U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	24-10-\$13024
T Entimative Progress Report				4. EIN:	526002033
1. Recipient Name	poore or maryland beparament or information recimology (both)			6. Report Date (MM/DD/YYYY)	1/30/2017
3. Street Address	45 Calvert Street				12/31/2016
5. City, State, Zip Code	Annapolis, MD 21401			8. Final Report Yes No x	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	iπ your approved Project Pla	n			
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	33	Actual number of individuals reached via stakeholder meetings during the quarter	The state of the same	
2	Individuals Sent to Broadband Conferences	3	Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant fund	ds 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	error en la companya de la companya	
5	Governance Meetings	1	Actual number of governance, subcommittee, or working group meetings held during the quarter		
6	Education and Outreach Materials Distributed	0	Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any websi during the quarter	te or social media acc	ount supported by SLIGP
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter		
8	Phase 2 - Coverage	Stage 4		and the second	A CARRELL CO.
9	Phase 2 – Users and Their Operational Areas	Stage 4	For each Phase 2 milestone category, please provide the status of the activity during the quarter: Stage 1 - Process Development		
10	Phase 2 – Capacity Planning	Stage 4	Stage 2 - Data Collection in Progress Stage 3 - Collection Complete; Analyzing/Aggregating Data		
11	Phase 2 – Current Providers/Procurement	Stage 4	Stage 4 - Data Submitted to FirstNet Stage 5 - Continued/Iterative Data Collection		
12	Phase 2 – State Plan Decision	Stage 1	Stage 5 - Continued/Iterative Data Collection Stage 6 - Submitted Iterative Data to FirstNet		
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¹¹a. Describe your progress meeting each major activity/milestone approved in the Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project milestones or information.

OMB Control No. 0660-0038 Expiration Date: 5/31/2019

Attendance at the SPOC conference: 11/16-11/17/2016

A FirstNet Briefing was delivered at the Radio Ops Group Meeting on 12/13/16.

The Statewide Interoperability Radio Control Board met on 12/14/16.

Contactor activity for the Quarter has been frozen except for CHHS Grants Administration and ESRGC website updates:

Orit Zeevi Bell (CHHS) Grants Administration, all other CHHS work on hold

- · Maintained official Grant Folder.
- Responded to NTIA questions concerning the Quarter 12 PPR and FFR and sent in updates as necessary.
- Responsible for compiling and submitting the required grant reports, including the Period Performance Report (PPR), and Federal Financial Report (FFR) for Quarter 13 of the grant.
- Collected and calculated state employee match hours and timesheet records.
- Collected and calculated meeting match hours and records.
- Records management and backup of all documentation on the team Google Drive. Records include employee match hours, meeting attendance, MOUs and Contracts, etc.
- Created and archived team status reports.

ESRGC

Updated website with latest SPOC report each week. All other work on hold.

11b. If the project team anticipates requesting any changes to the approved Baseline Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Report must be approved by the Department of Commerce before implementation.

11c. Provide any other informat	tion that would be useful to I	NTIA as it assesses this pro	ject's progress.							
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11d. Describe any success storie	oc or hact practices you have	identified Places have so	ocific as nossible							
TTO. Describe any success storie	es or nest bractices you have	identified. Flease de as si	ecule as bossinie.							
12. Personnel										
12a. If the project is not fully st	affed, describe how any lack	of staffing may impact the	project's time line a	nd when the project will be	e fully staffed.					
12b. Staffing Table - Please incl		buted time to the project.	Please do not remove							
Job Title	FTE%			Project	(s) Assigned				Change	
Assistant Bureau Chief/Chief Information Officer;										
Technology and Information		Law Enforcement SME for FirstNet/SLIGP work no change								
Management Command of the										
Maryland Department of State										
Police	20									
Department of Information								···		
Technology Radio System		ogram Management at the State level for SLiGP no change								
Director	20									
Department of Information		Engineering and program	igineering and program management support at the State level for FirstNet work							
Technology Systems Engineer	30	anguine of the group was the angular transfer to the state reverse to this transfer work.							no change	
Department of Information										
Technology GIS Deputy		GIS support at the State level							no change	
Director	10									
		ļ						1		
13. Subcontracts (Vendors and,			1-1 #5 1							
13a. Subcontracts Table – Inclu	ide all subcontractors. The to	otals from this table must	equal the "Subcontra	cts rotal" in Question 141.	Contract			T .		
Name	Subcontract Purpose		Type (Vendor/Subrec.)	RFP/RFQ Issued (Y/N)	Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	
Integrity Consulting	Broadband Technical SME		Contractor	Υ	Y	12.9.14	7.31.16	\$313,560.00	\$0.00	
University of Maryland Center for Health and Homeland	Broadband Outreach Administrator, Regional Coordinators, and Grants Management		Contractor	N	Y	8.1.13	1.31.18	\$998,275.00	\$0.00	
Security	and or an			1						
Western Maryland Regional Coordinator and Exercise	Western MD Regional Outreach coordinator, exercise		Contractor	N	Y	10.30.14	7.31.16	\$75,000.00	\$0.00	
Director (Allegany County)	developement, and data coll	ection activites.								
Salisbury State University	Broadband Website and Ma	pping and Data Collection			Y (Task	T	4.05.15	40.00 000 000	40.00	
(ESRGC)	Analysis	· · ·	Contractor	N	Order	6.5.14	1.31.18	\$345,000.00	\$0.00	
All Hazards Consortium	Regional Coordination for M	ACINAC	Contractor	γ	MOU) Y	9.25.14	7.31.16	\$90,750.00	\$0.00	
Zas mazarus Consolitum			2011GACCOI	† '	 '	y.25.24		\$30,733.00	\$0.00	
Motorola and Skyline	Coverage Objectives Analysis: MD FiRST Maps, coverage analysis and data to be used to in planning for FirstNet coverage objectives		Contractor	Y	Y	3.25.15	1.31.18	\$0.00	\$63,374.00	
13b. Describe any challenges e	ncountered with vendors an	d/or subrecipients.								
k			*****							

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	\$0.00	\$255,438.00	\$255,438.00	\$0.00	\$96,700.50	\$96,700.50
o. Personnel Fringe Benefits	\$0.00	\$74,513.00	\$74,513.00	\$0.00	\$22,045.87	\$22,045.87
. Travel	\$149,082.00	\$0.00	\$149,082.00	\$18,375.51	\$0.00	\$18,375.51
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$5,694.00	\$0.00	\$5,694.00	\$5,846.63	\$0.00	\$5,846.63
. Subcontracts Total	\$1,822,585.00	\$63,374.00	\$1,885,959.00	\$1,276,255.86	\$0.00	\$1,276,255.86
g. Other	\$8,000.00	\$103,815.00	\$111,815.00	\$6,398.37	\$103,813.04	\$110,211.41
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
. Total Costs	\$1,985,361.00	\$497,140.00	\$2,482,501.00	\$1,306,876.37	\$222,559.41	\$1,529,435.78
. % of Total	80%	20%	100%	85%	15%	100%
15. Certification: I certify to the best of my knowled	ige and belief that this report is correct and complet	e for performance of activities f	or the purpose(s) set forth	in the award documents.		
16a. Typed or printed name and title of Authorized Sec/David Garcia	16c. Telephone (area code, number, and extension)	410-697-9406				
168. Signature of Authorized Certifying Official:					david.garcia@mayland.s	gov
	Date:	1/30/2017				