

<b>U.S. DEPARTMENT OF COMMERCE</b>  <b>Performance Progress Report</b>				<b>2. Award or Grant Number</b> 21-50-M09061	
				<b>4. Report Date (MM/DD/YYYY)</b> 01-23-2015	
<b>1. Recipient Name</b> Commonwealth of Kentucky				<b>6. Reporting Period End Date:</b> 12-31-2014	
<b>3. Street Address</b> 700 Capitol Avenue,					
<b>5. City, State, Zip Code</b> Frankfort, KY 40601-3410					
<b>7a. Project / Grant Period Start Date: (MM/DD/YYYY)</b> 01-01-2010	<b>7b. End Date: (MM/DD/YYYY)</b> 01-31-2015	<b>8. Designated Entity on Behalf of:</b>  N/A			
<b>9. List the individual projects in your approved project plan</b>					
	<b>Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)</b>	<b>Project Name (if different from Project Type)</b>	<b>Total Federal Funding Amount</b>	<b>Total Federal Funding Amount expended at the end of this reporting period</b>	<b>Percent of Total Federal Funding amount expended</b>
1	Data Collection	N/A	3,402,717	3,302,557	97%
2	Technical Assistance	N/A	1,900,000	1,813,608	95%
3	N/A				
4	N/A				
5	N/A				
6	N/A				
			\$5,302,717	\$5,116,165	96%
<b>10. Personnel</b>  <b>10a. If the project is not fully staffed, describe how any lack of staffing may impact the project's timeline and when the project will be fully staffed.</b>  N/A					

10b. Staffing Table									
Job Title				FTE %		Project(s) Assigned		Change	
N/A				0		N/A		No Change	
			Add Row				Remove Row		
11. Subcontracts									
11a. Subcontracts Table - Include all subcontractors. The totals from this table equal the "Subcontracts Total" from the Program Budget Worksheet (Q. 12, Column 2, 3, and 4)									
Name	Subcontract Purpose	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated	Project and % Assigned (Example: Data Collection 75)	
Michael Baker Inc.	Data Collection	Yes	Yes	02/01/2010	01/31/2015	3,002,717	0	Data Collection	75
Michael Baker Inc.	Technical Assistance	No	Yes	08/26/2011	01/31/2015	1,261,132	0	Technical Assistance	25
Murray State University	Data Collection	No	Yes	06/15/2010	06/30/2011	400,000	0	Data Collection	100
Kentucky Council on Postsecondary Education (CPE)	Technical Assistance	No	Yes	11/27/2013	12/31/2014	338,868	0	Technical Assistance	100
					Add Row		Remove Row		
11b. Describe any challenges encountered with vendors or subrecipients.									
Please see 14Q4_Project Attachment_Question11b_DataCollection_KY.docx									

12. Budget worksheet						
Columns 2, 3, and 4 will match your current project budget for your entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.						
Project Budget Element	Federal Funds Awarded	Approved Matching Funds	Total Budget	Federal Funds Expended	Approved Matching Funds Expended	Total Funds Expended
Personnel Salaries	\$0	\$795,631	\$795,631	\$0	\$769,908	\$769,908
Personnel Fringe Benefits	\$0	\$215,640	\$215,640	\$0	\$207,408	\$207,408
Travel	\$0	\$30,177	\$30,177	\$0	\$16,995	\$16,995
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Materials / Supplies	\$0	\$37,429	\$37,429	\$0	\$71,362	\$71,362
Subcontracts Total	\$5,002,717	\$0	\$5,002,717	\$4,816,165	\$0	\$4,816,165
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$300,000	\$247,311	\$547,311	\$300,000	\$247,311	\$547,311
Total Direct Costs	\$5,302,717	\$1,326,188	\$6,628,905	\$5,116,165	\$1,312,984	\$6,429,149
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Costs	\$5,302,717	\$1,326,188	\$6,628,905	\$5,116,165	\$1,312,984	\$6,429,149
% of Total	80	20	100	80	20	100

  

13. Hardware / Software
<p>13a. List any hardware/software purchased during this reporting period.</p> <p>N/A</p>
<p>13b. Please note any hardware/software that has yet to be purchased and explain why it has not been purchased.</p> <p>N/A</p>

  

14. SBI PPR Project Attachment (Skip question 14b if Data Collection is your only project).
<p>14a. Complete a SBI PPR Project Data Collection Attachment and attach it to the PPR.</p> <p>14b. Complete a SBI PPR Attachment for each additional funded project and attach it to the PPR.</p>

**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 set forth in the award documents.**

15a. Typed or Printed Name and Title of Authorized Certifying Official

Dana Case

15c. Telephone  
(area code, number, and extension)

15d. Email Address

dana.case@ky.gov

15b. Signature of Authorized Certifying Official

Submitted Electronically

15e. Date Report Submitted  
(MM/DD/YYYY)

02-03-2015