						2. Award or Grant			
U.S. Department of Commerce SLIGP 2.0 Performance Progress Report							51-10-S18051		
	4. EIN:	54-6002286							
1. Recipient Name Virginia Department of Emergency Management							04/26/2019		
1. Recipient Name	riigiila Beparament or Eme	.geney management	(MM/DD/YYYY) 7. Reporting Period	04/20/2015					
	10501 Trade Ct.						00/04/0040		
3. Street Address							03/31/2019		
						(MM/DD/YYYY) 8. Final Report	9. Report Frequency		
5. City, State, Zip Code	Richmond, VA, 23236						. — .		
3. City, State, Zip Code	Richinona, VA, 23230			Yes □ No ☑	Quarterly X				
10a. Project/Grant Period	<u>l</u>					NO M			
•	1	10b. End Date:	I						
Start Date: (MM/DD/YYYY)	03/01/2018	(MM/DD/YYYY)	02/29/2020						
11. List the individual projects in yo	our approved Project Plan								
	Activity Type (Planning,	Was this Activity	Project Deliverable						
	Governance Meetings,	Performed during the	Quantity (Number &		Description of Milestone Cate	gory			
	etc.)	Reporting Quarter?	Indicator						
Astinities/Adatuies for All Desiries	during the Reporting Overt	(Yes/No)	Description)						
Activities/Metrics for All Recipients 1	Governance Meetings	No No	0	Actual number of governa	nce, subcommittee, or working group meetings relate	d to the NPSRN held during th	ne quarter		
	Individuals Sent to	NO	0				•		
2	Broadband Conferences	No	0	Actual number of individuals who were sent to national or regional third-party conferences with a focus area or training track related to the NPSBN using SLIGP grant funds during the quarter					
_	Convened Stakeholder						-181-1		
3	Events	No	0	Actual number of events c	oordinated or held using SLIGP grant funds during the	e quarter, as requestea by Fir.	ter, as requested by FirstNet.		
4	Staff Hired (Full-Time	No		Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal).					
	Equivalent)(FTE)	NO	0.00	Metaur number of state personner ries who began supporting stick activities during the quarter (may be a decimal).					
5	Contracts Executed	No	0	Actual number of contracts executed during the quarter.					
6	Subrecipient Agreements	No	0	Actual number of agreements executed during the quarter.					
	Executed Data Sharing		Ü	• •					
7	Policies/Agreements	No		Yes or No if data sharina r	s or No if data sharing policies and/or agreements were developed during this reporting quarter.				
	Developed			, ,,					
	Further Identification of								
8	Potential Public Safety	Yes		Yes or No if further identif	cation of potential public safety users occurred during	this reporting quarter.			
	Users								
	Plans for Emergency								
9	Communications	Yes		Yes or No if plans for future emergecy communications technology transitions occurred during this reporting quarter.					
	Technology Transitions Identified and Planned to								
10	Transition PS Apps &	No		Yes or No if public safety o	pplications or databases within the State or territory	were identified and transition	plans were developed		
10	Databases	INO		this reporting quarter					
	Identify Ongoing Coverage								
11	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-	MLA Phase Only) Yes or No if participated in data col	lection activities as requested	by FirstNet or		
Activities for Opt-Out States only in	the Pre-SMLA Phase during	the Reporting Quarter							
13	Stakeholders Engaged			Actual number of individue	als reached via stakeholder meetings or events during	the quarter.			
	Education and Outreach								
14	Materials Distributed In-			Actual number of materials distributed in-person during this quarter.					
	Person								
	Education and Outreach Actual volume of hits or impressions to any website, e-newsletter, social media post, or other account supported by SL						ed by SLIGP during the		
15	Materials distributed			quarter.					
	Electronically								

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

11a. Narrative description for each During the quarter, the Interoperab									
Affairs) to the Governor's Broadban Diplomatic Security Service Training Communications Exercise featuring Mission Critical Data and Video Wo	nnd one Office of Emerger d Coalition Director for d Academy. Assisted in c AT&T provided COLT. En	cially designated as the SPOC ncy Services Board meeting – liscussions of mutual interest oordination of FirstNet AT&T gaged contracted support fo	C. Conducted bi-weekl addressed FirstNet qu and effort. Participat connectivity for the V r potential developme	y FirstNet coordination cal uestions and issues, include ed in FirstNet AT&T presen A Emergency Operations C nt of data application poli	Is that included AT d a presentation f tation to Virginia S enter. Participated	T&T Regional repre rom AT&T. Introdu State Police and Sta d in FirstNet Missio	sentatives. Attended the uced AT&T representat ate Agency Public Safet on Critical Data and Vid	hree Regional Preparedne ives (Regional FirstNet Di ty stakeholders. Introduc eo workshop. Participate	ss Advisory Committee- rector and Legislative ed FirstNet to future d in Region 7
12. Personnel									
12a. Staffing Table - Please include	all staff that have contril	buted time to the project wit	h current quarter's uti	lization. Please only includ	e FTE staff employ	ed by the state no	t contractors. Please do	not remove individuals	from this table.
Job Title	FTE%		·		ect (s) Assigned	·			Change
Interoperability Program Manager	50%	Project Coordination, dail	y operations, project	reporting					Filled
Grant Manager	25%	Project Coordination, gra	nts management, proje	ect and financial reporting					Filled
				<u> </u>					
1									
13. Contractual (Contract and/or Su	brecipients)								
13. Contractual (Contract and/or Su 13a. Contractual Table – Include all		om this table should equal tl	ne "Contractual" in Qu	uestion 14f.					
13a. Contractual Table – Include all Name	contractors. The totals fr Subcont	tract 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
13a. Contractual Table – Include all Name Unknown	Contractors. The totals from Subcont Program Outreach Coord	ract Purpose	Type (Contract/Subrec.) Contract	RFP/RFQ Issued (Y/N)		Start Date	End Date	Allocated \$62,400.00	_
13a. Contractual Table – Include all Name Unknown Unknown	contractors. The totals fr Subcont Program Outreach Coord Program Admin Support	dinator Tech	Type (Contract/Subrec.) Contract Contract	RFP/RFQ Issued (Y/N) N N		Start Date	End Date	\$62,400.00 \$24,960.00	_
13a. Contractual Table – Include all Name Unknown Unknown VA APCO	contractors. The totals fr Subcont Program Outreach Coord Program Admin Support Virginia Interoperability	dinator Tech Conference Support	Type (Contract/Subrec.) Contract Contract Subcontract	RFP/RFQ Issued (Y/N) N N N		Start Date	End Date	\$62,400.00 \$24,960.00 \$15,000.00	_
13a. Contractual Table – Include all Name Unknown Unknown	contractors. The totals fr Subcont Program Outreach Coord Program Admin Support Virginia Interoperability Program Technical Support	dinator Tech Conference Support	Type (Contract/Subrec.) Contract Contract Subcontract Subcontract	RFP/RFQ Issued (Y/N) N N		Start Date	End Date	\$62,400.00 \$24,960.00	_

04/26/2019

Date:

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.										
Only list matching funds that the Department 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	\$343,490.00	\$0.00	\$343,490.00	\$343,490.00	\$0.00	\$343,490.00	\$66,612.34	\$0.00	\$66,612.34	
b. Personnel Fringe Benefits	\$116,787.00	\$0.00	\$116,787.00	\$116,787.00	\$0.00	\$116,787.00	\$18,243.27	\$0.00	\$18,243.27	
c. Travel	\$54,560.00	\$0.00	\$54,560.00	\$54,560.00	\$0.00	\$54,560.00	\$977.82	\$0.00	\$977.82	
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
e. Materials/Supplies	\$11,400.00	\$0.00	\$11,400.00	\$11,400.00	\$0.00	\$11,400.00	\$15,060.14	\$0.00	\$15,060.14	
f. Contractual	\$427,960.00	\$0.00	\$427,960.00	\$427,960.00	\$0.00	\$427,960.00	\$0.00	\$0.00	\$0.00	
g. Other	\$0.00	\$238,550.00	\$238,550.00	\$0.00	\$238,550.00	\$238,550.00	\$0.00	\$14,337.29	\$14,337.29	
h. Indirect	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	
i. Total Costs	\$954,197.00	\$238,550.00	\$1,192,747.00	\$954,197.00	\$238,550.00	\$1,192,747.00	\$100,893.57	\$14,337.29	\$115,230.86	
j. Proportionality Percent	80.00%	20.00%	100.00%	80.00%	20.00%	100.00%	87.56%	12.44%	100.00%	
15. Certification: I certify to the bes	15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose(s) set forth in the award documents.									
16a. Typed or printed name and title of Authorized Certifying Official: Cheryl Lee						16c. Telephone (area code, number, and extension)	804-897-9760			
16b. Signature of Authorized Certifying Official:						16d. Email Address:	cheryl.lee@vdem.virginia.gov			

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