| U.S. Department of Commerce Performance Progress Report | | | | | 13-10-\$13013 | | | | | | |
|---|--|---|--|----------------------|------------------------|--|--|--|--|--|--|
| | 4. EIN: | 580973190 | | | | | | | | | |
| 1. Recipient Name | Georgia Emergency Manager | 6. Report Date (MM/DD/YYYY) | 10/25/2017 | | | | | | | | |
| 3. Street Address | 935 East Confederate Avenue | 7. Reporting Period End Date: (MM/DD/YYYY) | 9/30/2017 Q17 | | | | | | | | |
| 5. City, State, Zip Code | Atlanta, GA, 30316 | 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 | | | | | | | | |
| 11. List the individual projects in your approved Project Plan | | | | | | | | | | | |
| | Project Type (Capacity Building, SCIP Update, | Project Deliverable Quantity (Number & Indicator Description) | Description of Milestone Category | | | | | | | | |
| | Stakeholders Engaged | 233 | Actual number of individuals reached via stakeholder meetings during the quarter | | le. | | | | | | |
| 2 | Individuals Sent to Broadband Conferences | | Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter | | | | | | | | |
| 3 | Staff Hired (Full-Time Equivalent)(FTE) | 0 | 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 | 0 | Actual number of governance, subcommittee, or working group meetings held during the quarter | | | | | | | | |
| 6 | Education and Outreach Materials Distributed | 6550 | 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 | | | | | | | | |
| / | Subrecipient Agreements Executed | N/A | Actual number of agreements executed during the quarter | | | | | | | | |
| 8 | Phase 2 - Coverage | Stage 5 | | | | | | | | | |
| 9 | Phase 2 – Users and Their Operational Areas | Stage 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 | | | | | | | | |
| 10 | Phase 2 – Capacity Planning | Stage 5 | | | | | | | | | |
| - 11 | Phase 2 – Current Providers/Procurement | Stage 5 | Stage 4 - Data Submitted to FirstNet Stage 5 - Continued/Iterative Data Collection | | | | | | | | |
| 12 | Phase 2 – State Plan Decision | Stage 4 | Stage 6 - Submitted Iterative Data to FirstNet | | | | | | | | |
| 11a. Describe your progress m the next quarter; and any addit Reviewed draft State Plan, subm | ional project milestones or in | 20082 | Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you h | ave employed; planne | d major activities for | | | | | | |
| 11b. If the project team anticipa Commerce before implementat | | to the approved Baseline | Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Report | ort must be approved | by the Department of | | | | | | |

SLIG-P/ State's voluntary reduction of original grant award amount (\$ 1.2 M reduction) in effect and reflected in this PPR.

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11c. Provide any other information that would be useful to NTIA as it assesses this project's progress. Pace of outreach remains measured based on information garnered from FirstNet. 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. 12b. Staffing Table - Please include all staff that have contributed time to the project. Please do not remove individuals from this table. Job Title FTE% Project (s) Assigned Change Project Coordinator 0.5 Continued work on effort position is existing SWIC (911 Director) 0.15 Continued work on effort position is existing Chief of Special Projects 0.4 position is existing Continued work on effort Asst Director of Homeland Security 0.1 Continued work on effort position is existing ompliance Officer 0.15 position is existing ontinued work on effort Grants Specialist 0.05 position is existing Continued work on effort Financial Ops Specialist 0,05 position is existing Continued work on effort Dir of Operations 0.01 position is existing ontinued work on effort SOC Director 0.01 position is existing Continued work on effort 13. Subcontracts (Vendors and/or Subrecipients) 13a. Subcontracts Table - Include all subcontractors. The totals from this table must equal the "Subcontracts Total" in Question 14f. Contract **Total Federal Funds Total Matching Funds** Туре Subcontract Purpose RFP/RFQ Issued (Y/N) Start Date End Date Name Executed (Vendor/Subrec.) Allocated Allocated (Y/N) \$2,393,205.00 Outreach, education meetings, facilitation \$0.00 GTRI Vendor N/A N/A TBD TBD 11/30/2014 WhitePost website development Vendor 7/1/2014 \$6,075.00 \$0.00 Y Y State Consultation Facilitation, room rental 7/21/2015 7/21/2015 \$7,080.00 \$0.00 Ga Tech Conference Center Vendor Y Y 13b. Describe any challenges encountered with vendors and/or subrecipients.

| Project Budget Element (1) | Federal Funds Awarded (2) | Approved Matching Funds (3) | Total Budget (4) \$653,829.00 | Federal Funds Expended (5) \$228,463.00 | Approved Matching Funds Expended (6) \$26,840.00 | Total funds Expended (7) \$255,303.00 |
|---|---|--|---|---|--|---|
| a. Personnel Salaries | \$527,109.00 | \$126,720.00 | | | | |
| b. Personnel Fringe Benefits | \$252,174.00 | and and the strength of the | \$252,174.00 | \$139,456.00 | | \$139,456.00 |
| c. Travel | \$72,910.00 | | \$72,910.00 | \$24,104.00 | | \$24,104.00 |
| d. Equipment | | | \$0.00 | | | \$0,00 |
| e. Materials/Supplies | \$26,504.00 | and the second s | \$26,504.00 | \$8,760.00 | | \$8,760.00 |
| f. Subcontracts Total | \$1,206,360.00 | | \$1,206,360.00 | \$13,155.00 | | \$13,155.00 |
| g. Other | \$21,600.00 | \$399,944.00 | \$421,544.00 | \$12,118.00 | \$166,073.00 | \$178,191.00 |
| h. Indirect | | | \$0.00 | | 1.000 | \$0.00 |
| . Total Costs | \$2,106,657.00 | \$526,664.00 | \$2,633,321.00 | \$426,056.00 | \$192,913.00 | \$618,969.00 |
| , % of Total | Total 80% | | | 69% | 31% | 100% |
| 15. Certification: I certify to the best of my knowledge and b | elief that this report is correct and complet | e for performance of activities f | or the purpose(s) set forth | in the award documents. | 100 C | |
| 16a. Typed or printed name and title of Authorized Certifyin Noe McKinney, Director of Federal Preparedness Grants | 16c. Telephone (area code, number, and extension) | 404-635-7514 | | | | |
| 16b. Signature of Authorized Certifying Official: | 16d. Email Address: - Date: 10/25/17 | joe.mckinney@gema.ga.gov | | | | |

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