

U.S. Department of Commerce		2. Award or Grant Number 31-10-S13031	
Performance Progress Report		4. EIN 47-0491233	
1. Recipient Name Nebraska Department of Administrative Services/Office of Chief Information Officer		6. Report Date (MM/DD/YYYY) 04/22/2016	
3. Street Address 501 S. 14 <sup>th</sup> Street PO Box 95045		7. Reporting Period End Date: (03/31/2016)	
5. City, State, Zip Code Lincoln, NE 68509-5045		8. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	9. Report Frequency X Quarterly
10a. Project/Grant Period Start Date: (08/01/2013)	10b. End Date: (MM/DD/YYYY) (01/31/2018)		

**11. List the individual projects in your approved Project Plan**

	Project Type (Capacity Building, SCIP Update, Outreach, Training etc.)	Project Deliverable Quantity (Number & Indicator Description)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding Amount expended
1	Stakeholder Meetings	15			
2	Broadband Conferences	1			
3	Staff hires	0			
4	Contract Executions	0			
5	Governance Meetings	2			
6	Education and Outreach	1,683			
7	Sub-recipient Agreements	0			
8.	Phase 2 - Coverage	1 thru 5			
9.	Phase 2 – Users and Their Operational Areas	1 thru 5			
10.	Phase 2 – Capacity Planning	1 thru 5			
11.	Phase 2 – Current Providers/Procurement	1,4			
12.	Phase 2 – State Plan Decision	1			

**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.**

1. Lt Gov hosted a meeting with public safety department heads to discuss types of communications systems impacting Nebraska and I we presented FirstNet information to 15 people.
2. SLIGP Program Manager attended the APCO Emerging Technologies forum in KCMO.
3. Staff hires = 0
4. Contract Executions - 0
5. Governance Meetings – Nebraska held 2 governance meetings. February 18 Working Group meeting and on March 15 we had the Nebraska Public Safety Communications Council Meeting which is the council that our governance group is a Working Group under.
6. Education and Outreach – Through seven emails via ListSrv and other stakeholder email lists we sent materials such as agenda’s and links to FirstNet related articles

and videos and information sites to our stakeholders(1,683).  
 7. Sub-recipient Agreement Executed – 0

11 b. 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. - No changes anticipated.

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.  
 NE believes one of our best and potentially most productive outreach efforts has been to contact each of our 93 County Clerks and Chairs of our County Boards asking each county to appoint a FirstNet representative that we can keep informed about FirstNet activities who then in turn can update the County Board. In past projects many times the people who have the funding responsibilities haven’t been kept in the information loop and this is an attempt to minimize the chances of this to occur with FirstNet. We have about 85 of our 93 Counties who have made such an appointment. They representatives include county board members, municipal leaders, emergency managers, communications specialists, police and fire representatives and more. They are kept informed through informational emails and are invited to meetings related to FirstNet such as the Initial Consultation meeting. Informational flow to and continued interest to these individuals needs continuous attention for involvement to grow and occur.

**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.

The project isn't fully staffed at this time as it isn't necessary based on the activities to be completed. As we move forward and needs arise more staff will be engaged for grant related activities.

**12b. Staffing Table**

Job Title	FTE %	Project(s) Assigned	Change
Chief Information Officer	6%	Point of Contact for the FirstNet and SLIGP in Nebraska and engaged in planning activities with SLIGP program manager.	No Change
OCIO IT Administrator	5%	Administrative Point of Contact for the SLIGP in Nebraska and planning activities with SLIGP program manager.	No Change
State Patrol Major			Did not participate in SLIGP activities this Quarter.
Assistant Fire Marshal			Did not participate in SLIGP activities this Quarter.
State Patrol Communications Director			Did not participate in SLIGP activities this

			Quarter.
State Patrol Infrastructure Analyst			Did not participate in SLIGP activities this Quarter.
OCIO Public Safety System Manager			Did not participate in SLIGP activities this Quarter.
OCIO Public Safety Administrative Assistant	5%	Worked on taking and transcribing Governance meeting minutes. Assisted with meeting preparations and engaged in other planning activities.	Re-engaged in FirstNet activities this quarter.
OCIO Senior Applications Developer			Did not participate in SLIGP activities this Quarter.
OCIO Application Developer			Did not participate in SLIGP activities this Quarter.
OCIO Telecomm Manager			Did not participate in SLIGP activities this Quarter.

**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 Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned
Bob Wilhelm	SLIGP Program Manager	Contractor	Y	Y	10/1/2013	2/1/2018	\$445,000.00		
Nathan Watermeier	State GIS Coordinator/Applications Developer/Lead	Contractor	Y	Y	8/1/2015	2/1/2018	\$53,608.00		
TBD	Three Tribal Outreach Coordinators	Contractor	N	N	2/1/2016	2/1/2018	\$128,000.00		
TBD	Two people for final review of data collection	Contractor	N	N	1/1/2016	10/1/2016	\$56,100.00		
TBD	Conduct field verification and identification of data	Contractor	N	N	1/1/2016	10/1/2016	\$39,000.00		

TBD	Legal assistance for MOU Development for the state and local entities as needed.	Contractor	N	N	11/1/2016	2/1/2018	\$183,600.00	
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**13b. Describe any challenges encountered with vendors and/or sub-recipients. N/A**

**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 Department of Commerce has already approved.

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		\$253,182.00	\$253,182.00		\$74,531.00	\$74,531.00
b. Personnel Fringe Benefits		\$53,450.00	\$53,450.00		\$14,430.00	\$14,430.00
c. Travel	\$485,183.00	\$7,200.00	\$492,383.00	\$55,356.	\$1,899.00	\$57,255.00
d. Equipment			\$0.00			
e. Materials/Supplies	\$2,900.00	\$5,161.00	\$8,061.00	\$679.00	\$443.00	\$1,122.00
f. Subcontracts Total	\$997,508.00		\$997,508.00	\$224,792.00		\$224,792.00
g. Other	\$25,159.00	\$58,695.00	\$83,854.00	\$3,863.00	\$10,171.00	\$14,034.00
h. Indirect			\$0.00			
i. Total Costs	\$1,510,750.00	\$377,688.00	\$1,888,438.00	\$284,690.00	\$101,474.00	\$386,164.00.00
j. % of Total	80%	20%	100%	73%	27%	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 in the award documents.**

<b>16a. Typed or printed name and title of Authorized Certifying Official</b>  Bob Wilhelm SLIGP Program Manager	<b>16c. Telephone (area code, number, and extension)</b> 402.471.7973
	<b>16d. Email Address</b> <a href="mailto:Bob.Wilhelm@Nebraska.gov">Bob.Wilhelm@Nebraska.gov</a>
<b>16b. Signature of Authorized Certifying Official</b> 	<b>16e. Date Report Submitted (month, day, year)</b> 04/21/2016

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