

U.S. DEPARTMENT OF COMMERCE Performance Progress Report				2. Award or Grant Number 21-50-M09061	
				4. Report Date (MM/DD/YYYY) 01-22-2013	
1. Recipient Name Commonwealth of Kentucky				6. Reporting Period End Date: 12-31-2012	
3. Street Address 700 Capitol Avenue,					
5. City, State, Zip Code Frankfort, KY 40601-3410					
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: N/A			
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	N/A	3,402,717	2,561,352	75%
2	Technical Assistance	N/A	1,900,000	717,182	38%
3	N/A	N/A	0	0	
4	N/A	N/A	0	0	
5	N/A	N/A	0	0	
6	N/A	N/A	0	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. 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	12/31/2014	3,002,716	0	Data Collection	81	
Michael Baker Inc	Technical Assistance	No	Yes	08/26/2011	01/31/2013	717,932	0	Technical Assistance	19	
Murray State University	Data Collection	No	Yes	06/15/2010	06/30/2011	399,762	0	Validation Services	100	
Kentucky Area Development Districts	Technical Assistance	No	Yes	12/08/2011	12/31/2014	450,000	0	Technical Assistance	100	
N/A- TBD	Technical Assistance	No	No	12/31/2014	12/31/2014	732,307	0	Technical Assistance	0	
					Add Row		Remove Row			
11b. Describe any challenges encountered with vendors or subrecipients.										
See 12Q4_Project Attachment_Question 11b_Data Collection_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	\$56,943	\$798,048	\$854,991	\$0	\$409,189	\$409,189
Personnel Fringe Benefits	\$19,038	\$96,826	\$115,864	\$0	\$91,978	\$91,978
Travel	\$0	\$6,000	\$6,000	\$0	\$4,597	\$4,597
Equipment	\$0	\$16,956	\$16,956	\$0	\$0	\$0
Materials / Supplies	\$0	\$0	\$0	\$0	\$8,338	\$8,338
Subcontracts Total	\$4,674,509	\$0	\$4,674,509	\$3,278,534	\$0	\$3,278,534
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$552,227	\$408,358	\$960,585	\$0	\$247,311	\$247,311
Total Direct Costs	\$5,302,717	\$1,326,188	\$6,628,905	\$3,278,534	\$761,413	\$4,039,947
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Costs	\$5,302,717	\$1,326,188	\$6,628,905	\$3,278,534	\$761,413	\$4,039,947
% of Total	80	20	100	81	19	100

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

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 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)

02-14-2013