	u.s. department of c		2. Award or Grant Number 31-50-M09058 4. Report Date (MM/DD/YYYY) 10-10-2012
Recipient Name Nebraska Public Service Commission			6. Reporting Period End Date: 09-30-2012
3. Street Address 300 The Atrium Building, 1200 N Stree 5. City, State, Zip Code	et,		
Lincoln, NE 68508		T	
7a. Project / Grant Period Start Date: (MM/DD/YYYY) 01-01-2010	7b. End Date: (MM/DD/YYYY) 12-31-2014	8. Designated Entity on Behalf of: Nebraska	

9. List the individual projects in your approved project plan

	Project Type (Data Collection, Capacity Building, Technical Assistance, etc.)	Project Name (if different from Project Type)	Total Federal Funding Amount	Total Federal Funding Amount expended at the end of this reporting period	Percent of Total Federal Funding amount expended
1	Data Collection	Not Applicable	3,190,133	1,847,543	58
2	Capacity Building	Includes Other funding from Original Award	885,417	266,662	30
3	Technical Assistance	Includes Other Funding from Original Award	1,193,058	236,492	20
4	Other	Regional Planning/Includes Original Award	394,177	103,568	26
5	N/A				0

10. Personnel

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.

The project is fully staffed.

10b. Staffing Table

Job Title	FTE %	Project(s) Assigned	Change
Executive Director	5	Data Collection	No Change
Department Director	5	Data Collection/Technical Assistance/Regiona	No Change

Attorney			5	Data Collection	No Change
Analyst			15	Data Collection/Technical Assistance, Regiona	aNo Change
Economist			5	Data Collection	No Change
Business Manager			2	Data Collection	No Change
Accountant			2	Data Collection	No Change
Accountant			5	Data Collection	No Change
	Add Row	Remove R	Row		

11. Subcontracts (Vendors and Subrecipients)

11a. Subcontracts Table - Include all subcontractors. The totals from this table equal the "Subcontractor Total" for the Program Budget Worksheet (Q. 12, Column 2, 3, and 4)

Name	Subcontract Purpose	Type (Vendor/Subrec)	RFP Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated		d % Assigned a Collection 75)
Apex CoVantage	Data Collection	Vendor	Yes	Yes	01/20/2010	12/31/2011	1,376,716	170,750	Data Collection	100
BroadMap	Data Collection	Vendor	Yes	Yes	01/06/2012	12/31/2014	749,847	0	Data Collection	100
GeoComm	Data Collection	Vendor	No	Yes	10/18/2010	11/17/2010	11,207	0	GIS Mapping E	100
Unknown	Data Collection	Vendor	No	No	12/31/2014	12/31/2014	260,000	0	Outreach	100
Unknown	Data Collection	Vendor	No	No	12/31/2014	12/31/2014	234,820	0	Additional data	100
Unknown	Data Collection	Vendor	No	No	12/31/2014	12/31/2014	128,500	0	Future Best Pra	100
State of Nebraska	Data Collection	Vendor	No	No	12/31/2014	12/31/2014	19,200	0	GIS Database	100
University of Nebraska	Technical Assistance	Vendor	No	Yes	06/22/2010	12/31/2014	613,931	260,000	Technical Assis	96
University of Nebraska	Planning Teams	Vendor	No	Yes	06/22/2010	12/31/2014	25,248	0	Regional Plann	0%
				Α	dd Row	Rer	move Row			

11b. Describe any challenges encountered with vendors or subrecipients.

The subcontract allocation for the regional planning project vendor, the University of Nebraska (above) should be 4%.

The NPSC has not experienced any particular challenges with its vendors during the reporting period.

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	\$898,699	\$266,352	\$1,165,051	\$256,992	\$112,734	\$369,726
Personnel Fringe Benefits	\$218,410	\$71,482	\$289,892	\$62,557	\$16,240	\$78,797
Travel	\$184,539	\$8,500	\$193,039	\$32,887	\$0	\$32,887
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Materials / Supplies	\$233,220	\$0	\$233,220	\$138,440	\$0	\$138,440
Subcontracts Total	\$3,419,469	\$430,750	\$3,850,219	\$1,860,095	\$43,638	\$1,903,733
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$319,795	\$998,973	\$1,318,768	\$10,485	\$979,135	\$989,620
Total Direct Costs	\$5,274,132	\$1,776,057	\$7,050,189	\$2,361,456	\$1,151,747	\$3,513,203
Total Indirect Costs	\$388,653	\$76,577	\$465,230	\$92,809	\$41,957	\$134,766
Total Costs	\$5,662,785	\$1,852,634	\$7,515,419	\$2,454,265	\$1,193,704	\$3,647,969
% of Total	75	25	100	67	33	100

13. Hardware / Software

13a. List any hardware/software purchased during this reporting period.

No hardware or software was purchased during this reporting period.

13b. Please note any hardware/software that has yet to be purchased and explain why it has not been purchased.

There is no hardware or software that has yet to be purchased.

14. SBI PPR Project Attachment (Skip question 14b if Data Collection is your only project).	
14a. Complete a SBI PPR Project Data Collection Attachment and attach it to the PPR.	
14b. Complete a SBI PPR Attachment for each additional funded project and attach it to the PPR.	
15. Certification: I certify to the best of my knowledge and belief that this report is correct and corset forth in the award documents.	mplete for performance of activities for the purpose
15a. Typed or Printed Name and Title of Authorized Certifying Official	15c. Telephone (area code, number, and extension)
	(area code, number, and extension)
Shanicee Knutson	(402) 471-3101
	(402) 471-3101 15d. Email Address
Shanicee Knutson Legal Counsel	
	15d. Email Address