AWARD NUMBER: NT10BIX5570145 DATE: 05/20/2013

QUARTERLY PERFORMANCE PROC	GRESS REPOR	FOR BROADBA	ND INFRASTRUCTURE PROJECTS			
General Information						
1. 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	NT10BIX557014	15	073124562			
4. Recipient Organization						
Ute Indian Tribe 988 South 7500 East, Fort Duch	hesne, UT 84026					
5. Current Reporting Period End Date (MM/DD/YYY	Y)	6. Is this the last Repo	ort of the Award Period?			
03-31-2013			○ Yes ● No			
7. Certification: I certify to the best of my knowledg purposes set forth in the award documents.	je and belief that th	is report is correct and	I complete for performance of activities for the			
7a. Typed or Printed Name and Title of Certifying O	fficial	7c. Teleph	one (area code, number and extension)			
Crystal Adams		435722514	4357225141			
		7d. Email A	Address			
		uitgrants@	Dutetribe.com			
7b. Signature of Certifying Official		7e. Date Report Submitted (MM/DD/YYYY):				
Submitted Electronically		05-20-201	05-20-2013			

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Project Indicators (This Quarter)

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

We finished getting the final CAI connected and the Hardware installed. We We also spent time with network configuration, and implementation of the new network equipment.

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	100	The project is progressing on schedule
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
/ /n	Network Build (all components - owned, leased, IRU, etc)	100	The majority of the wireless network is complete and we have connected 43 total CAI's.
2i.	Equipment Deployment	100	Complete
2j.	Network Testing	100	Complete
2k.	Other (please specify): N/A	100	Complete

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).

We don't for see any major set backs for this quarter. We will begin the process of final reporting.

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	9	We have construction completed on the main fiber loop; the main fiber loop conduit is installed and all the fiber is blown, and terminated. The laterals are dug and the fiber is blown and connected.
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)	9	All fiber is buied and complete.
Number of new wireless links	150	Wireless is up and running we have 150 households connected.

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institutions)

Subscribers receiving new access

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DATE: 05/20/2013				EXPIRATION DATE: 12/31/2013				
			Narrativ	ive (describe your reasons for any variance from the baseli				
	Indicator			plan or any other relevant information)				
Number of new towers		0	N/A					
Number of new and/or u	pgraded interconnection points	1	We only	e only hve one interconect point for this project.				
	lease include information relating subcontractor is negotiating or e		s that you	u are negotiating or have entered into, or that your sub				
5a. If applicable, please as a result of your proje		n with regard to	to agreeme	nents with broadband wholesalers and/or last mile provider				
	Indicators							
Number of signed agree	ements with broadband wholesale	ers or last mile	providers	r s 0				
Number of agreements oproviders	currently being negotiated with b	roadband whol	lesalers or	or last mile 0				
Average term of signed	agreements (in quarters)			0				
bricing plans (in \$ per m description: 100 Mbs fiber connecti 10 Mbs 802.11 wireles 5d. If you have designa third party, indicate if th network this this third p N/A 5. Please provide the da	nonth) associated with each whole on for VOIP, Data, and Internet s connectivity for internet acces ted a third party to operate all or is entity is a sub recipient, contra- iarty operates (600 words or less) ata according to the type of subs	esale service p connectivity. s. a portion of yo actor, and/or su criber. Write "(orovided b our networl ubcontract 0" in the T	be below. As an attachment to this report, please provide by your product (100 words or less). Wholesale services ork, please provide the name and contact information for th ctor, and describe with specificity the portion of your Total column and "N/A" in the Narrative column if your ndicated in the instructions, figures should be reported				
cumulatively from awar		t recent reporti	ing quarte	er. Please provide a narrative description if the total is				
Subscriber Type	Access Type	То	otal	Narrative (describe your reasons for any variance from th baseline plan or any other relevant information)				
Broadband Wholesalers or Last Mile Providers	Providers with signed agreemen receiving new access	its (0 N	N/A				
	Providers with signed agreemen receiving improved access	its (0 N	N/A				
	Providers with signed agreemen receiving access to dark fiber	its (0 N	N/A				
	Please identify the speed tiers th available and the number of subscribers for each		0 N	N/A				
Community Anchor Institutions (including Government institutions)	Total subscribers served	4	43 W	We have connected 8 new CAI this quarter.				

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All new subscribers are connected using 100MB Fiber

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

Subscriber Type	ļ A	Access Type	Tota	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)			
	Subscribers re	eceiving improved ac	ccess 10	mproved access moved from Point to Point 1024K connections 100 MB Fiber.			
	Please identify available and t subscribers fo		are 2	100 MB Fiber=43 subscribers 10 MB Wireless=0 new subscribers			
Residential / Households	Entities passe	d	180	We have mostly concluded the installation of the wireless netwo and currently serving 150 households.			
	Total subscrib	ers served	150	Services to the remaining house holds will be made available ne quarter.			
	Subscribers re	eceiving new access	150	No new services were made available this quarter, but we have maintained 150 subscribers.			
	Subscribers re	eceiving improved ac	ccess 0	Services were made available this quarter			
	Please identify available and t subscribers fo		t are 1	10 Mbs 802.11 Wireless (Only one service offering is available and it will be the same for all households passed).			
Businesses	Entities passe	d	2	We have passed 2 businesses and connected 2.			
	Total subscrib	ers served	2	We are currently providing services to 2 subscribers.			
	Subscribers re	eceiving new access	2	Both Subscribers have new access			
	Subscribers re	eceiving improved ad	ccess 0	N/A			
7. Please describe any Ne will be providing 1	Please identify available and t subscribers fo	or each gs you may provide (2 (600 words or le	100 MB Fiber 10 MB Wireless ess). r Institutes and 10 Mbs wireless connection to all households.			
	Please identify available and t subscribers fo v special offering 00 Mbs fiber co	the number of or each gs you may provide (onnection to all Con ractices changed ov	2 (600 words or le nmunity Ancho er the last quar	10 MB Wireless ess). r Institutes and 10 Mbs wireless connection to all households.			
Ve will be providing 1 a. Have your network b. If so, please descr I/A . Community Anchor Ising the table below, onnected to your netw umulatively). Also inc	Please identify available and t subscribers fo y special offering 00 Mbs fiber co a management p ibe the changes Institutions: please provide a work as a result dicate whether y tion with examp	the number of or each gs you may provide (onnection to all Con ractices changed ov (300 words or less). a list by service area of BTOP funds. Figurour organization is o oles of how institutio Type of Anchor Ar Institution (as	2 (600 words or le nmunity Ancho er the last quar er the last quar of the communues should be currently providen s are using BT re you also the broadband ervice provider for this institution?	10 MB Wireless ess). r Institutes and 10 Mbs wireless connection to all households.			
Ve will be providing 1 a. Have your network b. If so, please descr I/A . Community Anchor Ising the table below, onnected to your netw umulatively). Also inc hort narrative descrip	Please identify available and t subscribers fo o special offering 00 Mbs fiber co a management p ibe the changes lise the changes lise the changes vork as a result dicate whether y tion with examp Service Area (town	the number of or each gs you may provide (connection to all Con ractices changed ov (300 words or less). a list by service area of BTOP funds. Figurour organization is co oles of how institutio Type of Anchor Institution (as defined in your set	2 (600 words or le nmunity Ancho er the last quar er the last quar of the communute ures should be currently provide ns are using B1 re you also the broadband ervice provider for this	10 MB Wireless ess). r Institutes and 10 Mbs wireless connection to all households. ter? Yes Yes No			
Ve will be providing 1 a. Have your network b. If so, please descr I/A . Community Anchor Ising the table below, onnected to your netw umulatively). Also inc hort narrative descrip Institution Name	Please identify available and t subscribers for y special offering 00 Mbs fiber co a management p ibe the changes Institutions: please provide a work as a result dicate whether y tion with examp Service Area (town or county)	the number of or each gs you may provide (connection to all Con ractices changed ov (300 words or less). (300 wor	2 (600 words or le nmunity Ancho er the last quar er the last quar ures should be currently provio ns are using BT e you also the broadband ervice provider for this institution? (Yes / No)	10 MB Wireless ess). r Institutes and 10 Mbs wireless connection to all households. ter? Yes Yes No			

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Institution Name	Service Area (town or county)	Type of Anchor Institution (as defined in your baseline)	Are you also the broadband service provider for this institution? (Yes / No)	Narrative description of how anchor institutions are using BTOF funded infrastructure
Pees-Chu Day Care	Uintah	Other Government Facilities	Y	Daily Operations
Tribe Recreation	Uintah	Other Government Facilities	Y	Daily Operations
Tribal Senior Cener	Uintah	Other Government Facilities	Y	Daily Operations
Ute Security	Uintah	Other Government Facilities	Y	Daily Operations
Ute Tribe HQ	Uintah	Other Government Facilites	Y	Connectivity to all other Tribal departments and CAI's.

Project Indicators (Next Quarter)

Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).
Final reporting and close out.

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

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).

We don't for see any major set backs for this quarter.

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				Actuals from Project Inception through End of Current Reporting 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	\$740,184	\$228,352	\$511,832	\$740,184	\$228,352	\$511,832	\$740,184	\$228,352	\$511,832
b. Land, structures, right-of-ways, appraisals, etc.	\$38,180	\$11,779	\$26,401	\$38,180	\$11,779	\$26,401	\$38,180	\$11,779	\$26,401
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$35,000	\$10,798	\$24,202	\$35,000	\$10,798	\$24,202	\$35,000	\$10,798	\$24,202
e. Other architectural and engineering fees	\$29,500	\$9,101	\$20,399	\$29,500	\$9,101	\$20,399	\$29,500	\$9,101	\$20,399
f. Project inspection fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
g. Site work	\$605,418	\$186,776	\$418,642	\$605,418	\$186,776	\$418,642	\$605,418	\$186,776	\$418,642
h. Demolition and removal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
i. Construction	\$328,560	\$101,363	\$227,197	\$328,560	\$101,363	\$227,197	\$328,560	\$101,363	\$227,197
j. Equipment	\$167,229	\$51,591	\$115,638	\$167,229	\$51,591	\$115,638	\$167,229	\$51,591	\$115,638
k. Miscellaneous	\$106,950	\$32,995	\$73,955	\$106,950	\$32,995	\$73,955	\$106,950	\$32,995	\$73,955
I. SUBTOTAL (add a through k)	\$2,051,021	\$632,755	\$1,418,266	\$2,051,021	\$632,755	\$1,418,266	\$2,051,021	\$632,755	\$1,418,266
m. Contingencies									
n. TOTALS (sum of I and m)	\$2,051,021	\$632,755	\$1,418,266	\$2,051,021	\$632,755	\$1,418,266	\$2,051,021	\$632,755	\$1,418,266
2. Program Income reporting period.	e: Please prov	vide the progr	am income yo	u listed in you	ur application	budget and a	ctuals to date	through the e	end of the
a. Application Bud	get Program I	Income: \$0		b. Pro	gram Income f	to Date: \$32,	400		