AWARD NUMBER: NT10BIX5570016

DATE: 11/08/2013

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 6/30/2015

QUARTERLY PERFORMANCE PROG	DESC DEDUD.	T EOD BROAD	DAND IN	EDASTRUCTURE DRO JECTS
	SKESS KEFOR	I FOR BROAD	DAND IN	FRASIROCIONE PROJECTS
General Information	I			
Federal Agency and Organizational Element to Which Report is Submitted	ation Number	3. D	UNS Number	
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557001	6	074	747908
4. Recipient Organization	I			
Virginia Tech Foundation, Inc. 902 Prices Fork R	load STE 400, Bla	cksburg, VA 2406	60-3260	
5. Current Reporting Period End Date (MM/DD/YYY	Y)	6. Is this the last	Report of the	ne Award Period?
06-30-2013			⊙ Y	∕es ○ 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 correct	t and comp	lete for performance of activities for the
7a. Typed or Printed Name and Title of Certifying O	fficial	7c. Tel	lephone (ar	ea code, number and extension)
Pat Rodgers		54023	11709	
		7d. Em	nail Address	s
		prodg	jers@vt.ed	u
7b. Signature of Certifying Official		7e. Da	te Report S	submitted (MM/DD/YYYY):
Submitted Electronically		11-08	3-2013	

DATE: 11/08/2013

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 6/30/2015

Project Indicators (This Quarter)

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

All fiber construction on this project has been completed. All nodes were completed last quarter, along with the equipment installation and splicing, and acceptance testing. The UCC-1 filings were filed with the counties. An audit was completed. Only close-out activities occurred.

We spent \$134,792.94 in the 3rd quarter, bringing the total spent to \$6,852,854.50(99%). The total cable placed on this project was 106.6 miles. We served two CAIs on this project (Virginia Tech and Carilion School of Medicine), neither or which was originally forecast. The project total for new circuit contracts is five (5); Citizens was added in August 2013.

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	99	Complete
2b.	Environmental Assessment	100	Complete
2c.	Network Design	100	Complete
2d.	Rights of Way	100	Complete
2e.	Construction Permits and Other Approvals	100	Complete
2f.	Site Preparation	100	Complete
2g.	Equipment Procurement	100	Complete
2h.	Network Build (all components - owned, leased, IRU, etc)	100	Complete
2i.	Equipment Deployment	100	Complete
2j.	Network Testing	100	Complete
2k.	Other (please specify):	0	N/A

3. 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).

Ensuring that all charges were submitted for reimbursement and all close-out activities were begun.

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).

400	
106	Complete
15	IRU from Cox
0	N/A
0	N/A
106	Complete
0	N/A
	0 0 106

RECIPIENT NAME: Virginia Tech Foundation, Inc.

AWARD NUMBER: NT10BIX5570016

DATE: 11/08/2013

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	5	Complete

OMB CONTROL NUMBER: 0660-0037

EXPIRATION DATE: 6/30/2015

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	5
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	2
Average term of signed agreements (in quarters)	12

5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements (100 words or less). Providers: Pemtel (1); Lumos (3); Citizens (1)

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:

MBC provides optical transport services, using both SONET/TDM, Wavelength, and Ethernet Connections. Ethernet circuits are provisioned as Ethernet over SONET, and each circuit has dedicated STSs for transport delivery. Standard contract terms are 24 months.

MBC provides secured carrier-class collocation space (in 1/4 rack increments or 12 rack units) for members. Due to grant funds being used in the construction of the MBC backbone network, dark fiber IRUs are no longer offered. Fiber lease arrangements are considered on case by case basis (Member pays annual fee for use of the dark fiber strands.) Five year minimum lease term.

- 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	5	Pemtel (1); Lumos (3); Citizens (1)
	Providers with signed agreements receiving improved access	0	N/A
	Providers with signed agreements receiving access to dark fiber		N/A
Please identify the speed tiers that are available and the number of subscribers for each		5	10 mbps-100mbps - Open Access
Community Anchor Institutions (including Government institutions)	Total subscribers served	2	N/A

RECIPIENT NAME: Virginia Tech Foundation, Inc.

AWARD NUMBER: NT10BIX5570016

DATE: 11/08/2013

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 6/30/2015

Subscriber Type Access Type			Total		Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)					
	Subscribers r	eceiving new acce	ess	0		N/A				
	Subscribers receiving improved access			0		N/A				
Please identify the speed tiers that are available and the number or subscribers for each				0		10 mbps-100 mbps - Open access				
Residential / Households	Hittigs nassad			0		N/A				
	Total subscril	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		10 mbps-100 mbps - Open access				
Businesses	Entities passe	ed		0		N/A				
	Total subscril	bers served		0		N/A				
	Subscribers r	eceiving new acce	ess	0		N/A				
	Subscribers r	eceiving improved	0		N/A					
Please identify the speed tiers that are available and the number of subscribers for each 10 mbps-100 mbps - Open access										
7. Please describe any special offerings you may provide (600 words or less). N/A										
8a. Have your network r	nanagement p	oractices changed	over the	last quar	ter?	○ Yes • No				
8b. If so, please describ N/A	e the changes	s (300 words or les	ss).							
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	Area (town or county) Area (town Institution (as broad service baseline) Area (town Institution (as broad service for institution (as broad service service for institution (as broad service service service for institution (as broad service serv			also the lband provider this ution? / No)	Narı	rative description of how anchor institutions are using BTOP-funded infrastructure				
N/A	N/A	N/A	N/	′ A		N/A				
Project Indicators (Next	: Quarter)									

1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less). Complete all close-out activities and reports by November 27, 2013.

RECIPIENT NAME: Virginia Tech Foundation, Inc.

AWARD NUMBER: NT10BIX5570016

DATE: 11/08/2013 EXPIRATION DATE: 6/30/2015

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).

OMB CONTROL NUMBER: 0660-0037

	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	99	Complete
2b.	Environmental Assessment	100	Complete
2c.	Network Design	100	Complete
2d.	Rights of Way	100	Complete
2e.	Construction Permits and Other Approvals	100	Complete
2f.	Site Preparation	100	Complete
2g.	Equipment Procurement	100	Complete
2h.	Network Build (all components - owned, leased, IRU, etc.)	100	Complete
2i.	Equipment Deployment	100	Complete
2j.	Network Testing	100	Complete
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).

Complete all close-out activities and reports by November 27, 2013.

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 6/30/2015

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 on 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	\$232,913	\$24,418	\$208,495	\$264,217	\$28,721	\$235,496	\$264,217	\$28,721	\$235,496
b. Land, structures, right-of-ways, appraisals, etc.	\$839,327	\$134,190	\$705,137	\$743,386	\$131,337	\$612,049	\$743,386	\$131,337	\$612,049
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$600,452	\$118,945	\$481,507	\$607,739	\$121,507	\$486,232	\$607,739	\$121,507	\$486,232
e. Other architectural and engineering fees	\$80,000	\$15,536	\$64,464	\$75,544	\$15,282	\$60,262	\$75,544	\$15,282	\$60,282
f. Project inspection fees	\$92,132	\$1,186	\$90,946	\$92,310	\$971	\$91,339	\$92,310	\$971	\$91,339
g. Site work	\$178,924	\$93,174	\$85,750	\$136,198	\$52,732	\$83,466	\$136,198	\$52,732	\$83,466
h. Demolition and removal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
i. Construction	\$3,815,772	\$405,788	\$3,409,984	\$3,838,991	\$424,518	\$3,414,473	\$3,838,991	\$424,518	\$3,414,473
j. Equipment	\$1,059,170	\$565,453	\$493,717	\$1,068,159	\$569,191	\$498,968	\$1,068,159	\$569,191	\$498,968
k. Miscellaneous	\$26,310	\$26,310	\$0	\$26,310	\$26,310	\$0	\$26,310	\$26,310	\$0
I. SUBTOTAL (add a through k) m. Contingencies	\$6,925,000	\$1,385,000	\$5,540,000	\$6,852,854	\$1,370,569	\$5,482,285	\$6,852,854	\$1,370,569	\$5,482,305
n. TOTALS (sum of I and m)	\$6,925,000	\$1,385,000	\$5,540,000	\$6,852,854	\$1,370,569	\$5,482,285	\$6,852,854	\$1,370,569	\$5,482,305

^{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: \$92,228