			lepartment of Commerce ormance Progress Report	Revised 5/4/18	2. Award or Grant Number: 4. EIN:	31-10-S13031 47-0491233					
1. Recipient Name	Nebraska Department of Adn	6. Report Date (MM/DD/YYYY)	4/24/2018								
3. Street Address	501 S. 14th Street PO Box 95	7. Reporting Period End Date: (MM/DD/YYYY) 8. Final Report	3/31/2018 9. Report Frequency								
5. City, State, Zip Code	Lincoln, NE 68509										
10a. Project/Grant Period											
Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018								
11. List the individual projects	in your approved Project Pla	n									
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Ouganity (Number & Description of Milestone Category									
1	Stakeholders Engaged	100	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 t	hird-party broadband conferences using SLIGP gro	ant funds during the quarter						
1 3	Staff Hired (Full-Time Equivalent)(FTE)	O 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	1		working group meetings held during the quarter							
6	Education and Outreach Materials Distributed	acation and Outreach terials Distributed 900 Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any website or social media account supported by SLIG during the quarter									
7	Subrecipient Agreements O Actual number of agreements executed during the quarter Executed										
. 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								
10	Phase 2 – Capacity Planning	5	Stage 2 - Data Collection in Progress Stage 3 - Collection Complete; Analyzing/Aggregating Data								
	Phase 2 – Current	o Stage 4 - Data Submitted to FirstNet									
11	Providers/Procurement	5									
12	Phase 2 – State Plan Decision	6	Stage 6 - Submitted Iterative Data to FirstNet								
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 addit	tional project milestones or i	nformation.									
Stakeholders engaged: Attended and staffed a vendor booth at the State EMS Conference in Kearney and met and spoke with 100 attendees and shared handout material. Education and Outreach Materiels Distributed: In January and February we sent out 4 ListSrv messages with information and articles about FirstNet and Governance meetings to the 225 subscribers of the system.											
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 informa	tion that would be useful to	NTIA as it assesses this pr	oject's progress.						
N/A									
11d. Describe any success stori	es or best practices you have	identified. Please be as s	pecific as possible.						
N/A									
12. Personnel									
12a. If the project is not fully st	affed, describe how any lack	of staffing may impact th	e project's time line a	nd when the project will b	e fully staffed	ı.			
12b. Staffing Table - Please inc		ibuted time to the project.	Please do not remove						
Job Title	FTE%	D-i-4-f			(s) Assigned		id id cucono		Change
Chief Information Officer	6%	AND DESCRIPTION OF THE PARTY OF		and SLIGP in Nebraska and					No Change
OCIO IT Administrator	5%			ties with the SPOC and the		The second secon			No Change
OCIO CONTROLLER/FINANCE	5%	Involv	ved in planning activiti	es with SPOC/SLIGP Prog M	ngr and other	OCIO staff to help	manage grant and activitie	es.	No Change
State Patrol Major	5%		Atte	ended information meeting	with AT&T Re	egional representa	tives.		Re-initiated grant activities this quarter.
									Did not participate in
Assistant Fire Marshal									SLIGP activities this
									quarter.
OCIO Public Safety	The second state of the second								Did not participate in
Administrative Assistant									SLIGP activities this
Administrative Assistant									quarter.
									Did not participate in
OCIO Public Safety System									SLIGP activities this
Manager					***************************************				quarter.
1									Did not participate in
									SLIGP activities this
OCIO Applications Developer									quarter.
									Did not participate in
OCIO Senior Applications									SLIGP activities this
Developer									quarter. Did not participate in
a sve v z									
OCIO Telecom Manager									SLIGP activities this
									quarter.
									Did not participate in SLIGP activities this
State Patrol Comms Manager									
									quarter.
State Patrol Infrastructure									Did not participate in
analyst									SLIGP activities this
13. Subcontracts (Vendors and	/or Subraciniants)								quarter.
13a. Subcontracts Table – Inclu		otals from this table must	equal the "Subcontra	cts Total" in Question 14f					
za. subcontracts rable micia	T	otals from this table must	T Subcontra	Cts Total III Question 141.	Contract	T	i		
Name	Subcontrac	t Purpose	Type (Vendor/Subrec.)	RFP/RFQ Issued (Y/N)	Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
Bob Wilhelm	SLIGP PROGRAM MANAGER		CONTRACTOR	Y	Y	10/1/2013	2/28/2018	\$475,200.00	N/A
NATHAN WATERMEIER	STATE GIS COORDINATOR/APPLICATIONS DEVELOPER LEAD		CONTRACTOR	Y	Υ	5/1/2015	4/1/2017	\$13,394.00	N/A
Munira Jaffar	Become familiar with Nebras process, priorities coverage of data collection and prepare to	objectes stated during	CONTRACTOR	Y	Y	11/7/2016	10/31/2017	\$180,000.00	N/A
	duta concentration prepare to review, evaluate and								

ТВО	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
TBD	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	or 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		\$118,782.00	\$118,782.00		
b. Personnel Fringe Benefits		\$24,099.00	\$24,099.00		\$27,111.00	\$27,111.00		
c. Travel	\$190,712.00	\$16,720.00	\$207,432.00	\$78,825.00	\$5,910.00	\$84,735.00		
d. Equipment			\$0.00			\$0.00		
e. Materials/Supplies	\$2,900.00	\$5,161.00	\$8,061.00	\$790.00	\$661.00	\$1,451.00		
f. Subcontracts Total	\$716,020.00	\$10,684.00	\$726,704.00	\$485,724.00		\$485,724.00		
g. Other	\$27,588.00	\$58,718.00	\$86,306.00	\$7,750.00	\$17,368.00	\$25,118.00		
h. Indirect			\$0.00			\$0.00		
i. Total Costs	\$937,220.00	\$234,305.00	\$1,171,525.00	\$573,089.00	\$169,832.00	\$742,921.00		
j. % of Total	80% 20%		20% 100%		23%	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.								
16a. Typed or printed name and title of Authorized Certifyin	16c. Telephone (area							
Bob Wilhelm SLIGP Program Manager	code, number, and extension)	402-471-7973						
16b. Signature of Authorized Certifying Official;	16d. Email Address:	Bob.Wilhelm@nebraska.gov						
Toble Rheln	Date:	4/5/2018 5/2//10						