U.S. Department of Commerce SLIGP 2.0 Performance Progress Report							78-10-S18078	
							9-0101838	
1. Recipient Name	United States Virgin Islands- Office of the Governor - Bureau of Information Technology						04/18/2018	
3. Street Address	8000 Nisky Shopping Center, Suite 600 A						03/31/2018	
5. City, State, Zip Code	Charlotte Amalie, VI 00802						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					
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 Category			
<b>Activities/Metrics for All Recipients</b>	during the Reporting Quarte	er						
1	Governance Meetings	No		Actual number of governa	nce, subcommittee, or working group meetings related to th	e NPSBN held during ti	he quarter	
2	Individuals Sent to Broadband Conferences	Yes	2	-	als who were sent to national or regional third-party confere g SLIGP grant funds during the quarter	ences with a focus area	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	1.00	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.				
7	Data Sharing Policies/Agreements Developed	No		Yes or No if data sharing p	policies and/or agreements were developed during this repo	ting 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 occurred 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 identified and transition plans were developed this reporting quarter				
11	Identify Ongoing Coverage Gaps	No		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	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 individu	als reached via stakeholder meetings or events during the qu	ıarter.		
14	Education and Outreach Materials Distributed In- Person			Actual number of material	ls 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, or other account supported by SLIGP during the quarter.				

OMB Control No. 0660-0042 Expiration Date: 01/31/2021

Milestone Activities: - Khanisa Figaro, FirstNetVI Program	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								
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<b>3 3 3 3</b>	n ivianager and David Parr	is, kadio Frequecy Manager	/ Statewide Interoper	ability Coordinator (SWIC)	attended the TWC	.E conterence in O	riando Florida from March	1 5th to the 9th.	
Other activities:									
- Provided content to Crucian Point	for FirstNetVI web develo	pment							
Planned Major activities for next qu									
<ul> <li>FirstNetVI and AT&amp;T Kick-off mee</li> <li>Launch new FirstNetVI website</li> </ul>	ting								
- Lauren new Firstivetvi Website									
12. Personnel									
12a. Staffing Table - Please include	all staff that have contrib	outed time to the project wit	h current quarter's ut	ilization. Please only includ	le FTE staff emplo	yed by the state n	ot contractors. Please do r	not remove individuals	from this table.
Job Title	FTE%			Proj	ect (s) Assigned				Change
Program Manager	100%	Program Management of	SLIGP Grant						New
				·			· · · · · · · · · · · · · · · · · · ·		
12b. Narrative description of any st		1.							
The team plans to add a Program of		•	end 100% of their tim	e fulfilling SLIGP 2.0 object	ives.				
13. Contractual (Contract and/or Su	ubrecipients)								
13. Contractual (Contract and/or Su 13a. Contractual Table – Include all		om this table should equal ti	he "Contractual" in Qu	uestion 14f.					
	contractors. The totals fro	om this table should equal to	he "Contractual" in Qu Type (Contract/Subrec.)	uestion 14f. RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
13a. Contractual Table – Include all	contractors. The totals fro	•	Туре			Start Date	End Date		
13a. Contractual Table – Include all	contractors. The totals fro	•	Туре			Start Date	End Date		
13a. Contractual Table – Include all	contractors. The totals fro	•	Туре			Start Date	End Date		
13a. Contractual Table – Include all Name	contractors. The totals from Subcontractors	ract Purpose	Type (Contract/Subrec.)			Start Date	End Date		
13a. Contractual Table – Include all Name  13b. Narrative description any chal	contractors. The totals from Subcontractors	ract Purpose	Type (Contract/Subrec.)			Start Date	End Date		
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14. Budget Worksheet									
Columns 2, 3 and 4 must match yo	ur current project budget for t	the entire award, which is	the SF-424A on file.						
Only list matching funds that the D	epartment of Commerce has	already approved.							
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	\$240,000.00		\$240,000.00	\$90,000.00		\$90,000.00	\$2,500.00		\$2,500.00
b. Personnel Fringe Benefits	\$108,000.00		\$108,000.00	\$40,500.00		\$40,500.00	\$703.75		\$703.75
c. Travel	\$33,040.00		\$33,040.00	\$9,390.00		\$9,390.00	\$6,447.26		\$6,447.26
d. Equipment	\$0.00		\$0.00			\$0.00			\$0.00
e. Materials/Supplies	\$18,560.00		\$18,560.00	\$4,192.00		\$4,192.00			\$0.00
f. Contractual	\$140,000.00		\$140,000.00	\$52,017.00		\$52,017.00			\$0.00
g. Other	\$10,400.00		\$10,400.00	\$3,901.00		\$3,901.00			\$0.00
h. Indirect	\$0.00		\$0.00			\$0.00			\$0.00
i. Total Costs	\$550,000.00	\$0.00	\$550,000.00	\$200,000.00	\$0.00	\$200,000.00	\$9,651.01	\$0.00	\$9,651.01
j. Proportionality Percent	100.00%	0.00%	100.00%	100.00%	0.00%	100.00%	100.00%	0.00%	100.00%
15. Certification: I certify to the be	st of my knowledge and belie	f that this report is correc	t and complete for pe	rformance of activities for	the purpose(s) set	t forth in the awar	d documents.		
16a. Typed or printed name and tit	tle of Authorized Certifying Of	fficial:					16c. Telephone (area		
Angelo Riddick, PMP					code, number, and 340-713-0354 Ext. 5510		354 Ext. 5510		
Director/Chief Information Officer							extension)		
16b. Signature of Authorized Certifying Official:						angelo.riddick@bit.vi.gov			
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