U.S. Department of Commerce Performance Progress Report					2. Award or Grant Number: 4. EIN:	31-10-S13031 47-0491233			
1. Recipient Name	Nebraska Department of Administrative Services/Office of the Chief Information Officer								
3. Street Address	501 South 14th Street, PO Box 95045					9/30/2017			
5. City, State, Zip Code	Lincoln, NE 68509-5045					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 Pla	n							
,	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category						
1	Stakeholders Engaged	16	Actual number of individuals reached via stakeh	older 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 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	0 Actual number of contracts executed during the quarter						
5	Governance Meetings	1 Actual number of governance, subcommittee, or working group meetings held during the quarter							
6	Education and Outreach Materials Distributed	2,070	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						
10	Phase 2 – Capacity Planning	5							
11	Phase 2 – Current Providers/Procurement	4	Stage 4 - Data Submitted to FirstNet Stage 5 - Continued/Iterative Data Collection Stage 6 - Submitted Iterative Data to FirstNet						
12	Phase 2 – State Plan	4							
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.									
Briefed 16 attendees at the Nebraska Public Safety Communications Council meeting about FirstNet. Held a governance meeting of our Working Group on August 11th. It was as this meeting that the Working Group voted to recommend to Governor Ricketts that Nebraska make the decision to Opt-In and accept the plan presented by FirstNet/AT&T. We sent out 9 ListSrv emails this quarter informing our 230 subscribers about information regarding FirstNet. This reached 2,070 subscribers.									
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.									
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. Our contractor we hired to review the State Plan to assess the good, the bad and the ugly within and compare the plan to the wants and desires that was stated by our stakeholders during the data collection phase has done an excellent job in her responses and with the information we subsequently returned to FirstNet and AT&T in the form of comments, concerns, observations and compliments regarding the plan. 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. N/A 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 Point of contact for the FirstNet and SLIGP in Nebraska and engaged in planning activities with the SLIGP Program Manager. Chief Information Officer 6% No Change Involved in planning activities with the SPOC and the SLIGP Program Manager and supervises Program Manager. OCIO IT Administrator 5% No Change State Patrol Major 4% Attended Governance meeting. No Change Did not participate in Assistant Fire Marshal SLIGP activities this quarter. Did not participate in OCIO Public Safety SLIGP activities this Administrative Assistant quarter. Did not participate in OCIO Public Safety System SLIGP activities this Manager quarter. Did not participate in SLIGP activities this OCIO Applications Developer guarter. Did not participate in OCIO Senior Applications SLIGP activities this Developer quarter. Did not participate in OCIO Telecom Manager SLIGP activities this quarter. Did not participate in State Patrol Comms Manager SLIGP activities this Did not participate in State Patrol Infrastructure SLIGP activities this analyst quarter. 13a. Subcontracts Table - Include all subcontractors. The totals from this table must equal the "Subcontracts Total" in Question 14f. Contract Type **Total Federal Funds Total Matching Funds** RFP/RFQ Issued (Y/N) Executed Start Date **End Date** Name **Subcontract Purpose** (Vendor/Subrec.) Allocated Allocated (Y/N) SLIGP PROGRAM MANAGER CONTRACTOR Υ Bob Wilhelm 10/1/2013 2/1/2018 \$475,200.00 N/A STATE GIS COORDINATOR/APPLICATIONS DEVELOPER CONTRACTOR NATHAN WATERMEIER Y Y 5/1/2015 4/1/2017 \$13,394.00 N/A LEAD

Munira Jaffar	Become familiar with Nebraska & data collection process, priorities coverage objectes stated during data collection and prepare to review, evaluate and	CONTRACTOR	Υ	Υ	11/7/2016	10/31/2017	\$180,000.00	N/A
TBD	Final review of Data Collection entities that provide services (public and Private) in State. Review data from entities that provide services in state.	CONTRACTOR	N	N	2/1/2016	2/1/2018	\$30,000.00	N/A
ТВО	CONTRACTUAL EVAL OF CURRENT EMERGENCY RESPONSE PLANS TO INCORPORATE BROADBAND NEEDS INTO THE PLANS	CONTRACTOR	N	N	8/1/2017	12/30/2017	\$28,110.00	N/A
13b. Describe any challenges encountered with vendors and/or subrecipients.								
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		\$118,923.00	\$118,923.00		\$112,768.00	\$112,768.00		
b. Personnel Fringe Benefits			\$24,099.00		\$25:496:66	\$25,490.00		
c. Travel	\$190,712.00	\$16,720.00	\$207,432.00	\$77,537.00	\$5,910.00	\$83,447.00		
d. Equipment			\$0.00			\$0.00		
e. Materials/Supplies	\$2,900.00	\$5,161.00	\$8,061.00	\$721.00	\$661.00	\$1,382.00		
f. Subcontracts Total	\$716,020.00	\$10,684.00	\$726,704.00	\$443,034.00	\$0.00	\$443,034.00		
g. Other	\$27,588.00	\$58,718.00	\$86,306.00	\$7,176.00	\$15,695.00	\$22,871.00		
h. Indirect			\$0.00			\$0.00		
i. Total Costs	\$937,220.00	\$234,305.00	\$1,171,525.00	\$528,468.00	\$160,524.00	\$688,992.00		
j. % of Total 80% 20% 100%				77%	23%	100%		
15. Certification: I certify to the best of my knowledge and b		for performance of activities f	or the purpose(s) set forth i	n the award documents.				
16a. Typed or printed name and title of Authorized Certifyin	16c. Telephone (area							
Bob Wilhelm SLIGP Grant Program Manager	code, number, and extension)	402-471-7973						
16b. Signature of Authorized Certifying Official:					Bob.wilhelm@nebraska.gov			
to wilhelm					10/19/2017			