	2. Award or Grant Number: 4. EIN:	18-10-S18018 35-6000158							
1. Recipient Name	cipient Name Indiana Integrated Public Safety Commission								
3. Street Address	100 N. Senate Ave., Room N	(MM/DD/YYYY) 7. Reporting Period End Date: (MM/DD/YYYY)	03/31/2018						
5. City, State, Zip Code	, State, Zip Code Indianapolis, IN 46204-2213								
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	your approved Project Plan				(e - ;				
	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 Category					
Activities/Metrics for All Recipien	ts during the Reporting Quart	er							
1	Governance Meetings	Yes	2	Actual number of governance, subcommittee, or working group meetings related to	and the second statement of the se	and the second			
2	Individuals Sent to Broadband Conferences	No		Actual number of individuals who were sent to national or regional third-party confe related to the NPSBN using SLIGP grant funds during the quarter	rences with a focus area	a or training track			
3	Convened Stakeholder Events	No		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)	Yes	1.15	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).					
5	Contracts Executed	No		Actual number of contracts executed during the quarter.					
6	Subrecipient Agreements Executed	No		Actual number of agreements executed during the quarter.	1. A. 1997				
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing policies and/or agreements were developed during this rep	orting quarter.				
8	Further Identification of Potential Public Safety Users	No		Yes or No if further identification of potential public safety users occurred during this	reporting quarter.				
9	Plans for Emergency Communications Technology Transitions	No		Yes or No if plans for future emergecy communications technology transitions occurr	ed during this reporting	quarter.			
10	Identified and Planned to Transition PS Apps & Databases	No		Yes or No if public safety applications or databases within the State or territory were this reporting quarter	e identified and transitio	on plans were developed			
11	Identify Ongoing Coverage Gaps	No		Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds duri	ng this reporting quarter	•			
12	Data Collection Activities	No		(Opt-In and Opt-Out Post-SMLA Phase Only) Yes or No if participated in data collecti	on activities as requeste	d by FirstNet or			
Activities for Opt-Out States only	in the Pre-SMLA Phase during	the Reporting Quarter							
13	Stakeholders Engaged			Actual number of individuals reached via stakeholder meetings or events during the	quarter.				
14	Education and Outreach Materials Distributed In- Person			Actual number of materials distributed in-person during this quarter.					
15	Education and Outreach Materials distributed Electronically			Actual volume of hits or impressions to any website, e-newsletter, social media post, quarter.	or other account suppo	rted by SLIGP during the			

 Governance Meetings – Two g 	ach activity reported in Question 11 for this quarter; a governance meetings were held in this reporting period	 The Statewide Intero 	les encountered and mitiga perability Executive Comm	tion strategies you ittee (SIEC) held a	u have employed; monthly meeting	planned major activitie on March 20th and Inte	s for the next quarter; an grated Public Safety Com	d any additional project mission held a quarterly
meeting on March 20th. FirstNet	t/ broadband updates and activity details were provide	ed at both meetings.					a) 1)	
12. Personnel						3		
	rda all staff that have sometimeted time to the same inte							
Job Title	Ide all staff that have contributed time to the project of FTE%	with current quarter's u			yed by the state i	not contractors. Please c	to not remove individuals	
SPOC, Exec Director	15%		Proj	ect (s) Assigned				Change
SWIC	25%							
Field Coordinator	25%							
Field Coordinator	25%							
Training Coordinator	25%							
	/ staffing challenges, vacancies, or changes.							
NTIA (FirstNet bas informed us t	hat staff hours spent planning for the IoTCivicHack do		11.76 3 -					
1 00 • 00 • 00 • 00 • 00 • 00 • 00 • 00		not quality for our mat	ich (stannig). Even though	manciar impact o	i uns position is n	egligible, indiana plans t	to appeal the decision.	
13. Contractual (Contract and/or	Subrecipients)							
	all contractors. The totals from this table should equa	the "Contractual" in O	uestion 14f					
		Туре	territori de la construcción de la	Contract			Total Federal Funds	Total Matching Funds
Name	Subcontract Purpose	(Contract/Subrec.)	RFP/RFQ Issued (Y/N)	Executed (Y/N)	Start Date	End Date	Allocated	Allocated
							Anotateu	Anocated
13b. Narrative description any ch	allenges, updates, or changes related to contracts and	/or subrecipients.						
				72				

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)
a. Personnel Salaries	\$0.00	\$134,615.00	\$134,615.00	\$0.00	\$48,077.00	\$48,077.00	\$0.00	\$4,604.58	\$4,604.5
b. Personnel Fringe Benefits	\$0.00	\$40,385.00	\$40,385.00	\$0.00	\$14,423.00	\$14,423.00			the second s
c. Travel	\$85,050.00	\$0.00	\$85,050.00	\$30,375.00	\$0.00	\$30,375.00			and the second se
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
e. Materials/Supplies	\$16,878.00	\$0.00	\$16,878.00	\$6,028.00	\$0.00	\$6,028.00			The second s
f. Contractual	\$574,872.00	\$0.00	\$574,872.00	\$205,311.00	\$0.00	\$205,311.00		the second se	
g. Other	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
h. Indirect	\$23,200.00	\$0.00	\$23,200.00	\$8,286.00	\$0.00	\$8,286.00	\$0.00	\$0.00	
. Total Costs	\$700,000.00	\$175,000.00	\$875,000.00	\$250,000.00	\$62,500.00	\$312,500.00	\$0.00	the second se	\$5,893.8
. Proportionality Percent	80.00%	20.00%			20.00%			100.00%	100.00%
15. Certification: I certify to the be	st of my knowledge and belief	that this report is correct	and complete for pe	rformance of activities for	the purpose(s) set	forth in the awar	d documents.		
16a. Typed or printed name and title of Authorized Certifying Official: David W. Vice, Executive Director of Integrated Public Safety Commission and FirstNet SPOC					16c. Telephone (area code, number, and extension)	317-232-8993			
16b. Signature of Authorized Certif	ying Official:							dvice@ipsc.in.gov	
Vice							Date:	04/30/2018	

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