AWARD NUMBER: NT10BIX5570029

DATE: 01/28/2011

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013

QUARTERLY PERFORMANCE PRO	GRESS REPOR	T FOR BROADBAN	ID INFRASTRUCTURE PROJECTS	
General Information				
. Federal Agency and Organizational Element to Which Report is Submitted	2. Award Identific	ation Number	3. DUNS Number	
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557002	29	012119835	
. Recipient Organization				
Education Networks of America, Inc. 1101 McC Suite 301, Nashville, TN 37203-3168	Savock Street			
5. Current Reporting Period End Date (MM/DD/YY	YY)	6. Is this the last Repo	ort of the Award Period?	_
12-31-2010			○ Yes ● No	
C. Certification: I certify to the best of my knowled burposes set forth in the award documents.	dge and belief that th	is report is correct and	complete for performance of activities for the	
a. Typed or Printed Name and Title of Certifying	Official	7c. Telepho	one (area code, number and extension)	
Sherita Dawkins		615312605	4	
		7d. Email A	ddress	
		sdawkins@	⊉ena.com	
b. Signature of Certifying Official		7e. Date Re	port Submitted (MM/DD/YYYY):	
Submitted Electronically		01-28-201	1	

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Project Indicators (This Quarter)

- 1. Please describe significant project accomplishments completed during this quarter (600 words or less).
- A. Finalized Wave 1 deployments and confirmed needs of community anchor institutions for the wave. B. Began confirming Wave 2 deployments. C. Verified no over-builds in targeted service areas. D. Continued work on finalizing primary vendor contract. E. Worked with the National Telecommunications and Information Administration and vendor regarding security interest requirements. F. Developed plan for customer outreach activities.
- 2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline plan, please insert them at the bottom of the table. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the percent complete is different from the target provided in your baseline plan (300 words or less).

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or subsequent written updates provided to your program officer)
2a.	Overall Project	5	Delay in securing primary vendor contract because during the fourth quarter our vendor was in the process of undergoing an acquisition and that significantly affected their ability to negotiate or enter into new service contracts.
2b.	Environmental Assessment	0	N/A
2c.	Network Design	15	Vetting Wave 2 sites to verify service need.
2d.	Rights of Way	0	See item #2a above.
2e.	Construction Permits and Other Approvals	0	See item #2a above.
2f.	Site Preparation	0	See item #2a above.
2g.	Equipment Procurement	0	See item #2a above.
2h.	Network Build (all components - owned, leased, IRU, etc)	0	See item #2a above.
2i.	Equipment Deployment	0	See item #2a above.
2j.	Network Testing	0	See item #2a above.
2k.	Other (please specify):	0	N/A

To the extent not covered above, please describe any challenges or issues faced during this past quarter in achieving planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).

See response to item #2a above. ENA anticipates continued technical assistance to address security interest requirements and program adjustments.

4. Please report the following information regarding network build progress. Write "0" in the Total column and "N/A" in the Narrative column if your project does not include this activity. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the total is different from the target provided in your baseline plan (600 words or less).

Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
New network miles deployed	0	See item #2a above.
New network miles leased	0	N/A
Existing network miles upgraded	0	N/A
Existing network miles leased	0	N/A
Number of miles of new fiber (aerial or underground)	0	See item #2a above.
Number of new wireless links	0	N/A

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Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Number of new towers	0	N/A
Number of new and/or upgraded interconnection points	0	See item #2a above.

For questions 5 and 6 please include information relating to agreements that you are negotiating or have entered into, or that your sub recipient, contractor or subcontractor is negotiating or entered into.

5a. If applicable, please provide the following information with regard to agreements with broadband wholesalers and/or last mile providers as a result of your project.

Indicators	
Number of signed agreements with broadband wholesalers or last mile providers	0
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	0
Average term of signed agreements (in quarters)	0

5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements (100 words of less). Providers: N/A

5c. What wholesale services are being provided by this project? Please describe below. As an attachment to this report, please provide pricing plans (in \$ per month) associated with each wholesale service provided by your product (100 words of less). Wholesale services description:

N/A

5d. If you have designated a third party to operate all or a portion of your network, please provide the name and contact information for this third party, indicate if this entity is a sub recipient, contractor, and/or subcontractor, and describe with specificity the portion of your network this third party operates (600 words or less). N/A

6. Please provide the data according to the type of subscriber. Write "0" in the Total column and "N/A" in the Narrative column if your project does not pass or serve a particular subscriber type. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter. Please provide a narrative description if the total is different from the target provided in your baseline plan (300 words of less).

and the second s							
Subscriber Type	Access Type	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)				
Broadband Wholesalers or Last Mile Providers Wholesalers or Last Mile Providers		0	N/A				
	Providers with signed agreements receiving improved access	0	N/A				
Providers with signed agreements receiving access to dark fiber		0	N/A				
	Please identify the speed tiers that are available and the number of subscribers for each	0	N/A				
Community Anchor Institutions (including Government institutions)	Total subscribers served	0	See item #2a above.				

Area (town

Institution (as

broadband

funded infrastructure

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Subscriber Type	Access Type	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)				
	Subscribers receiving new access	0	See item #2a above.				
	Subscribers receiving improved access	0	See item #2a above.				
	Please identify the speed tiers that are available and the number or subscribers for each	0	See item #2a above.				
Residential / Households	Entities passed	0	N/A				
	Total subscribers served	0	N/A				
	Subscribers receiving new access	0	N/A				
	Subscribers receiving improved access	0	N/A				
	Please identify the speed tiers that are available and the number of subscribers for each	0	N/A				
Businesses	Entities passed	0	N/A				
	Total subscribers served	0	N/A				
	Subscribers receiving new access	0	N/A				
	Subscribers receiving improved access	0	N/A				
	Please identify the speed tiers that are available and the number of subscribers for each	0	N/A				
-	special offerings you may provide (600 woovide any special offerings.	vords or less).					
8a. Have your network	management practices changed over the	last quarter?	Yes No				
-	be the changes (300 words or less). I anagement changes to report over the	last quarter.					
Using the table below, p connected to your network cumulatively). Also indishort narrative description	9. Community Anchor Institutions: Using the table below, please provide a list by service area of the community anchor institutions (including Government institutions) connected to your network as a result of BTOP funds. Figures should be reported for the most recent reporting quarter only (NOT cumulatively). Also indicate whether your organization is currently providing broadband service to the anchor institution. Finally, provide a short narrative description with examples of how institutions are using BTOP-funded infrastructure (300 words or less).						
Institution Name	Service Type of Anchor Are you	also the Nar	rative description of how anchor institutions are using BTOP-				

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	or county)	defined in your baseline)	service provider for this institution? (Yes / No)	
N/A	N/A	N/A	N/A	Delay in securing primary vendor contract because during the fourth quarter our vendor was in the process of undergoing an acquisition and that significantly affected their ability to negotiate or enter into new service contracts.

Project Indicators (Next Quarter)

- 1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).
- A. Finalize key vendor contract and National Telecommunications and Information Administration security interest requirements. B. Initiate process to adjust project scope. C. Begin Wave 1 build-out and implementation. D. Secure signage, order circuits. E. Develop individual site transition plans and timeline. F. Begin customer outreach activities, includes ground-breaking. G. Finalize Wave 2 deployments.
- 2. Please provide the percent complete for the following key milestones in your project. Write "0" in the Planned Percent Complete column and "N/A" in the Narrative column if your project does not include this activity. If you provided additional milestones in your baseline plan, please insert them at the bottom of the table. Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the next reporting quarter. Please provide a narrative description if the percent complete is different from the target provided in your baseline plan (300 words or less).

	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	7	Delay in securing primary vendor contract because during the fourth quarter our vendor was in the process of undergoing an acquisition and that significantly affected their ability to negotiate or enter into new service contracts.
2b.	Environmental Assessment	0	N/A
2c.	Network Design	35	Vetting Wave 2 sites to verify service need.
2d.	Rights of Way	5	See item #2a above.
2e.	Construction Permits and Other Approvals	5	See item #2a above.
2f.	Site Preparation	5	See item #2a above.
2g.	Equipment Procurement	5	See item #2a above.
2h.	Network Build (all components - owned, leased, IRU, etc.)	0	See item #2a above.
2i.	Equipment Deployment	0	See item #2a above.
2j.	Network Testing	0	See item #2a above.
2k.	Other (please specify):	0	N/A

^{3.} Please describe any challenges or issues anticipated during the next quarter that may impact planned progress against the project milestones listed above. In particular, please identify any areas or issues where technical assistance from the BTOP program may be useful (600 words or less).

A. Delayed contract finalization may impact planned progress. B. ENA anticipates continued technical assistance to address security interest requirement and program adjustments.

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Infrastructure Budget Execution Details

Activity Based Expenditures (Infrastructure)

1. Please provide details below on your total budget, cumulative actual expenditures (for the period ending the current quarter), and cumulative anticipated expenditures (for the period ending next quarter) for each line item, including detailed disbursements of both matching funds and federal funds from project inception through end of this quarter (actual) or next quarter (anticipated). Actual and anticipated figures should be reported cumulatively from award inception to the end of the applicable reporting quarter.

Budget for Entire Project					from Project nd of Current Period		Anticipated Actuals from Project Inception through End of Next Reporting Period		
Cost Classification	Total Cost (plan)	Matching Funds (plan)	Federal Funds (plan)	Total Cost	Matching Funds	Federal Funds	Total Costs	Matching Funds	Federal Funds
a. Administrative and legal expenses	\$367,574	\$82,007	\$285,567	\$0	\$0	\$0	\$0	\$0	\$0
b. Land, structures, right-of-ways, appraisals, etc.	\$917,537	\$204,707	\$712,830	\$0	\$0	\$0	\$0	\$0	\$0
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$917,573	\$204,715	\$712,858	\$0	\$0	\$0	\$0	\$0	\$0
e. Other architectural and engineering fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
f. Project inspection fees	\$917,610	\$204,723	\$712,887	\$0	\$0	\$0	\$0	\$0	\$0
g. Site work	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
h. Demolition and removal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
i. Construction	\$12,901,016	\$2,878,274	\$10,022,742	\$0	\$0	\$0	\$0	\$0	\$0
j. Equipment	\$2,310,149	\$515,404	\$1,794,745	\$0	\$0	\$0	\$0	\$0	\$0
k. Miscellaneous	\$20,006	\$4,463	\$15,543	\$0	\$0	\$0	\$0	\$0	\$0
I. SUBTOTAL (add a through k)	\$18,351,465	\$4,094,293	\$14,257,172	\$0	\$0	\$0	\$0	\$0	\$0
m. Contingencies							_		_
n. TOTALS (sum of I and m)	\$18,351,465	\$4,094,293	\$14,257,172	\$0	\$0	\$0	\$0	\$0	\$0

2. Program Income: Please provide the program income you listed in your application budget and actuals to date through the end of the reporting period.

a. Application Budget Program Income: \$0 b. Program Income to Date: \$0