U.S. Department of Commerce SLIGP 2.0 Performance Progress Report						2. Award or Grant Number: 4. EIN: 73-1641239			
Recipient Name Illinois Emergency Management Agency					6. Report Date (MM/DD/YYYY)	07/30/2019			
3. Street Address 2200 S Dirksen Parkway					7. Reporting Period End Date: (MM/DD/YYYY)	06/30/2019			
5. City, State, Zip Code	Springfield II. 62703-4528	- 1000 - 11				8. Final Report Yes 🖸 No 🖸	9. Report Frequency Quarterly X		
10a. Project/Grant Period									
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	02/29/2020			la de la compañía de			
11. List the individual projects in yo	our approved Project Plan								
	Activity Type (Planning, Governance Meetings, etc.)	Was this Activity Performed during the Reporting Quarter? (Yes/No)	Project Deliverable Quantity (Number & Indicator Description)		Description of Milestone Ca	itegory			
Activities/Metrics for All Recipients	during the Reporting Quart	ter							
1	Governance Meetings	Yes	6	Actual number of governance	e, subcommittee, or working group meetings re	iated to the NPSBN held during	the quarter		
2	Individuals Sent to Broadband Conferences	No	0		s who were sent to national or regional third-pa SLIGP grant funds during the quarter	rty conferences with a focus ar	ea or training track		
3	Convened Stakeholder Events	No	0	Actual number of events coordinated - or held using SLIGP grant funds during the quarter, as requested by FirstNet.					
4	Staff Hired (Full-Time Equivalent)(FTE)	No	0.00	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).					
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.					
6	Subrecipient Agreements Executed	No	0	Actual number of agreements executed during the quarter.					
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing pol	licles and/or agreements were developed during	this reporting quarter.			
8	Further Identification of Potential Public Safety Users	Yes		Y <mark>e</mark> s or No if further identifica	ation of potential public safety users occurred d	ring this reporting quarter.			
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for future	emergecy communications technology transition	ns occurred during this reportin	g quarter.		
10	Identified and Planned to Transition PS Apps & Databases	Yes		Yes or No if public safety app developed this reporting qui	plications or databases within the State or territ arter	ory were identified and transit	tion plans were		
11	Identify Ongoing Coverage Gaps	Yes			dentifying ongoing coveage gaps using SLIGP fu				
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 following a documented data collection determination by Opt-Out (Post-SMLA) grantees.					
Activities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter					I DE CONTRACTOR		
13	Stakeholders Engaged Education and Outreach				s reached via stakeholder meetings or events du	ring the quarter.			
14	Materials Distributed In- Person			sectors number of materials	distributed in-person during this quarter.		and a state of the		
15	Education and Outreach Materials distributed Electronically			Actual volume of hits or imp the quarter.	ressions to any website, e-newsletter, social me	dia post, or other account supp	orted by SLIGP during		

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 METRIC 1-Governance Meetings Statewide Interoperable Executive Committee (SIEC) APR; monthly discussions with Illinois Department of Innovation and Technology (APR, MAY, JUN); Galvin and Springer attended Leadership Meeting with IL Homeland Security Advisor about FirstNet APR and MAY; Regular engagements with State agency connections regarding expanding SIEC governance body to specifically address Broadband with a focus of strategy development to support the adoption of FN within State agencies and eventually local agencies by leading by example.

METRIC 8-Further

Identification of Public Safety Users- Springer attended IESMA (IL Emergency Services Management Assoc.) Conference Apr 24-25; Galvin attended 5 Agency Regional meetings (05/02, 05/08, 05/15, 05/16, and 05/17) discussing public safety communications including many questions regarding FirstNet adoption and experiences; Galvin met with AT&T regarding user adoption APR, MAY, JUN; Had several discussions about focusing on Schools and providing FirstNet connectivity to ensure security and safety of students. During flood response we were able to see FirstNet in action, recruiting additional users wanting to learn more about FirstNet.

METRIC 10 -Identified and

Planned to Transition PS Apps & Databases - FirstNet Operational & Technical Group Monthly (APR); RECCWG (Regional Emergency Communications Coordination Work Groups) FirstNet Call - Monthly (APR, MAY, JUN); Region V PSBN Monthly Call (APR). In addition to the monthly calls. The team had discussions about narrowing the scope on single application for use in Law enforcement for information sharing and situational awareness. We have also been discussing a <u>possible School ano/hardware to be used to promote safety of students in school. Working on a Revised Broadband plan which will include a more detailed plan details for data base integration and transition.</u> 12. Personnel

Job Title	FTE%	tributed time to the project with current quarter's utilization. Please only include FTE staff employed by the state not contractors. Please do not remove individua Project (s) Assigned	Change
Project Manager-Joe Galvin	80%	Project Manager for National Public Safety Broadband Network (NPSBN) and Statewide Interoperability Coordinator (SWIC) for Illinois	
Grant Manager-Robert Evans	25%	Point of Contact for State Administrative Agency (IEMA) and Liaison with National Telecommunications and Information Administration (NTIA)	
	<u>.</u>		

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

None

13. Contractual (Contract and/or Subrecipients)

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
	80% time for System Technology Manager (Bill Springer), 80% time for Project Support Lead (Lori	Sub-recipient	Ŷ	Y	3/1/2018	2/29/2020	\$334,106.42	\$0.00
TBD						_	\$311,120.86	

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

No other contracts awarded at this time.

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.

Project Budget Element (1)	NTE Total Federal Funds Approved (2)	NTE Total Matching Funds Approved (3)	NTE Total Budget (4)	Federal Funds Obligated to Date (5)	Matching Funds Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Approved Matching Funds Expended (9)	Total funds Expended (10)
. Personnel Salaries	\$247,322.00	\$0.00	\$247,322.00	\$247,322.00	\$0.00	\$247,322.00	\$129,777.10	\$0.00	\$129,777.1
Personnel Fringe Benefits	\$210,598.72	\$0.00	\$210,598.72	\$210,598.72	\$0.00	\$210,598.72	\$103,528.13	\$0.00	\$103,528.1
. Travel	\$16,852.00	\$40,000.00	\$56,852.00	\$16,852.00	\$40,000.00	\$56,852.00	\$0.00	\$30,434.09	\$30,434.0
. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.0
. Materials/Supplies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.0
Contractual	\$645,227.28	\$0.00	\$645,227.28	\$645,227.28	\$0.00	\$645,227.28	\$208,859.57	\$0.00	\$208,859.5
Other	\$0.00	\$109,492.58	\$109,492.58	\$0.00	\$109,492.58	\$109,492.58	\$0.00	\$36,308.67	\$36,308.6
. Indirect	\$0.00	\$130,507.42	\$130,507.42	\$0.00	\$130,507.42	\$130,507.42	\$0.00	\$66,491.99	\$66,491.9
Total Costs	\$1,120,000.00	\$280,000.00	\$1,400,000.00	\$1,120,000.00	\$280,000.00	\$1,400,000.00	\$442,164.80	\$133,234.75	\$575,399.5
Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	76.84%	23.16%	100.00
5. Certification: I certify to the be	st of my knowledge and belle	f that this report is correc	t and complete for pe	erformance of activities for	the purpose(s) se	et forth in the awa	ard documents.		
16a. Typed or printed name and title of Authorized Certifying Official: Alicia Tate-Nadeau, Director-Illinois Emergency Management Agency						16c. Telephone (area code, number, and extension)	217-782-2700		
6b. Signature of Authorized Certin	iying Official:		- 60 ⁻¹				16d. Email Address:	IEMA.Director@illinois.c	~
						Date:	7-28-	[4	

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