from this table must	equal the "Subcontrac	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			
cience Application Public Outreach and Education		Vendor	Yes	Y	2/14/2014	2/13/2017	\$438,750.00	\$0.00				
14. Budget Worksheet Columns 2, 3 and 4 must match Only list matching funds that th Project Budget Element (1)				Approved Matching	Total	Budget (4)	Federal Funds Expended (5)	Approved Matching Funds Expended (6)	Total funds Expended (7)			
				Funds (3)								
a. Personnel Salaries		\$1,240,710.00		\$920,569.00	\$2,161,279.00		\$831,915.00	\$635,889.00	\$1,467,804.00			
b. Personnel Fringe Benefits		\$573,994.00		\$426,941.00	\$1,000,935.00		\$393,229.00	\$294,238.00	\$687,467.00			
c. Travel		\$86,800.00		\$0.00	\$86,800.00		\$75,551.00	\$0.00	\$75,551.00			
d. Equipment		\$0.00		\$0.00	\$0.00		\$0.00	\$0.00	\$0.00			
e. Materials/Supplies		\$88,855.00		\$0.00	\$88,855.00		\$45,920.00	\$0.00	\$45,920.00			
f. Subcontracts Total		\$2,562,119.00		\$71,687.00	\$2,633,806.00		\$654,742.00	\$0.00	\$654,742.00			
<u> </u>		\$249,60		\$0.00	\$249,607.00		\$183,473.00	\$0.00	\$183,473.00			
h. Indirect \$874,7			\$0.00 \$874,701.00		\$536,800.00	\$0.00	\$536,800.00					
i. Total Costs \$5,676,7			\$1,419,197.00	\$7,095,983.00		\$2,721,630.00	\$930,127.00	\$3,651,757.00				
j. % of Total 80%				20% 100%		75%	25%	100%				
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 16a. Typed or printed name and title of Authorized Certifying Official: Renee Mota-Jackson							16c. Telephone (area code, number, and extension)	916-848-8404				
16b. Signature of Authorized Certifying Official:							16d. Email Address: renee.jackson@caloes		a.gov			
							Date: 2/13/18	·				