						Expiration Date: U1/31/2			
U.S. Department of Commerce					2. Award or Grant Number:	15-10-S18015			
SLIGP 2.0 Performance Progress Report						99-6000896			
1. Recipient Name	State Department of Defen	se	NIN	6. Report Date (MM/DD/YYYY)	10/11/2019				
	77 - 33 - 349			7. Reporting Period					
3. Street Address	3949 Diamond Head Road			5		09/30/2019			
20000 -7-7000		No. 5-10		(MM/DD/YYYY)					
		•			9. Report Frequency				
5. City, State, Zip Code	Honolulu, Hawaii 96816				Yes 🗆	Quarterly X			
		No 🖸							
10a. Project/Grant Period									
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020						
11. List the individual projects in yo	our approved Project Plan								
		Was this Activity	Project Deliverable						
	Activity Type (Planning,	Performed during the Reporting Quarter?	Quantity (Number	Description of Milestone Category					
	Governance Meetings, etc.)		& Indicator	Description of Milestone Category					
		(Yes/No)	Description)						
Activities/Metrics for All Recipients	during the Reporting Quart	ter							
1	Governance Meetings	No	0	Actual number of governance, subcommittee, or working group meetings related to th	e NPSBN held during	the quarter			
2	Individuals Sent to	No		Actual number of individuals who were sent to national or regional third-party confere	nces with a focus are	a or training track			
	Broadband Conferences	INO	0	related to the NPSBN using SLIGP grant funds during the quarter					
•	Convened Stakeholder Events	No	0	Actual number of quants coordinated or hold using SLIGB grant funds during the guar	tor as requested by E	ircthiat			
3				Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.					
4	Staff Hired (Full-Time	No		Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).					
	Equivalent)(FTE)	NO	0						
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.	THE PLA				
6	Subrecipient Agreements	No		Actual number of agreements executed during the quarter.					
	Executed	110	0	Total Manual of agreements consider and my die quarter					
	Data Sharing								
7	Policies/Agreements	Yes		Yes or No if data sharing policies and/or agreements were developed during this repo	porting quarter.				
	Developed								
200	Further Identification of	No			reporting quarter.				
8	Potential Public Safety			Yes or No if further identification of potential public safety users occurred during this r					
	Users		4						
_	Plans for Emergency	***							
9	Communications	No		Yes or No if plans for future emergecy communications technology transitions occurred	ions occurred during this reporting quarter.				
	Technology Transitions	Ny IN COST MICHINE CO. II	4 /						
40	Identified and Planned to Transition PS Apps &	N/-		Yes or No if public safety applications or databases within the State or territory were i	dentified and transition	on plans were			
10	Databases	No		developed this reporting quarter					
X-10 W	Identify Ongoing Coverage								
11	Gaps	Yes		Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds during this reporting quarter.					
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collection activities as requested by FirstNet or					
Activities for Opt-Out States only in				the second secon		/ 1 11 301 101 01			
13	Stakeholders Engaged	one noportang equation	T	Actual number of individuals reached via stakeholder meetings or events during the qu	inrter.				
	Education and Outreach			The state of the s					
14	Materials Distributed in-			Actual number of materials distributed in-person during this quarter.		THE RESTREET			
	Person			The state of the s					
	Education and Outreach	CONTRACTOR OF THE PARTY OF THE							
15	Materials distributed	RETURNING THE	SIRVE SECTION		mpressions to any website, e-newsletter, social media post, or other account supported by SLIGP during				
	Electronically			the quarter.					

Expiration Date: 01/31/2021

11a. Narrative description for each activity reported in Question 11 for this quarter; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional

11.11 Monitored and reviewed FirstNet coverage data received from Hawaii County Police & Fire Departments

Created interface to display coverage data on digital maps

Reviewed coverage data with Hawaii County Police & Fire Department personnel

Collected and inventoried test equipment for use in next phase of coverage testing (Kauai County)

Reviewed coverage data with AT&T to develop strategy to address coverage gaps

Scheduled presentations to Mayor of Kauai and County Police, Fire and Emergency Management Departments to participate in coverage testing (11-Ocotber 2019)

The SWIC has this action for working with counties, state and federal partners on policies, procedures, etc. We have submitted Legislation for inclusion with Hawaii Revised Standards the Communications Governance Committee.

12. Personnel

12a. Staffing Table - Please include all staff that have contributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individuals from this table.

Job Title FTE%		Project (s) Assigned	Change
WIC	S0%	Implement SLIGP requirements based on initial plan submittal	
			200

12b. Narrative description of any staffing challenges, vacancies, or changes.

There will be not additional staff hired for the SWIC; SWIC is full time supported by state funding; currently attributing approximately 50 percent of ftime toward SLIPG and related topic area.

13. Contractual (Contract and/or Subrecipients)

13a. Contractual Table - Include all contractors. The totals from this table should equal the "Contractual" in Question 14f.

Name	Subcontract Purpose	Type (Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
Project Management Consultant	FN Planning	Contract	Y	Υ	01/30/2019	02/29/2020	\$384,900.00	\$0.00
Program Support	Host Outreach Activities	Contract	N	N			\$39,450.00	
Coverage activities	Coverage activities	Contract	NN	N		· · · · · · · · · · · · · · · · · · ·	\$150,000.00	

13b. Narrative description any challenges, updates, or changes related to contracts and/or subrecipients.

Discussion with FirstNet regarding Core for Hawaii. We continue to wait to hear back from FirstNet staff on oppotions.

Consultant working continues to work with Hawaii County on their coverage and now working with the other counties on their coverage.

dolors.m.cook@hawaii.gov

10/15/2019

16d. Email Address:

Date:

Expiration Date: 01/31/2021 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. Matching Funds **NTE Total Federal Funds NTE Total Matching Federal Funds Obligated** Total Budget to Federal Funds Expended Approved Matching **Total funds Expended** Project Budget Element (1) Approved to NTE Total Budget (4) Funds Approved (3) to Date (5) Approved (2) Date (7) Funds Expended (9) (10) Date (6) \$40,100.00 \$135,100.00 \$175,200.00 \$40,100.00 \$135,100.00 \$175,200.00 \$0.00 a. Personnel Salaries \$37,879.00 \$37,879.00 . Personnel Fringe Benefits \$39,900.00 \$39,900.00 \$0.00 \$39,900.00 \$39,900.00 \$0.00 \$13,870.00 \$13.870.00 . Travel \$85,550.00 \$85,550,00 \$85,550.00 \$85,550.00 \$2,440.00 \$2,440.00 d. Equipment \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 . Materials/Supplies \$0.00 Contractual \$574,350.00 \$574,350.00 \$574,350.00 \$574,350.00 \$110,000.00 \$110,000.00 . Other \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 n. Indirect \$0.00 \$0.00 \$0.00 \$0.00 \$700,000.00 \$175,000.00 \$875,000.00 \$700,000.00 \$175,000.00 \$875,000.00 \$112,440.00 \$51,749.00 \$164,189.00 **Total Costs Proportionality Percent** 80.00% 20.00% 100.00% 80.00% 20.00% 100.00% 68.48% 31.52% 100.00% 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 Certifying Official: 16c. Telephone (area code, number, and 369-3670 Arthur J. Logan, Major General, Direct of Civil Defense, Homeland Security, SAA extension) 16b. Signature of Authorized Certifying Official:

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