AWARD NUMBER: NT10BIX5570057

DATE: 02/23/2011

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

QUARTERLY PERFORMANCE PROG	RESS REPOR	T FOR BRO	DADRAN	D INFRASTRUCTURE PROJEC	TS.
General Information	JAZOG KZI OK	T T OIL BILL	57 (B B) ((1)		
Federal Agency and Organizational Element to					
Which Report is Submitted	2. Award Identific	ation Numbe	er	3. DUNS Number	
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557005	57		626155035	
4. Recipient Organization	l				
DigitalBridge Communications Corp. 44675 Cape Suite 130, Ashburn, VA 20147-6230	e Court				
5. Current Reporting Period End Date (MM/DD/YYY	Y)	6. Is this the	e last Repo	rt of the Award Period?	
12-31-2010				○ Yes ● No	
7. Certification: I certify to the best of my knowledg purposes set forth in the award documents.	e and belief that th	is report is c	orrect and	complete for performance of activities	for the
7a. Typed or Printed Name and Title of Certifying O	fficial	70	c. Telepho	ne (area code, number and extension)	)
William Wallace		7	037236272	2	
		70	d. Email A	ddress	
Executive V.P. Policy & External Affairs		\	william.wal	lace@dbcmail.com	
7b. Signature of Certifying Official		70	e. Date Rej	port Submitted (MM/DD/YYYY):	
Submitted Electronically		(	02-23-2011	1	

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## **Project Indicators (This Quarter)**

1. Please describe significant project accomplishments completed during this quarter (600 words or less).

Updated radio network plan to improve coverage and cost effectiveness.

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	30	Network design is 70% complete.
2b.	Environmental Assessment	100	N/A
2c.	Network Design	70	Tower site selection, backhaul design, and coverage plans have been completed.
2d.	Rights of Way	0	N/A
2e.	Construction Permits and Other Approvals	0	N/A
2f.	Site Preparation	0	N/A
2g.	Equipment Procurement	0	N/A
	Network Build (all components - owned, leased, IRU, etc)	20	Components needed have been identified by site.
2i.	Equipment Deployment	20	Construction vendors have been interviewed.
2j.	Network Testing	0	N/A
2k.	Other (please specify): Library outreach	30	Local libraries have been contacted, RFPs completed.

<sup>3.</sup> 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).

DBC strategic shifts slowed implementation during December, but project is still on track to be completed by 6/30/11.

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	N/A
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	N/A
Number of new wireless links	0	N/A
Number of new towers	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 and/or upgraded interconnection points	0	N/A

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	1
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 or 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 or 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 or less).

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	Providers with signed agreements receiving new access	0	Project will not serve this type of subscriber.			
	Providers with signed agreements receiving improved access	0	Project will not serve this type of subscriber.			
	Providers with signed agreements receiving access to dark fiber	0	Project will not serve this type of subscriber.			
	Please identify the speed tiers that are available and the number of subscribers for each	0	Project will not serve this type of subscriber.			
Community Anchor Institutions (including Government institutions)	Total subscribers served	0	N/A			
	Subscribers receiving new access	0	N/A			
	Subscribers receiving improved access	0	N/A			

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Subscriber Type	Type Access Type		Total		Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)			
		y the speed tiers t the number or or each	that are	0		N/A		
Residential / Households Entities passed		0		N/A				
	Total subscri	bers served		0		N/A		
	Subscribers r	eceiving new acce	ess	0		N/A		
Subscribers receiving improved access				0		N/A		
		y the speed tiers t the number of or each	that are	0		N/A		
Businesses	Entities pass	ed		0		N/A		
	Total subscri	bers served		0		N/A		
	Subscribers r	eceiving new acce	ess	0		N/A		
	Subscribers r	eceiving improved	d access	0		N/A		
		y the speed tiers t the number of or each	that are	0		N/A		
<ul> <li>7. Please describe any selection N/A</li> <li>8a. Have your network selection N/A</li> </ul>	management <sub>l</sub>	oractices changed	l over the					
9. Community Anchor In Using the table below, p connected to your network cumulatively). Also indi	lease provide ork as a resulf icate whether	t of BTOP funds. If your organization	Figures s is currer	hould be novid	repor	nchor institutions (including Government institutions) ted for the most recent reporting quarter only (NOT roadband service to the anchor institution. Finally, provide a unded infrastructure (300 words or less).		
Institution Name	Service Area (town or county)	Type of Anchor Institution (as defined in your baseline)	broad service for institu	also the dband provider this ution?	Narr	ative description of how anchor institutions are using BTOP- funded infrastructure		
N/A	N/A	N/A	N	/A		N/A		
Project Indicators (Next	t Quarter)							
Please describe sign Finalizing network plan			-	_		n during the next quarter (600 words or less). mits and approvals.		
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).								

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	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	60	Will complete network design, rights of way, permitting, and equipment procurement.
2b.	Environmental Assessment	100	N/A
2c.	Network Design	100	Will complete tower site logistics.
2d.	Rights of Way	100	Will determine and request permits for rights of way.
2e.	Construction Permits and Other Approvals	100	Will request necessary permits.
2f.	Site Preparation	70	Will finalize tower sites for construction.
2g.	Equipment Procurement	100	Will order all equipment necessary for deployment.
	Network Build (all components - owned, leased, IRU, etc.)	30	Will commence network build.
2i.	Equipment Deployment	30	Will commence equipment deployment.
2j.	Network Testing	0	N/A
2k.	Other (please specify): Library outreach	30	Will continue library outreach and RFP response.

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). Will be briefing NITA on potential changes in organization structure and estimating final completion date.

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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 End 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	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
b. Land, structures, right-of-ways,	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
appraisals, etc. c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$106,400	\$21,280	\$85,120	\$0	\$0	\$0	\$21,280	\$4,256	\$17,024
e. Other architectural and engineering	\$7,375	\$1,475	\$5,900	\$0	\$0	\$0	\$1,475	\$295	\$1,180
f. Project inspection fees	\$0	\$0	\$0	\$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	\$572,424	\$114,485	\$457,939	\$0	\$0	\$0	\$114,485	\$22,897	\$91,588
j. Equipment	\$992,417	\$198,483	\$793,934	\$0	\$0	\$0	\$198,483	\$39,697	\$158,786
k. Miscellaneous	\$22,200	\$4,440	\$17,760	\$0	\$0	\$0	\$4,440	\$888	\$3,552
I. SUBTOTAL (add a through	\$1,700,816	\$340,163	\$1,360,653	\$0	\$0	\$0	\$340,163	\$68,033	\$272,130
m. Contingencies	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
n. TOTALS (sum of I and m)		\$340,163	\$1,360,653	\$0	\$0	\$0	\$340,163	\$68,033	\$272,130

<sup>2.</sup> 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