AWARD NUMBER: NT10BIX5570045

DATE: 09/12/2013

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

| 5/112. 30/12/2010 | | | | | | |
|---|---|---------------------|---|--|--|--|
| QUARTERLY PERFORMANCE PROC | SRESS REPOR | T FOR BROAD | BANL | D 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 | NT10BIX557004 | 4 5 | | 161202122 | | |
| 4. Recipient Organization | 1 | | | | | |
| University of Wisconsin System Research & Spo 21 N. Park St., Ste. 6401, Madison, WI 53715-12 | | | | | | |
| 5. Current Reporting Period End Date (MM/DD/YYY | Υ) | 6. Is this the last | t Report | t of the Award Period? | | |
| 06-30-2013 | | | | | | |
| 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 correc | ct and c | complete for performance of activities for the | | |
| 7a. Typed or Printed Name and Title of Certifying O | fficial | 7c. Te | elephon | e (area code, number and extension) | | |
| Dawn-Marie M. Roberts | | 60826 | 6082620152 | | | |
| | | 7d. Er | mail Ad | dress | | |
| | | drobe | ert4@rs | sp.wisc.edu | | |
| 7b. Signature of Certifying Official | | 7e. Da | 7e. Date Report Submitted (MM/DD/YYYY): | | | |
| Submitted Electronically | | 09-12 | 2-2013 | | | |
| | | | | | | |
| | | | | | | |
| | Submitted Commerce, National ations and Information NT10BIX5570045 161202122 anization isconsin System Research & Sponsored Programs Ste. 6401, Madison, WI 53715-1218 rting Period End Date (MM/DD/YYYY) 6. Is this the last Report of the Award Period? © Yes | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

DATE: 09/12/2013

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).

UW received and paid all outstanding invoices as well as performed a final draw-down of federal funds. We submitted 3 UCC-1 statements (1 for the City of Madison, 1 for the Metropolitan Unified Fiber Network Consortium, Unincorporated Association and 1 for UW-Madison), received approval of form/content of the 3 UCC-1 statements and submitted to appropriate State of WI or local register of deeds. We also submitted final SF425 and other required closeout documentation.

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) All construction is complete All environmental assessment work is complete. All network design activities are complete. All right-of-way activities are complete All construction is complete All site preparation activities are complete All equipment has been procured Network build is complete All equipment has been installed Network has been fully tested N/A | |
|-----|--|---------------------|--|--|
| 2a. | Overall Project | 100 | All construction is complete | |
| 2b. | Environmental Assessment | 100 | All environmental assessment work is complete. | |
| 2c. | Network Design | 100 | All network design activities are complete. | |
| 2d. | Rights of Way | 100 | All right-of-way activities are complete | |
| 2e. | Construction Permits and Other Approvals | 100 | All construction is complete | |
| 2f. | Site Preparation | 100 | All site preparation activities are complete | |
| 2g. | Equipment Procurement | 100 | All equipment has been procured | |
| 2h. | Network Build (all components - owned, leased, IRU, etc) | 100 | Network build is complete | |
| 2i. | Equipment Deployment | 100 | All equipment has been installed | |
| 2j. | Network Testing | 100 | Network has been fully tested | |
| 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).

None - grant term ended and finalizing grant closeout paperwork.

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 | 74 | All new network miles are deployed |
| New network miles leased | 0 | No new network miles are being leased |
| Existing network miles upgraded | 56 | All network mile upgrades are complete |
| Existing network miles leased | 0 | No existing network miles are being leased |
| Number of miles of new fiber (aerial or underground) | 74 | MUFN finished the grant with 74.3 miles of new fiber |
| Number of new wireless links | 0 | N/A |
| Number of new towers | 0 | N/A |

RECIPIENT NAME: University of Wisconsin System

AWARD NUMBER: NT10BIX5570045

DATE: 09/12/2013

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

| 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 | 100 | MUFN has completed all interconnection points |

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 | 2 |
| Number of agreements currently being negotiated with broadband wholesalers or last mile providers | 7 |
| Average term of signed agreements (in quarters) | 50 |

5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements (100 words or less). Providers: SupraNet (formerly Citywide d/b/a Mad City Broadband), Wisconsin Independent Network (aka WIN)

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:

MUFN wholesale services offered by the project include point-to-point dark fiber and point-to-point wavelength services (where fiber IRUs permit). See attached document (BTOP-MUFN-PricingPlan.pdf).

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).

The MUFN Consortium (subrecipient to UW) in collaboration with the City of Madison (subrecipient to UW), UW, WINs (subcontractor to MUFN-C) and SupraNet (subcontractor to MUFN-C) (formerly Citywide d/b/a Mad City Broadband) will operate the network together. SupraNet's contact information: 8000 Excelsior Drive, Madison, WI 53717, Bryan Chang 608-836-0282; UW-Madison's contact information: Pat Christian, 1210 W. Dayton St., Madison, WI 53706, 608-265-9699, WINMetro, LLC contact information: 800 Wisconsin Street, Building DO2, Suite 219, Eau Claire, WI 54703, Scott Hoffmann (715) 832-3722. The City of Madison is responsible for maintaining conduit and fiber within the City of Madison jurisdiction. MUFN-C is responsible for maintaining fiber outside the City of Madison jurisdiction and managing the optical infrastructure. WINMetro, LLC and SupraNet will provide NOC services and inforation technology services respectively for all conduit and fiber infrastructure while UW-Madison will perform engineering services for conduit, fiber and the optical infrastructure.

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 | Wholesalers or Last | | MUFN is not in negotiations with providers receiving new access. |
| | Providers with signed agreements receiving improved access | 0 | Commercial groups not using optical network yet - focusing efforts on dark fiber first. |
| | Providers with signed agreements receiving access to dark fiber | | Both commercial entities began using MUFN fiber infrastructure at the end of 2Q2013. |
| Please identify the speed tiers that are available and the number of subscribers for each | | 0 | Dark fiber; users can pick their own baseband speed/signaling type (i.e. ethernet) or light fiber via wave-division multiplexing |

RECIPIENT NAME:University of Wisconsin System

AWARD NUMBER: NT10BIX5570045

DATE: 09/12/2013

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

| Subscriber Type | | | Total | I | Narrative (describe your reasons for any variance from the baseline plan or any other relevant information) | | |
|---|---|---|--|--------------------------|---|---|--|
| Community Anchor Institutions (including Government institutions) | Total subscri | bers served | | 92 | | Below 99 CAIs due to 5 dropped locations (at institution request due to facility closures); also not counting 2 locations MUFN initially considered CAIs per NTIA request. | |
| | Subscribers r | receiving new acco | ess | 12 | | Below 14 CAIs per NTIA request to not count 2 locations as CAIs | |
| | Subscribers r | receiving improve | d access | 80 | | Below 84 CAIs due to 5 dropped locations (at institution request due to facility closures) and addition of 1 CAI as part of MUFN phase 4. | |
| | Please identify the speed tiers that are available and the number or subscribers for each | | 0 | | MUFN is a dark fiber project - most subscribers lighting dark fiber at minimum 1Gbps if not 10Gbps. | | |
| Residential / Households | Entities passe | ed | | 0 | | N/A | |
| | Total subscri | bers served | | 0 | | N/A | |
| | Subscribers r | receiving new acco | ess | 0 | | N/A | |
| | Subscribers r | receiving improve | d access | 0 | | N/A | |
| | | fy the speed tiers to the number of or each | that are | 0 | | N/A | |
| Businesses | Entities passe | ed | | 0 | | N/A | |
| | Total subscri | bers 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 | | | |
| 7. Please describe any N/A | special offerin | ngs you may provi | de (600 v | vords or le | ess). | | |
| 8a. Have your network | management p | practices changed | l over the | last quar | ter? | ○ Yes • No | |
| 8b. If so, please describ N/A | oe the changes | s (300 words or les | ss). | | | | |
| connected to your netw cumulatively). Also ind | olease provide ork as a result icate whether | t of BTOP funds. I your organization | Figures s is currer | should be ntly provid | repor ling b | 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 | Area (town or county) Area (town or county) | | also the dband provider this aution? | Nar | rative description of how anchor institutions are using BTOP-funded infrastructure | | |
| N/A | N/A | N/A | N | I/A | | No new construction in 3Q2013; grant term ended 6/30/13 | |
| Project Indicators (Next | t Quarter) | | | | | | |

RECIPIENT NAME: University of Wisconsin System

AWARD NUMBER: NT10BIX5570045

OMB CONTROL NUMBER: 0660-0037 DATE: 09/12/2013 EXPIRATION DATE: 6/30/2015

| ١ | 1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less). |
|---|--|
| ١ | Completion of grant closeout activities including recording of NTIA security interest. |

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 | 100 | Grant completed |
| 2b. | Environmental Assessment | 100 | Grant completed |
| 2c. | Network Design | 100 | Grant completed |
| 2d. | Rights of Way | 100 | Grant completed |
| 2e. | Construction Permits and Other Approvals | 100 | Grant completed |
| 2f. | Site Preparation | 100 | Grant completed |
| 2g. | Equipment Procurement | 100 | Grant completed |
| 2h. | Network Build (all components - owned, leased, IRU, etc.) | 100 | Grant completed |
| 2i. | Equipment Deployment | 100 | Grant completed |
| 2j. | Network Testing | 100 | Grant completed |
| 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

None - grant term and 90 day closeout period ended 9/28/13.

DATE: 09/12/2013

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 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 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| b. Land, structures, right-of-ways, appraisals, etc. | \$0 | \$0 | \$0 | \$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 | \$339,821 | \$0 | \$339,821 | \$298,304 | \$0 | \$298,304 | \$298,304 | \$0 | \$298,304 |
| e. Other architectural and engineering fees | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| f. Project inspection fees | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| g. Site work | \$10,000 | \$0 | \$10,000 | \$9,735 | \$0 | \$9,735 | \$9,735 | \$0 | \$9,735 |
| h. Demolition and removal | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| i. Construction | \$6,834,082 | \$3,753,242 | \$3,080,840 | \$7,121,335 | \$3,869,042 | \$3,252,293 | \$7,121,335 | \$3,869,042 | \$3,252,293 |
| j. Equipment | \$1,625,712 | \$0 | \$1,625,712 | \$1,523,464 | \$0 | \$1,523,464 | \$1,523,464 | \$0 | \$1,523,464 |
| k. Miscellaneous | \$50,000 | \$0 | \$50,000 | \$22,577 | \$0 | \$22,577 | \$22,577 | \$0 | \$22,577 |
| I. SUBTOTAL (add a through k) | \$8,859,615 | \$3,753,242 | \$5,106,373 | \$8,975,415 | \$3,869,042 | \$5,106,373 | \$8,975,415 | \$3,869,042 | \$5,106,373 |
| m. Contingencies | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| n. TOTALS (sum of I and m) | \$8,859,615 | \$3,753,242 | \$5,106,373 | \$8,975,415 | \$3,869,042 | \$5,106,373 | \$8,975,415 | \$3,869,042 | \$5,106,373 |

^{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: \$298,000 b. Program Income to Date: \$115,800