OMB Control No. 0660-0038 Expiration Date: 8/31/2016

		U.S. Departs	ment of Commerce			2. Award or Grant Number			
						30-10-S13030			
		Performance	ce Progress Report						
						4. EIN			
						810302402			
1. R	lecipient Name					6. Report Date (MM/DD/Y)	(YY)		
S	tate of Montana, Depar	tment of Adminis	tration						
3. Street A						7. Reporting Period End Da	ate:		
PO Box 200	0113, 124 No. Roberts St	treet, Mitchell Bu	ilding		1	09/30/2014Revised			
5. City, Stat	te, Zip Code					8. Final Report	9. Report Frequency		
5. 6.07, 5.2						□ Yes	x Quarterly		
Helena, MI	T 59620					x No			
	ct/Grant Period	10b. End Date:					· · · · · · · · · · · · · · · · · · ·		
-	te: 08/01/2013	07/31/2016							
11. List the	e individual projects in y	our approved Pro	ject Plan	<u>, </u>					
	Project Type (Capacity	Project	Deliverable Quantity	Total Federal	Total Federal	ederal Funding Amount expended Percent of Total Federal Funding			
))	Building, SCIP Update,	(Numb	er & Indicator	Funding Amount	at the end of	this reporting period	Amount expended		
	Outreach, Training etc	.) Descrip	otion)						
1	Stakeholder Meetings	300 (st	akeholders)						
2	Broadband Conference	e 0							
3	Staffing	0							
4	Contract Executions	0							
5	Governance Meetings	3	· · · ·						
6	Education and Outrea	ch 500 (m	aterials distributed)						
11a. Descr	ribe your progress meet	ting each major a	ctivity/milestone approv	ed in the Baseline Re	port for this pro	oject; any challenges or obst	acles encountered and mitigation		
strategies	you have employed; pla	nned major activi	ities for the next quarte	r; and any additional p	project milesto	nes or information.			
This quarte	er saw an increase in ed	ucation and outre	ach activity. Presentati	ons about the initial c	onsultation me	eting were made July 8, Aug	ust 12 and September 9, 2014. Also,		
the SPOC a	and staff presented to th	e Montana State	Fire Chief's Association	Board of Directors on	August 6, 2014	l; and, to the Montana Sheril	fs and Peace Officers Association on		
September	r 18 at their state meeti	ng at Kalispell, Mo	ontana. These reports a	nd information can be	e found at: <u>htt</u>	<u>://sitsd.mt.gov/policy/coun</u>	<u>cils/sigb/default.mcpx</u>		
						s. The RFP is under developm			
			•	-	ie next quarter	, describe those below. Note	that any substantive changes to the		
Baseline Re	eport must be approved	l by the Departme	ent of Commerce before	implementation.					
n/a									

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

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

The Governance structure is yielding benefits to SLIGP progress. By having local representation from statewide associations of fire, police, emergency medical, as well as state justice, transportation and military affairs, and, non-voting telecommunications representatives, the parties are talking and working together. This has resulted in a successful Initial Consultation Meeting held at the end of October, 2014.

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

Job Title	FTE %	Project(s) Assigned	Change
SLIGP Start-up Manager (Inkind)	100%	Work with Governance Board, including reports to SIGB upon request; prepare PPR; organize OR and Ed with public safety associations and communities; prepare statements of work for subcontracts.	No Change
SPOC (Inkind)	5%	Single Point of Contact meeting and conference attendance; Bureau Chief supervision	No Change
PSCB Bureau Chief (inkind)	20%	Bureau Chief meeting and conference attendance, SLIGP supervision	No Change
PSCB Bureau Fiscal Manager (inkind)	3%	Liaison with state accounting, fiscal reporting, procurement	No Change
Administrative Assistant to SIGB (federal)	50%	Maintain SIGB and SLIGP websites, SIGB attendance records, meeting minutes, meeting scheduling and set-up, travel claims processing from SIGB members, and, answer SIGB member requests.	No Change

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.

Name	Subcontract Purpose	Type (Vendor/Subrec.)	RFP/RFQ	Contract	Start	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
		(vendor/subrec.)	Issued (Y/N)	Executed (Y/N)	Date	Date	Funds Anocated		
	Needs Assessment	Vendor	N	N			410,931	102,733	
	Meeting Facilitation	Vendor	N	N			(inclusive)		
	Legal	Vendor	N	N			(inclusive)		
	Technical	Vendor	N	N			(Inclusive)		
	Website	Vendor	N	N			(inclusive)		
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3b. Describe any challenges encountered with vendors and/or subrecipients. N/A

14. Budget Worksheet								
Columns 2, 3 and 4 must mate	ch your current pro	ject budget for the entire	award, which is tl	he SF-424A on file.				
Only list matching funds that	the Department of	Commerce has already ap	proved.					
			1					
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	250,000	330,272	580,272	12,015	85,102	97,117		
b. Personnel Fringe Benefits	56,850	75,104	131,954	2,394	22,622	25,016		
c. Travel	181,026	14,157	195,183	9,037	13.743	22,780		
d. Equipment	0	0	0	0	0	0		
e. Materials/Supplies	9,400	1,832	11,232	0	0			
f. Subcontracts Total	410,931	0	410,931	0	0	0		
g. Other	908,208	32,739	940,947	0	0	0		
h. Total Costs	1,816,415	454,104	2,270,519	23,446	121,467	144,913		
i. % of Total	80%	20%	100%	16%	84%	100%		
15. Certification: I certify to t	he best of my know	vledge and belief that thi	s report is correct	and complete for per	formance of activities for the pur	oose(s) set forth in the award		
documents.				de televis por el la districtiva de Secondario de la districtiva de la dist				
<u>- 11</u> 전 12 12 12 12 12 12 12 12 12 12 12 12 12						성가 있는 것 같은 것은 것은 것 같은 것이다. 사람 <mark>등</mark> 것은 것 같은 것은 것 같은 것을 받았다.		
16a. Typed or printed name a	and title of Authori	zed Certifying Official		16c. Telephone (area	a code, number, and extension)			
Quinn Ness, Chief				406-444-6134				
Public Safety Communication	ns Bureau							
				16d. Email Address Qness@mt.gov				
16b. Signature of Authorized	Certifying Official			16e. Date Report Su	bmitted (month, day, year)			
	X L	1en		10/31/14; Revised 1				
cording to the Decord Redu	intion Act. pc. omon		ad to respond to a		n unless it displays a currently valid	OMB control number. Public		

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 control number. Public reporting burden for this collection of information is estimated to average 10 hours per response for the application process, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Michael Dame, Director, State and Local Implementation Grant Program, Office of Public Safety Communications, National Telecommunications and Information Administration, U.S. Department of Commerce (DOC), 1401 Constitution Avenue, N.W., HCHB, Room 7324, Washington, D.C. 20230.

FEDERAL FINANCIAL REPORT (Follow form instructions)

U.S. Department of Commerce 30-10-S13030 1 3. Recipient Organization (Name and complete address including Zip code) State of Montana, Department of Administration; P.O. Box 200113; 124 N. Roberts Street; Mitchell Building; Helena, MT 59620 4a. DUNS Number 4b. EIN 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR 8. Report Type (Control of Control of Conten	U.S. Department of Commerce 30-10-513030 1 J. Recipient Organization (Name and complete address including Zip code) 1 1 Bale of Montana, Department of Administration; P.O. Box 200113; 124 N. Roberts Street; Mitchell Building; Helene, MT 56520 30-10-513030 1 a. DUNS Number 45. EIN 5. Recipient Account Number or identifying Munder (To report multiple grants, use FFR mell 8. Report Type T; Besis of Account Munder or identifying Munder (To report multiple grants, use FFR mell 9. Reporting Feriod End End Date (Month, Day, Year) Project/Orani Period (Month, Day, Year) To: 07731/2016 9. Reporting Feriod End Date (Month, Day, Year) 9. Transactions 30-2017 10. Report Multiple grant reporting) 6. Report Type T; Besis of Account Multiple grant reporting) default Report Multiple grant reporting) 6. Report Multiple grant reporting) 6. Report Multiple grant reporting) default Report Multiple grant reporting) 6. Report Multiple grant reporting) 6. Report Multiple grant reporting) default Report Multiple grant reporting) 6. Report Multiple grant reporting) 6. Report Multiple grant reporting) default Report Multiple grant reporting) 6. Report Multiple grant reporting) 6. Report Multiple grant reporting) default Report Multiple add Blance; 11. Total redefault ford State of Federal funds (line d mi	1. Federa Report is	al Agency and Organiz s Submitted	zational Element to Which	h 2. Federal		ner Identifyin		signed by Federal A	gency (To	Page	of	
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According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid UNIB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0081), Washington, DC 20503.