AWARD NUMBER: NT10BIX5570145

DATE: 09/28/2013

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

57172. 0072072010					
QUARTERLY PERFORMANCE PROC	GRESS REPOR	T FOR BRO	ADBAN	D INFRASTRUCTURE PROJEC	TS
General Information					
Federal Agency and Organizational Element to Which Report is Submitted	2. Award Identification Nu			3. DUNS Number	
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557014	45		073124562	
4. Recipient Organization					
Ute Indian Tribe 988 South 7500 East, Fort Duch	nesne, UT 84026				
5. Current Reporting Period End Date (MM/DD/YYY	Υ)	6. Is this the	last Repo	rt of the Award Period?	
09-30-2013				• Yes O 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 co	rrect and	complete for performance of activities	for the
7a. Typed or Printed Name and Title of Certifying O	fficial	7c	. Telepho	ne (area code, number and extension)	
Crystal Adams		43	57225141	1	
		7d	. Email Ad	ddress	
		u	itgrants@	utetribe.com	
7b. Signature of Certifying Official		7e	. Date Rep	port Submitted (MM/DD/YYYY):	
Submitted Electronically		0	9-28-2013	3	

RECIPIENT NAME: Ute Indian Tribe

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Project Indicators (This Quarter)

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

Project Complete

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	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
/n	Network Build (all components - owned, leased, IRU, etc)	100	Complete
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).
Complete

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	Completed
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	Completed
Number of new wireless links	180	Complete and running
Number of new towers	0	n/a
Number of new and/or upgraded interconnection points	1	Completed

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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 or less). Providers: Currently the Tribe will be the only entity to act as a last mile provider. However, we are hoping that by building this project that we can encourage others to participate and would welcome other possibilities.
- 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:
- 100 Mbs fiber connection for VOIP, Data, and Internet connectivity.
- 10 Mbs 802.11 wireless connectivity for internet access.
- 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	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	43	Completed
	Subscribers receiving new access	33	All new subscribers are connected using 100MB Fiber
	Subscribers receiving improved access	10	improved access moved from Point to Point 1024K connections to 100 MB Fiber.
	Please identify the speed tiers that are available and the number or subscribers for each	2	100 MB Fiber=43 subscribers 10 MB Wireless=0 new subscribers

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Subscriber Type		Access Type	Total		I	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)			
Residential / Households	Entities passe	ed		180		We have concluded the installation of the wireless network, and are currently serving 180 households.			
	Total subscribers served		180		Services are available				
	Subscribers receiving new access		180		Completed				
	Subscribers r	eceiving improved	d access	0		Completed			
		fy the speed tiers to the number of or each	that are	1		10 Mbs 802.11 Wireless			
Businesses	Entities passe	ed		2		Completed			
	Total subscri	bers served		2		Completed			
	Subscribers r	eceiving new acco	ess	2		Completed			
	Subscribers r	eceiving improved	d access	0		N/A			
		y the speed tiers to the number of or each	that are	2		100 MB Fiber 10 MB Wireless			
8a. Have your network 8b. If so, please describ	management p	oractices changed	l over the			es and 10 Mbs wireless connection to all households. O Yes No			
connected to your netw cumulatively). Also ind	lease provide ork as a result icate whether	t of BTOP funds. I your organization	Figures s is curren	hould be a	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	Institution Name Service Area (town or county) Institution (as defined in your baseline) Type of Anchor Institution (as defined in your baseline) Are you also the broadband service provider for this institution? (Yes / No)								
N/A	N/A	N/A	N	/A		N/A			
Project Indicators (Next Quarter)									
Please describe sign Close Out	 Please describe significant project accomplishments planned for completion during the next quarter (600 words or less). Close Out 								
and "N/A" in the Narrati please insert them at the award inception to the e	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).								

RECIPIENT NAME: Ute Indian Tribe

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			EXTRACTION BITTE. 0/30/2010
	Milestone	Planned Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2a.	Overall Project	100	Completed
2b.	Environmental Assessment	100	Completed
2c.	Network Design	100	Completed
2d.	Rights of Way	100	Completed
2e.	Construction Permits and Other Approvals	100	Completed
2f.	Site Preparation	100	Completed
2g.	Equipment Procurement	100	Completed
	Network Build (all components - owned, leased, IRU, etc.)	100	Completed
2i.	Equipment Deployment	100	Completed
2j.	Network Testing	100	Completed
2k.	Other (please specify): N/A	100	Completed

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).

Completed

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	\$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: 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: \$32,400