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

		2. Award or Grant Number: 4. EIN:	02-10-S13002 926001185					
1. Recipient Name	Alaska Department of Public	Safety			6. Report Date (MM/DD/YYYY)	1/27/2017		
3. Street Address	5700 East Tudor Rd				7. Reporting Period End Date: (MM/DD/YYYY)	12/31/2016		
5. City, State, Zip Code	Anchorage, Alaska 99507				8. Final Report Yes No	9. Report Frequency Quarterly		
10a. Project/Grant Period						Metal I will		
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 Plan							
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description	n of Milestone Category				
1	Stakeholders Engaged	95	Actual number of individuals reached via stakeholder meetings durin	g the quarter				
2	Individuals Sent to Broadband Conferences	0	Actual number of individuals who were sent to third-party broadban	ls 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					
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 website or social media account supported by SLI during the quarter					
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter					
8	Phase 2 - Coverage	6						
9	Phase 2 – Users and Their Operational Areas	6	For each Phase 2 milestone category, please provide the status of th Stage 1 - Process Development	activity during the quarter:				
10	Phase 2 – Capacity Planning	6	Stage 2 - Data Collection in Progress Stage 3 - Collection Complete; Analyzing/Aggregating Data					
11	Phase 2 – Current Providers/Procurement	6	Stage 4 - Data Submitted to FirstNet Stage 5 - Continued/Iterative Data Collection					
12	Phase 2 – State Plan Decision	3	Stage 6 - Submitted Iterative Data to FirstNet					
11a. Describe your progress m	neeting each major activity/m	ilestone approved in the	Baseline Report for this project; any challenges or obstacles encoun	ered and mitigation strategies you l	nave employed; plann	ed major activities for		
the next quarter; and any addi-	tional project milestones or i	nformation.			,			
	ed to the Governors Deputy Ch	nief of Staff and received fa	e Governance during which time the working group finalized the Admir avorably. Also during the reporting period we met with the Alaska Tele ssible customer.	S16.	_			
11b. If the project team anticip Commerce before implementa		to the approved Baseline	Report in the next quarter, describe those below. Note that any sub	tantive changes to the Baseline Rep	ort must be approved	by the Department of		

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

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.

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.

Due to Matt Leveque's departure, the Department of Public Safety has assigned Mr. Leon Morgan to work up to 50% on the project. Leon was previously A aska's SWIC prior to Matt Leveque and is well versed on Interoperable Communications. Leon also represents DPS on the Alaska Land Mobile Radio working group. Leon will start on January 1, 2017.

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			
Deputy Director, Department of Public Safety, Alaska State Troopers	0	Alaska State Point of Contact / Grant Program Manager (Non-Federal in-kind match): The Grant Program Manager will provide oversight for the SLIGP grant, ensuring that all activities are completed on time and within budget. The Grant Program Manager will be the primary point of contact for consultation with FirstNet, and will work to create the State's governance structure through a series of meetings, conferences and facilitation by professional consultants to establish governance structure for the Statewide Interoperable Governing Body (SIGB), and assist in Project Management activities	Individual left position - no replacement as of this time		
Telecommunications Special Projects Administrator, Department of Administration, Division of Enterprise Technology	0	Telecom Special Projects Administrator (TSPA), Department of Administration, Enterprise Technology Services (Non-Federal in-kind match): The TSPA will be the technical lead for all aspects of SLIGP grant activities	Individual left position - no replacement as of this time		
Interoperable Communications Manager, Department of Public Safety State Designated Point of Contact	0	Alaska State Point of Contact / Grant Program Manager: The Grant Program Manager will provide oversight for the SLIGP grant, ensuring that all activities are completed on time and within budget. The Grant Program Manager will be the primary point of contact for consultation with FirstNet, and will work to create the State's governance structure through a series of meetings, conferences and facilitation by professional consultants to establish governance structure for the Statewide Interoperable Governing Body (SIGB), and assist in Project Management activities	As mentioned on last PPR, Matt Leveque resigned on 7/8/2016		
Statewide 9-1-1 Coordinator	25	The Statewide 911 Coordinator will work with the Program Manager and to execute the project plan, assist in outreach and training, and assist with the creation of the Governance Structure.	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 Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
тво	Project Management: Track and manage all aspects of the project	Vendor	N	N	n/a	1/31/2018	\$459,000.00	\$0.00
TBD	Outreach Coordinator: Focusing on Education and Outreach for Public Safety Entities	Vendor	N	N	n/a	1/31/2018	\$137,700.00	\$0.00
тво	Website Development & Maintenance: Create and maintain a website for the purpose of public awareness and education on the PSBN	Vendor	N	N	n/a	1/31/2018	\$402,300.00	\$0.00
ТВО	(Phase II) Data Collection: Gather information about existing infrastructure, potential users, and other information as requested by FirstNet.	Vendor	N	N	n/a	1/31/2018	\$648,000.00	\$0.00

13b. Describe any challenges encountered with vendors and/or subrecipients.

None

roject 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)
Personnel Salaries	\$158,122.00	\$154,334.00	\$312,456.00	\$37,422.27	\$96,146.20	\$133,568.47
Personnel Fringe Benefits	\$0.00	\$84,444.00	\$84,444.00	\$0.00	\$70,519.12	\$70,519.12
Travel	\$178,559.00	\$44,111.00	\$222,670.00	\$36,956.78	\$6,001.33	\$42,958.11
Equipment	\$0.00	\$0.00	\$0.0C	\$0.00	\$0.00	\$0.00
Materials/Supplies	\$17,252.00	\$0.00	\$17,252.00	\$910.39	\$0.00	\$910.39
Subcontracts Total	\$1,647,000.00	\$0.00	\$1,647,000.00	\$0.00	\$0.00	\$0.00
Other	\$4,936.00	\$10,911.00	\$15,847.00	\$0.00	\$0.00	\$0.00
Indirect	\$0.00	\$207,667.00	\$207,667.00	\$0.00	\$9,708.50	\$9,708.50
Total Costs	\$2,005,869.00	\$501,467.00	\$2,507,336.00	\$75,289.44	\$182,375.15	\$257,664.59
% of Total	80%	20%	100%	29%	71%	100%
5. Certification: I certify to the best of my knowledge an	d 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 Certifying Official: John Rockwell, State 911 Coordinator, Acting SPOC					907-269-2037	
16b. Signature of Authorized Certifying Official:					john.rockwell@alaska.gov	