U.S. Department of Commerce SLIGP 2.0 Performance Progress Report						2. Award or Grant Number: 4. EIN:	47-10-S18047		
					6 Report Date				
1. Recipient Name	Tennessee Department of Safety and Homeland Security					(MM/DD/YYYY)	07/29/2020		
3. Street Address	1150 Foster Ave.					7. Reporting Period End Date: (MM/DD/YYYY)	06/30/2020		
5. City, State, Zip Code	Nashville, TN 37210-4428					8. Final Report Yes 🗆 No 🗹	9. Report Frequency Quarterly X		
10a. Project/Grant Period				- C 1.	THE REAL PROPERTY AND A RE	AND A CONTRACTOR	State With the state		
Start Date: (MM/DD/YYYY)	03/01/2018	10b. End Date: (MM/DD/YYYY)	03/31/2021	1000		Star Star			
11. List the individual projects in yo	ur 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 Catego	ory			
Activities/Metrics for All Recipients	during the Reporting Quart	er		A REAL PROPERTY AND A REAL	A Street and the second	Charles and the state	The second start		
1	Governance Meetings	No	0	Actual number of governance, subc	ommittee, or working group meetings related	to the NPSBN held during t	the quarter		
2	Individuals Sent to Broadband Conferences	No	0	Actual number of individuals who w related to the NPSBN using SLIGP gu	vere sent to national or regional third-party co rant funds during the quarter	onferences with a focus area	a 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 policies ar	nd/or agreements were developed during this	reporting quarter.			
8	Further Identification of Potential Public Safety Users	Yes		Yes or No if further identification of	f potential public safety users occurred during	this reporting quarter.			
9	Plans for Emergency Communications Technology Transitions	Yes		Yes or No if plans for future emerge	ecy communications technology transitions oc	curred during this reporting	quarter.		
10	Identified and Planned to Transition PS Apps & Databases	Yes		Yes or No if public safety applications or databases within the State or territory were identified and transition plans were develope this reporting quarter					
11	Identify Ongoing Coverage 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 Pho	ase Only) Yes or No if participated in data coll	ection activities as requeste	ed by FirstNet or		
Activities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter	and the second second	The second s			C. S. CALLER		
13	Stakeholders Engaged	Contraction of the little		Actual number of individuals reach	ed via stakeholder meetings or events during	the quarter.			
14	Education and Outreach Materials Distributed In- Person			Actual number of materials distribu	ited in-person during this quarter.				
15	Education and Outreach Materials distributed Electronically		Cash Con	Actual valume of hits or impression quarter.	is to any website, e-newsletter, social media p	iost, or other account suppo	irted by SLIGP during the		

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 project Due to the Covid 19 pandemic, he TACN Advisory Panel did not hold it's quarterly meeting. Development of the electronic eCOMMFOG continues in coordination with Cybersecurity and Infrastructure Security Agency (CISA). Identified as potential users, The Tennessee Department of Health Emergency Response TEAM, is working tirelessly through the pandemic to ensure the health and safety of the citizens of Tennessee. Future transition of THP road troopers will take place this summer. The Tennessee Emergency Management Agency is also transitioning from commercial cellular to FirstNet due to the connectivity provided during disasters. In addition, planning on how to deploy and use FirstNet capable devices to local agencies during emergency situations, from a cache has begun. LMR -> LTE proves to be a driving factor in adoption sparking interest in rural agencies that would like to join the TACN system but are lacking in resourses to do so. Using data through Sierra Wireless Airlink Mobility Manager (AMM), the production of a FirstNet coverage data base has begun and a preliminary coverage report is in development.

12. Personnel

Job Title	FTE%	Project (s) Assigned	Change	
Director, Wireless Communications	20%	Single Point of Contact (SPOC) for the State of TN and provides oversight over the broadband program in TN, Outreach and Education, External and Internal Stakeholder Relationships	No Change	
Peputy Director, Wireless Communications	20%	Outreach and Education, External and Internal Stakeholder Relationships	No Change	
Outreach and Education oordinator	20%	Outreach and Education, External and Internal Stakeholder Relationships, Program Management, Administrative Functions, Scheduling	No Change	

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

Amy Singley was out on FMLA from April 11 - July 1.

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 Fund Allocated
Buford Goff and Associates	Outreach and Education, Governance Consultation	Contract	Y	Y	07/01/2018	02/29/2020	\$596,000.00	

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

Currently signed with Buford Goff and Associates, Inc.

14. Bu	dget	Worksheet
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Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file.

. Personnel Salaries		Funds Approved (3)	NTE Total Budget (4)	Federal Funds Obligated to Date (5)	Approved to Date (6)	Total Budget to Date (7)	Federal Funds Expended (8)	Approved Matching Funds Expended (9)	Total funds Expended (10)
, Personnei Salaries		\$79,520.00	\$79,520.00		\$79,520.00	\$79,520.00		\$90,261.55	\$90,261.5
Personnel Fringe Benefits		\$34,100.00	\$34,100.00		\$34,100.00	\$34,100.00		\$33,994.68	\$33,994.6
. Travel	\$104,000.00		\$104,000.00	\$104,000.00		\$104,000.00	\$41,078.61		\$41,078.61
. Equipment			\$0.00			\$0.00			\$0.0
. Materials/Supplies			\$0.00			\$0.00			\$0.00
Contractual	\$596,000.00		\$596,000.00	\$596,000.00		\$596,000.00	\$257,536.01		\$257,536.01
Other		\$61,380.00	\$61,380.00		\$61,380.00	\$61,380.00		\$10,424.18	\$10,424.18
. Indirect			\$0.00			\$0.00			\$0.00
Total Costs	\$700,000.00	\$175,000.00	\$875,000.00	\$700,000.00	\$175,000.00	\$875,000.00	\$298,614.62	\$134,680.41	\$433,295.03
Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	68.92%	31.08%	100.009
5. Certification: I certify to the best	of my knowledge and belief	that this report is correct	t and complete for pe	rformance of activities for	the purpose(s) set	forth in the awar	d documents.		
6a. Typed or printed name and title	e of Authorized Certifying Off	ficial:					16c. Telephone (area code, number, and extension)	615-4	83-0396
6b. Signature of Authorized Certify	ing Official				51	4/2020		amy.singley@tn.gov 07/29/2020	

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