U.S. Department of Commerce				erce	2. Award or Grant Number: 78-10-S18078					
		SLIGP 2.0	Performance Progres	s Report		Number: 4. EIN:	0.0404030			
1. Recipient Name United States Virgin Islands- Office of the Governor - Bureau of Information Technology 6. Report Date (MM/DD/YYYY) 7. Reporting Period End Date: (MM/DD/YYYY) 8. Final Report Yes Quarterly 10a. Project/Grant Period Start Date: (MM/DD/YYYY) 93/01/2018 10b. End Date: (MM/DD/YYYY) 102/29/2020						9-0101838				
1. Recipient Name	United States Virgin Islands	- Office of the Governor -	Bureau of Information	Technology		•	07/25/2018			
Activities/Metrics for All Recipients during the Reporting Quarter 1 Governance Meetings, etc.) 2 Individuals Sent to Broadband Conferences 3 Convened Stakeholder Equivalent) (FTE) 5 Contracts Executed 4 Staff Hired (Full-Time Equivalent) (FTE) 5 Contracts Executed Communications Further Identification of Potential Public Safety Users Plans for Emergency Plans on Activity Activity Pesides of Public Safety Users Plans for Emergency Communications Technology Transitions				· · · · · ·						
3. Street Address 8000 Nisky Shopping Center, Suite 600 A 5. City, State, Zip Code Charlotte Amalie, VI 00802 10a. Project/Grant Period Start Date: (MM/DD/YYYY) 11. List the individual projects in your approved Project Plan Activity Type (Planning, Governance Meetings, etc.) Activities/Metrics for All Recipients during the Reporting Quarter 1 Governance Meetings 1 Individuals Sent to Broadband Conferences 3 Convened Stakeholder Events 4 Staff Hired (Full-Time Equivalent)(FTE) 5 Contracts Executed 6 Subrecipient Agreements Executed 7 Policies/Agreements Developed Further Identification of Potential Public Safety Users Plans for Emergency Communications Technology Transitions Identified and Planned to Transition PS Apps & Databases Identify Ongoing Coverage Gaps	r, Suite 600 A					06/30/2018				
		SLIGP 2.0 Performance Progress Report and States Virgin Islands- Office of the Governor - Bureau of Information Technology Nisky Shopping Center, Suite 600 A lotte Amalie, VI 00802 1/2018			(MM/DD/YYYY)					
						8. Final Report	9. Report Frequency			
5. City, State, Zip Code	Charlotte Amalie, VI 00802					Yes □	Quarterly X			
10a. Project/Grant Period	•									
Start Date: (MM/DD/YYYY)	03/01/2018		02/29/2020							
11. List the individual projects in ye	our approved Project Plan	<u>, , , , , , , , , , , , , , , , , , , </u>								
	A sticitus Tomas (Diameters	Was this Activity	Project Deliverable							
		Performed during the	Quantity (Number		Description of Milestone Category					
	— ·	•			Description of whiestone category					
			Description)							
		ī								
1		No			ince, subcommittee, or working group meetings related to the					
2		No			uals who were sent to national or regional third-party conferences with a focus area or training track					
				related to the NPSBN usin	g SLIGP grant funds during the quarter					
3		No		Actual number of events o	oordinated - or held using SLIGP grant funds during the qua	rter, as requested by FirstNet.				
4		No		Actual number of state pe	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	No		Actual number of agreements executed during the quarter.						
, , , , , , , , , , , , , , , , , , ,		140		rectual number of agreem	end excedica during the quarter.					
_	_									
7		No		Yes or No if data sharing p	policies and/or agreements were developed during this repo	porting quarter.				
	•									
		Voc		Vac or No if further identif	fication of potential public safety users occurred during this	s raporting quarter				
•		163		res or No ij juriner identij	,					
9		No		Yes or No if plans for futu	es or No if plans for future emergecy communications technology transitions occurred during this reporting quarter.					
	Technology Transitions			,, , ,	<i>5</i> ,		•			
	Identified and Planned to			Vac as No if mublic andatus	numlications on databases within the Chate on tornitons were	idoutified and turnelt				
10	Transition PS Apps &	Yes			applications or databases within the State or territory were	e identified and transition plans were				
				developed this reporting t	quui tei					
11		Yes		Yes or No if participated in	er.					
	'			Yes or No if participated in identifying ongoing coveage gaps using SLIGP funds during this reporting quarter.						
				(Opt-In and Opt-Out Post-	SMLA Phase Only) Yes or No if participated in data collection	n activities as requeste	ed by FirstNet or			
		the Reporting Quarter								
13				Actual number of individu	als reached via stakeholder meetings or events during the q	uarter.				
14				Actual number of materials distributed in-person during this quarter.						
14				Actual number of materia	is distributed in-person during this quarter.					
							a focus area or training track uested by FirstNet. (may be a decimal). er. uarter. is reporting quarter. ind transition plans were ting quarter. as requested by FirstNet or			
15				-	npressions to any website, e-newsletter, social media post, o					
	Electronically			the quarter.						

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11a. Narrative description for each	activity reported in Questio	on 11 for this quarter; any	challenges or obstac	les encountered and mitig	ation strategies y	ou have employe	d; planned major activitie	es for the next quarter;	and any additional
Milestone Activities:									
-Hosted FirstNetVI and AT&T kick-of	-				•			rritory of which we agre	e with the proposed
locations; however, there remains to			, ,		, ,	•	ne.		
-Led FirstNet Contracting discussion			•		•				
 -FirstNet Authority site-visit with The -Launched new FirstNetVI website. https://doi.org/10.1001/j.j.j.j.j.j.j.j.j.j.j.j.j.j.j.j.j.j.j.		airs and Charles Wurph, re	gional lead. Held disc	cussions around nurricane	recovery, lessons	iearned, and cove	erage gaps.		
-caunched new Firstivetvi website. r -Completed all SLIGP1.0 closeout rec	• • •		F 2010						
-completed all SLIGP1.0 closeout red -Received approval for SLIGP 2.0 pre	•		5, 2018.						
-Received approval for SLIGP 2.0 pre	-awaru expenses incureu p	illor to March 1, 2016.							
Other activities:									
-Worked with BIT, Government hous	se and Primary nublic safet	ty stakeholders to improv	e DSAD tools softwar	a and vision					
-worked to Identify additional poten	• • •	ty stakenolucis to improv	e i sai toois, soitwai	e and vision.					
-Document ongoing covereage need									
botament ongoing cover eage need	s una racitiny gaps.								
Planned Major activities for next qua	arter:								
- FirstNet Conference aimed at educ		irstNet solution. Network	buildout plans, and h	now to subscribe to the ne	twork.				
- Attend APCO conference in Las Veg	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,						
	,,								
12. Personnel									
12a. Staffing Table - Please include of	all staff that have contribut	ted time to the project wit	h current quarter's ut	tilization. Please only inclu	de FTE staff emplo	yed by the state	not contractors. Please d	o not remove individual	s from this table.
Job Title	FTE%		•		ect (s) Assigned				Change
Program Manager	100%	Program Management of	SLIGP Grant	<u> </u>	.,				New
		- U							
12b. Narrative description of any sta	ffing challenges, vacancies	or changes.							
The team plans to add a Program co	0 0 .		end 100% of their tim	ne fulfilling SLIGP 2.0 objec	tives.				
The team plans to dud a riogram co	oramator position to the Bi	and the employee win sp	icha 100% or their thi	ne running seror 2.0 objec	.c.vcs.				
42. 6									
13. Contractual (Contract and/or Sul									
13a. Contractual Table – Include all d	contractors. The totals from	n this table should equal t		luestion 14f.	Cambrack			Total Federal Funds	Total Matchine Funda
Name	Subcontrac	t Purpose	Type	RFP/RFQ Issued (Y/N)	Contract	Start Date	End Date		Total Matching Funds
			(Contract/Subrec.)		Executed (Y/N)			Allocated	Allocated
42h Namatina dan datah							1		
13b. Narrative description any challe	enges, updates, or changes	related to contracts and/	or suprecipients.						

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N/A	

14. Budget Worksheet									
Columns 2, 3 and 4 must match yo			is the SF-424A on file.		_	_	<u> </u>		
Only list matching funds that the D	epartment of Commerce has	already approved.	1	•	1	•	•	1	
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	\$17,500.00		\$17,500.0
b. Personnel Fringe Benefits	\$108,000.00		\$108,000.00	\$40,500.00		\$40,500.00	\$7,666.51		\$7,666.5
c. Travel	\$33,040.00		\$33,040.00	\$9,390.00		\$9,390.00	\$6,900.80		\$6,900.8
d. Equipment	\$0.00		\$0.00			\$0.00			\$0.0
e. Materials/Supplies	\$18,560.00		\$18,560.00	\$4,192.00		\$4,192.00			\$0.0
f. Contractual	\$140,000.00		\$140,000.00	\$52,017.00		\$52,017.00			\$0.0
g. Other	\$10,400.00		\$10,400.00	\$3,901.00		\$3,901.00			\$0.0
h. Indirect	\$0.00		\$0.00			\$0.00			\$0.0
i. Total Costs	\$550,000.00	\$0.00	\$550,000.00	\$200,000.00	\$0.00	\$200,000.00	\$32,067.31	\$0.00	\$32,067.3
j. Proportionality Percent	100.00%	0.00%	100.00%	100.00%	0.00%	100.00%	100.00%	0.00%	100.009
15. Certification: I certify to the be	st of my knowledge and belie	f that this report is corre	ct and complete for p	erformance of activities fo	r the purpose(s) s	et forth in the aw	ard documents.		
16a. Typed or printed name and tit	tle of Authorized Certifying O	fficial:					16c. Telephone (area		
Angelo Riddick, PMP					code, number, and	340-713-0354 Ext. 5510			
Director/Chief Information Officer							extension)		
16b. Signature of Authorized Certifying Official:				16d. Email Address:	angelo.riddick@bit.vi.gov				
Jank Kilditt					Date:	7/25/2018			

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