



Middle Mile Grant Program Bi-Annual Performance Report Form

This form will serve as a tool to capture the Middle Mile Grant Program Bi-Annual performance Report.

The report for the Middle Mile Grant Program is due on a biannual basis for the periods ending March 31 and September 30 of each year. Reports will be due within 30 days after the end of the reporting period.

Technical reports shall contain information as prescribed in 2 C.F.R. § 200.329 (http://go.usa.gov/xkVgP) and Department of Commerce Financial Assistance Standard Terms and Conditions (dated November 12, 2020), Section A.01.

If you have any further questions, or require technical assistance, please reach out to your assigned Federal Program Officer.

Click on the link below to view the report form.

MMG Bi-Annual Performance Report

National Telecommunications and Information Administration (NTIA) Middle Mile Grant Program Bi Annual Defermence Report

OMB Control No.



| INTERNET FOR ALL | 2 |
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Note: Form instructions and definitions will be created to support the report. Instructional guidance and training will be developed. Numbering to be updated based on final approved form.

| RECIPIENT | NAME: | | | | OMB Control No. |
|------------|---|--|--|--|------------------|
| | | | | | Expiration Date: |
| | | | | | |
| | | | Middle Mile Grant Program Bi-Annual Perf | rmance Report | |
| A. GENERA | INFORMATION | | | | |
| | 1a. Recipient Organization: | | | 1h. Award Identification Number: | |
| | 1b. Recipient Street Address: | | | 1i. Report Date (MM/DD/YYYY): | |
| 3 | 1c. City, Sate, and Zip Code: | | | 1j. Final Report: | Yes No |
| ENER | 1d. Unique Entity Identification (UEI) Number: | | | 1k. Report Period Start Date (MM/DD/YYYY): | |
| o | 1e. Award Start Date (MM/DD/YYYY): | | | 1l. Report Period End Date (MM/DD/YYYY): | |
| | 1f. Award End Date (MM/DD/YYYY): | | | | |
| | 1g. Name of Person Completing Report: | | | | |
| B. PROJECT | NARRATIVE | | | | |
| | Please use the section below to provide a project na This section aims to help reviewers better understa | arrative of the project(s). nd what project is being proposed and steps taken to achieve this goal. | | | |
| З | 2a. A brief description of the recipient's organizatio | n and scope of work/project priorities: | | | |
| RRATI | 2b. An overview of the significant outputs and outo | omes to be accomplished in the project: | | | |
| N L | 2c. How would the project meet the recipient's busi | ness and/or administrative need(s)? | | | |
| PROJE | 2d. Provide an overview of key accomplishments a | hieved for this reporting period on the MM infrastructure project. | | | |
| | 2e. Provide any roadblock experienced during this project (i.e., supply chain, availability of labor). | reporting period impacting the expansion of the MM infrastructure | | | |
| | 2f. Provide any barriers to improving job quality ex | perienced during this reporting period. | | | |

| STRUCTURE MILESTONE CATEGORIES AND PROJECT T | IMELINE | | | | Middle N | Aile Grant Program | | | | | | | | |
|---|---|-------------------------------------|----------------------------------|--------------------------------|---------------------------------|----------------------------------|---------------------------------|-----------------------------------|-------------------------------|--------------------------------|--------------------------|------------------------|----------|--|
| Please use the chart below to provide the start date | and end date of your project. | | | | | | | | | | | | | |
| | PROJECT DURATION | 3a. PROJECT START DATE | 3b. PROJECT END DATE | | | | | | | | | | | |
| OVERALL PROJECT | 0 | | | 1 | | | | | | | | | | |
| Please provide the duration for each milestone cate | gory of your project. The duration sho | uld be based on the start and end d | lates of each category. For exam | ple, if you expect to complet | e a particular milestone within | n two weeks, fill in the total d | ays (14) in the duration field. | | | | | | | |
| Please use the table provided to indicate your EXPER The percentage of completion should be based prim | | | | | emi-annual reporting period. F | or example, if you expect to | omplete a particular milesto | ne within the first three perio | ds of your project, the third | period and all subsequent per | riods should state 100%. | | | |
| Please write "0" in the duration field if your project | | | | | | | | | | | | | | |
| | ANTICIPATED PROJECT MILE | STONES | | Year 1 | L Baseline | Year 2 | Baseline | Year 3 | Baseline | Year 4 | Baseline | seline Year 5 Baseline | | |
| 3c. MILESTONE CATEGORIES | 3d. DURATION (Days) | 3e. START DATE | 3f. END DATE | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | |
| Overall Project | | | | | | | | | | | | | | |
| Environmental Assessment | | | | | | | | | | | | | | |
| Network Design | | | | | | | | | | | | | | |
| Rights Of Way | | | | | | | | | | | | | | |
| Construction Permits And Other Approvals | | | | | | | | | | | | | | |
| ite Preparation | | | | | | | | | | | | | | |
| quipment Procurement | | | | | | | | | | | | | | |
| Network Build (all components - owned, leased, Indefeasible Rights of Use, etc.) | | | | | | | | | | | | | | |
| quipment Deployment | | | | | | | | | | | | | | |
| etwork Testing | | | | | | | | | | | | | | |
| tatus of Procurement | | | | | | | | | | | | | | |
| Other (please specify): | | | | | | | | | | | | | | |
| Please use the table provided to indicate your ACTU The percentage of completion should be based prim | | | | | emi-annual reporting period. F | or example, if you expect to | omplete a particular milesto | I ne within the first three perio | ds of your project, the third | period and all subsequent per | riods should state 100%. | 1 | | |
| Please provide a brief description of the primary act | dvities involved in meeting each milest | one (a single description should be | provided for each milestone, co | vering all periods in years on | e through N). Please write "N/ | A" if your project does not in | lude an activity. If necessary | , please insert additional mile | stones at the bottom of the | chart. Please add additional n | ilestones as applicable. | | | |
| | | | | Y | ear 1 | Ye | ar 2 | Ye | ar 3 | Ye | ar 4 | Ye | ar 5 | |
| | ACTUAL PROJECT MILESTO | DNES | | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 3 | |
| 4a. MILESTONE | | 4b DESCRI | D. PTION | | 1 | | | Actual Milestone Cor | npletion (Cumulative) | | | | | |
| werall Project | | | | | | | | | | | | | | |
| invironmental Assessment | | | | | | | | | | | | | | |
| letwork Design | | | | | | | | | | | | | | |
| ights Of Way | | | | | | | | | | | | | | |
| construction Permits And Other Approvals | | | | | | | | | | | | | | |
| ite Preparation | | | | | | | | | | | | | | |
| quipment Procurement | Inferrally Diskto of the start | | | | | | | | | | | | | |
| Network Build (all components - owned, leased, Ind | rereasible Rights of Use, etc.) | | | | | | | | | | | | | |
| Equipment Deployment | | | | | | | | | | | | | | |
| letwork Testing | | | | | | | | | | | | | | |
| itatus of Procurement | | | | | | | | | | | | | | |
| Other (please specify): | | | | | | | | | | | | | | |

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| | | subcontract from the eligible entity and a description of the specific project for which grant funds were p baward associated with grant, approved grant funds, and expenditures to date. | rovided. | <u> </u> | | | | | | |
|---------------|---------------------|--|---------------------|--|---|--------------------------------|----------------------|-----------------------------|--------------------------------|---------------------------|
| | 5a. Project Name | Sb. Project Description | 5c. Subrecipient | 5d. Minority Business Enterprise (MBE) | 5e. Women's Business Enterprise (WBE) | 5f. Labor Surplus Area Firm | 5g. Awarded Funds | 5h. Expenditures to Date | 5i. Remaining Grant Balance | 5j. % of work complete |
| Subawards | | | | Yes | Yes | Yes | | | | |
| recipient and | | | | Yes | Yes | Yes | | | | |
| Sub | | | | Yes | Yes | Yes | | | | |
| | | | | Yes | Yes | Yes | | | | |

D. INFRASTRUCTURE BUDGET EXECUTION DETAILS

lease provide details below on your total budget and total fund expended to date for each budget element, including detailed disbursements of both matching funds approved and federal funds obligated from project inception through end of this reporting period. Figures should be reported cumulatively from award inception to the end of the applicable reporting period.

| | 6a. Projected Budget Element | 6b. Federal Funds | 6c. Non-Federal Funds | 6d. Total Project Budget | 6e. Total Federal Funds Expended to Date | óf. Total Non-Federal Funds Expended to Date | óg. Total Funds Expended | 6h. Percent of Federal Funding Expended to Date (Cumulative) |
|----|--|----------------------|--------------------------|-----------------------------|---|---|-----------------------------|--|
| 2 | Administrative and legal expenses | \$ - | \$ - | \$ - | \$ - | s - | \$ - | 0% |
| | Land, structures, rights-of way, appraisals, etc. | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Relocation expenses and payments | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Architectural and engineering fees | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Other architectural and engineering fees | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| 5 | Project inspection fees | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Site work | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Demolition and removal | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Construction | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Equipment | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Miscellaneous | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Subtotal | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Contingencies | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| | Totals | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0% |
| 1M | UNITY BENEFIT AGREEMENT | | | | | | | |
| | As stated in the MM Grant Program NOFO a Community Benefit Agreement (CBA) is an ag Please use the fields below to state the Community Benefit Group and Developer Name a | | | | | | | |

unity Agree

nent 7a. Community Benefit Group Name: Please provide the name of the Community Benefit Group

Community Benefit Agreement 7b. Developer Name: Please provide the name of the Developer

P.C. Community Benefit Group and Developer Partnership: Please describe in the space below the nature of the partnership and how the MM grant funds being used are assisting to provide community support for the infrastructure project.

| CLIMATE | RESILIENCE | | | |
|--------------------|--|---|--|--|
| | Recipients must demonstrate that they have sufficiently accounted for current and future weather and climate related risks to infrastructure for broadband might be expected to have a lifetime of 20 years or more, recipients must account not only for co | onew MM infrastructure projects. At present, weather and climate related risks to broadband networks include wildfires, extreme her urrent risks but also for how the frequency, severity, and nature of these extreme events may plausibly evolve as our climate continue | at and cold, inland and coastal flooding, and the extreme winds produced by weather events such as tornadoes, hurricanes, and othe s to change over the coming decades. | er weather events. Because retrofitted and new |
| | Climate Resiliency Risk Mitigation | | | |
| | This purpose of this section is for the recipient to demonstrate that they have sufficiently accounted for current and future we | eather and climate-related risks to new MM infrastructure projects. In particular, each recipient should demonstrate how they've addr | ressed the known and identifiable risks of current and future projected weather and climate conditions through measures such as (br | ut not limited to) choice of a technology platform |
| | | opriate), retrofitting, or hardening of existing assets, and use of network redundancy to safeguard against threats to infrastructure. ture weather and climate related risk? If so, please provide the date of the screening and provide related documentation as an attact | honort to this sonart | |
| | our. Here any geographic areas identified for uns reporting period subject to an initial and/or opdated nazard screening for id | ומוים שפמוובי מוס כוווומני ובומנים וזאל זו אס, picase provide the uate of the screening and provide related upcamentation as an attact | innent to this report. | |
| | | | | |
| | 8b Climate Resilience Category | 8c. Date of Most Recent Hazard Screening | 8d. Name and Title of Representative Completing Most Recent Hazard Screening | 8e. Date of Report Completion |
| | | | | |
| | | e a delevant delevant dela secolitzare a fete a static selle to for the seture destand (the collidities and secolitzed as the total total | and security (finally a subsequence) and stranged as four large and at the subset (security)? | |
| | 87. Identified Risk: For your MM project, what are the potential weather and climate hazards that may be most important to | be addressed that could impact the resiliency of the middle mile infrastructure deployed (i.e. wildfires, extreme heat and cold, inland | and coastal flooding, extreme winds: tornadoes, hurricanes and other weather events)? | |
| | | | | |
| | 8. Weather and Climate Hazards: Were any significant climate or weather bazards experienced during this reporting period (| (.e., floods, tornados) impacting infrastructure buildout or service? Briefly describe how you monitored for weather and climate cause | d issues for the reliability of the system. If so, please provide the date of the disaster, incation and backup documentation related (i | e news articles) |
| CLIMATE RESILIENCE | | | | |
| TE R | 8h. Risks to Deployment of New Infrastructure: Has the team identified any risks impacting the deployment of new or repaire | ed infrastructure due to current and future weather and climate-related threats during this reporting period? | | |
| CLIMA | | | | |
| | Risk Mitigation: How will the project avoid and/or mitigate the risk identified? If not applicable, please explain why. | | | |
| | | | | |
| | | | | |
| | 8]. Additional Information: Is there any additional information you would like to share during this reporting period that the gr | rant team should be aware of regarding the management of sustainable climate resiliency for your MM project? | | |
| | | | | |
| | R. Additional Resources Has the team utilized the available resources to assist with mitigation and long-term planning efforts for this reporting period 2018 Autional Clinnake Summaries NOAX 5 2015 Sector Database NQAX Storms Event Database NQAX Storms Event Database | | | |
| | | | | |
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| G. Workfo | rce | | | | | | | <u>.</u> , 1 | <u> </u> | <u>.</u> | | | | | | | | | | | | |
|----------------------------------|---|--|---------------------------------------|---------------------------------------|-----------------|---------------------------------|------------------------------------|----------------|--|----------------------|-------------------|---------------------------------|------------------------------------|--|----------------------|----------------|---------------------------------|------------------------------------|---------------|--------------------------------------|------------|--------|
| UACT | For projects receiving over \$5,000,000 (based on exp | pected total cost), as determined by the | e U.S. Secretary of Labor by subchap | oter IV of chapter 31 of title 40, Un | ited States Cod | e (commonly | known as the "I | Davis-Bacon A | ct"), all laborer | and mechanic | s employed by | contractors ar | nd subcontractors in the pe | rformance of suc | h project are pa | id wages at ra | tes not less tha | an those prevail | ing. | | | |
| ACON FICAT) | Davis-Bacon Act Certification | | | | | | | | | | | | | | | | | | | | | |
| DAVIS-BACON ACT CERTIFICATION | 9a. Does the recipient have access to the informatic project are paid wages at rates not less than those project are paid wages at rates not less than those project are paid wages at rates not less than those project are paid wages at rates not less than those project are paid wages at rates not less than those project are paid wages at rates not less than those project are paid wages at rates not less than the paid wages at rates not less than those project are paid wages at rates not less than the paid wages at rates not less the paid wages at rates not | on requested (all laborers and mechani prevailing?) | cs employed by contractors and su | bcontractors in the performance of | of such | Yes | | No | | | | | | | | | | | | | | |
| | Local Hire Prioritization and Impact | | | | | | | | | | | | | | | | | | | | | |
| | Local hiring is a goal or requirement to hire people | who live close to the place of work. Thi | s aim is often more specifically stru | ctured as a requirement for contr | actors awarded | l certain type | s of publicly fun | ded projects | to recruit a cert | ain proportion | of the people | working on the | e project from a particular | area. Please pro | vide all direct h | res and contr | actors support | ing the MM Inf | rastructure p | oject. | | |
| | Please use the table below to describe how the pro | ject prioritizes local hiring. | | | | | | | | | | | | | | | | | | | | |
| MP ACT | | | | | | | | | | Nur | nber of Hires | | | | | | | | | | | |
| AND IMP | | | | | | | | | | Ra | ce/Ethnicity | | | | | | | | | | | |
| 2 | | | 9b. | | | | | | | | | | 9c. Non-Hispanic/Non-Latin | 0 | | | | | | | | |
| TIZATION | Hires by Race, Ethnicity and Gender | | 9b. Hispanic or Latino | | | | 9c- Me | 1. en | | | | | 9c-2. Women | | | | | 9c- X | 3. | | | |
| PRIORI | | 9h-1. | 9b-2. | 9b-3. | | Black or | Native Hawaiian or | | Native | Two or More | White | Black or | Native Hawaiian or | Native | Two or More | | Black or | Native Hawaiian or | | Native | Two or | Totals |
| 뿔 | | 9b-1. Men | Women | x | White | African American | Pacific Islander | Asian | American or Alaska Native | Races | White | African American | Pacific Asian Islander | American or Alaska Native | Pacor | White | African American | Pacific Islander | Asian | American o Alaska Nativ | More Pacer | |
| LOCALI | Number of Local Direct Hires Number of Non-Local Direct Hires | | | | | | | | | | | | | | | | | | | | | 0 |
| | Percentage of Local Direct Hires on Award | 0% | 0% | 6 0% | 0% | 0% | 0% | 09 | i 0% | 0% | 0% | 0% | 5 0% I | 0% 09 | 6 0% | 0% | 0% | 0% | 09 | | 0% 0% | |
| | Number of Local Subcontractors Number of Non-Local Subcontractors | | | | | | | | | | | | | | | | | | | | | 0 |
| | Number of Non-Local Subcontractors Percentage of Local Subcontractors on Award | 0% | . 0% | 0% | 0% | 0% | 0% | 09 | 5 0% | 0% | 0% | 0% | 5 0% I | 0% 09 | 6 0% | 0% | 0% | 0% | 09 | | 0% 0% | 0 |
| | Davis-Bacon Act Wages | | | | | | | | | | | | | | | | | | | | | |
| | Please confirm if wages are at least prevailing* | | | | | | | | | | | | | | | | | | | | | |
| s | *As stated in the MM NOFO as determined by the U | I.S. Secretary Labor in accordance with | subchapter IV of chapter 31 of title | 40, United States Code (commonly | known as the ' | "Davis-Bacon | Act"), for the co | rresponding | lasses of labor | ers and mechar | nics employed | on projects of a | a character similar to the co | ontract work in th | e civil subdivisio | n of the State | (or the Distric | t of Columbia) ii | n which the w | ork is to be pe | rformed. | |
| WAGE | | | | | | | | | | | | | | | | | | | | | | |
| DAVIS-BACON WAGES | 10a. Are wage rates at least the Davis-Bacon prevaili | ing wage for all laborers? | | | Yes | | No | | 10c. Are wage | rates at least t | he prevailing w | age for all med | chanics? | | Yes | | No | | | | | |
| AVIS-B | 10b. Please cite your source of how this information | was gathered (for 10a). | | | | | | | 10d. Please cit | e your source o | of how this info | ormation was g | athered (for 10c). | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | 10e. If you answered "No" to either 10a. or 10c., ple | ase provide an attachment reporting th | e wages and benefits of workers or | the project by job classification, a | ind whether the | ose wages are | less than the p | revailing wag | 2. | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | |
| | Workforce Demographic Data | | | | | | | | | | mber of Jobs | | | | | | | | | | | |
| APHICS | | | | | | | | | | | ce/Ethnicity | | | | | | | | | | | |
| DGRAP | | | | | | | Ka | ce/ echinicity | | 11b. | | | | | | | | | | | | |
| DEM | Jobs by Race, Ethnicity and Gender | | 11-a. Hispanic or Latino | | | | 11b Me | -1. | | | | | Non-Hispanic/Non-Latin 11b-2. | 0 | | | | 11b | | | | |
| (F ORCI | | | | | | Direker | Native | 2n | Netice | | | Dia di an | Women Native | Notice | 1 | _ | Black as | X Native | | Mathia | — | Totals |
| WOR | | 11a-1. Men | 11a-2. Women | 11a-3. X | White | Black or African American | Hawaiian or Pacific Islander | Asian | Native American or Alaska Native | Two or More Races | White | Black or African American | Hawaiian or Pacific Islander | Native American or Alaska Native | Two or More Races | White | Black or African American | Hawaiian or Pacific Islander | Asian | Native American o Alaska Nativ | | |
| | Jobs Created | | | | | | isianuei | | | | | | Islander | | | | | Islander | | | + | 0 |
| | Jobs Retained | | | | | | | | | | | | | | | | | | | | | 0 |
| ORCE | 12-a. Does this project include some workforce elem | nents that are unionized? | | | Yes | | No | | 12-c. Does you | r MM project i | utilize a project | t labor agreem | ent? | | Yes | | No | | | | | |
| UNIONIZED | 12-b. Are workers provided access to union educato | | during the work day? | | Yes | | No | | 12-d. Did worl | ers receive ad | ditional inform | ation or trainir | ng about their workplace ri | ghts in addition | Yes | | No | | | | | |
| 25 | 12-0. Mile workers provided access to union educato | sy organizers on employer property or | ouring one work day: | | res | Ш | NO | | to already req | uired notice po | ostings? | | | | res | | NO | | | | | |

National Telecommunications and Information Administration (NTIA) Middle Mile Grant Program Workforce Continuity Plan ational Labor Relations Act (29 U.S.C. 158 (f) As stated in the MM NOFO, if a recipient has not provided a certification that a project either will use a unionized project workforce or included a project labor agreement, meaning a pre-hire collective bargaining agreement consistent with section 8(f) of the National Labor Relations Act (29 U.S.C. 158 (f)), then the recipient must provide a project workforce continuity plan. Workforce Continuity Plan 12.3. Types describe the steps taken to ensure the project has ready access to a sufficient supply of appropriately skilled and unskilled labor to ensure construction is completed skillfully throughout the project's life (as required in Section III.B of the MM NOFO). As stated in the MM NOFO, the middle mile grant recipient is capable of carrying out the proposed project in a completent manner, including a plan to attract or retain an appropriate For your MM project, please provide a brief description of efforts made to attract, train or retain a skilled and credentialed workforce. As the beam offeed any of the following resources to assist with maintaining a sufficient supply of appropriately skilled labor force for this reporting period? If so, which resources (please provide a brief description of any of the following that apply): Network Training Registered Approximation (Registered Approximation): Labor-Management Patricerbips Labor-Management Patricerbips Labor-Management Patricerbips 13b. Please describe below, the steps taken to minimize risks of labor disputes and disruptions that would jeopardize the timeliness and cost-effectiveness of completing the MIM project. WORKFORCE CONTUNITY PLAN NATIONAL LABOR RELATIONS ACT 13c. Please describe below the steps to ensure a safe and healthy workplace that avoids delays and costs associated with workplace illnesses, injuries, and fatalities. 13d. For your MM project, please provide a brief description below of efforts made to ensure a safe and healthy workplace. has the traum effect any of the following resources to assist with maintaining a safe and healthy workplace for this reporting period? If so, which resources (please provide a brief description of any of the following that apply): term training and/or Licensure Requirements for all relevant works (e.g., OSHA 10, OSHA 30, confined space, traffic control, or other training required of workers employed by contractors) subser raised by workplace safety committees and their resolutions 13e. Please provide the name(s) below of any subcontracted entities performing work on the project, and the total number of workers employed by each entity. 13e-1. racted Entity Performing Work 13e-2. Total Number of Workers within this Subcontract 13e-3. Job Categories of Workers Supporting Project within this Subcontract Name of Subcontr

I. ANCHOR INSTITUTIONS

13f. Please describe below the steps taken to ensure that workers on the project receive wages and benefits sufficient to secure an appropriately skilled workforce in the context of the local and regional labor market.

| | Please provide Anchor Institution (AI) data for the current period only (not cumulative). Ple | ase add rows as needed. | | | | | |
|----|---|-------------------------|--------------|---------------|------------------------------------|--|--|
| | 14a. Anchor Institution Name | 14b. Street Address | 14c. City | 14d. State | 14e. Type of Anchor Institution | 14f. Interconnection within 1,000 Feet of AI Enabling Gig Symmetrical Service | 14g. Narrative Description of how the Anchor Institution may benefit from the Grant Funded Infrastructure |
| s | | | | | | | |
| No | | | | | | | |
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| RROADBAND ACCESS KEY INDICATOR: SUBSCRIBERS AND SPEED | | | | | | | | | | | | | | |
|---|--|------------------------------|--------------------------------|-------------------------------|-----------------------------|------------------------------|-------------------------------|-------------------------------|--------------------------------|--------------------------------|----------|--|--|--|
| Please use the following table to provide anticip | pated key indicators with the projected totals for each beneficiary category, access type and speed category for | our infrastructure service o | r project. Except as indicated | I, information should be repo | ted cumulatively from award | inception through the end of | the semi-annual period for Se | emi-Annual Indicators. Please | write "N/A" if your project do | es not include this indicator. | | | | |
| | PROJECTED NUMBER OF SUBSCRIBERS AND SPEED | Ye | ar 1 | Ye | ar 2 | Ye | ar 3 | Ye | ar 4 | Ye | ar 5 | | | |
| SUBSCRIBER TYPE | ACCESS TYPE | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | | | |
| speer | 15a-1. Total number of Als passed | | | | | | | | | | | | | |
| ts and | 15a-2. Number of Als within 1,000 feet of the middle mile infrastructure | | | | | | | | | | | | | |
| 3 15a, Anchor Institutions (Als) | 15a-3. Total number of AIs served | | | | | | | | | | | | | |
| 2 13a. Anchor Institutions (Als) | 15a-4. Als with new access | | | | | | | | | | | | | |
| BERO | 15a-5. Als with improved access | | | | | | | | | | | | | |
| | 15a-6. Total number of Als served with speeds of at least 1/1Gbps | | | | | | | | | | | | | |
| DECTE | 15b-1.Total number of broadband wholesalers or last mile providers served | | | | | | | | | | | | | |
| 2X | 15b-2. Broadband wholesalers or last mile providers with new access | | | | | | | | | | | | | |
| 15b. Broadband Wholesalers or Last Mile | 15b-3. Broadband wholesalers or last mile providers with improved access | | | | | | | | | | | | | |
| Providers | 15b-4. Total number of broadband wholesalers or last mile providers offering speeds of at least 25/3 Mbps | | | | | | | | | | | | | |
| | 15b-5. Total number of broadband wholesalers or last mile providers offering speeds of at least 100/20 Mbps | | | | | | | | | | | | | |
| | 15b-6. Total number of broadband wholesalers or last mile providers offering speeds of at least 1/1 Gbps | | | | | | | | | | | | | |

K. BROADBAND ACCESS KEY INDICATOR: NETWORK BUILD PROGRESS

Please use the following table to provide anticipated key indicators and progress of your infrastructure project. Except as indicated, information should be reported cumulatively from award inception through the end of the semi-annual period. Please write "N/A" if your project does not include this indicator.

| | NETWORK BUILD PROGRESS | Yei | r 1 | Ye | ar 2 | Ye | ar 3 | Year 4 | | Year 5 | |
|--------|--|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| 52 | KEY INDICATOR | Period 1 | Period 2 |
| OGRES | 16a. Total of new fiber miles (aerial or buried) | | | | | | | | | | |
| ILD PR | 16b. Total of fiber miles leased | | | | | | | | | | |
| ORK BU | 16c. Total of existing fiber miles upgraded | | | | | | | | | | |
| NETWO | 16d. Total of new microwave links | | | | | | | | | | |
| | 16e. Total of new towers | | | | | | | | | | |
| | 16f. Total of new interconnection points | | | | | | | | | | |
| | 16g. Total of signed agreements with broadband wholesalers or last mile providers | | | | | | | | | | |
| | 16h. Total of potential agreements (i.e., agreements currently being negotiated) with broadband wholesalers or last mile providers (This Total should NOT be reported cumulatively) | | | | | | | | | | |

L. QUANTIABLE METRICS

Quantifiable Metrics - Section designed to assist with reporting and audit purpose to quantify how much progress was made and track the location of where the progress was made.

| | | Ye | ar 1 | Yei | ar 2 | Ye | ar 3 | Yea | ar 4 | Yes | ar 5 |
|-------|--|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | 17a. Fiber Optic Based | Period 1 | Period 2 |
| | 17a-1. Is the fiber a buried/aerial or undersea application? | | | | | | | | | | |
| | 17a-2. Number of strands deployed | | | | | | | | | | |
| | 17a-3. Number of miles of buried fiber deployed | | | | | | | | | | |
| BASED | 17a-4. Number of miles of aerial fiber deployed | | | | | | | | | | |
| OPTIC | 17a-5. Estimated capacity of fiber (i.e. throughput) | | | | | | | | | | |
| FIBER | 17a-6. Deployment cost per mile of buried fiber optics | | | | | | | | | | |
| E | 17a-7. Deployment cost per mile of aerial fiber optics | | | | | | | | | | |
| | 17a-8. Total Spent on Buried Fiber Deployment this reporting period | | | | | | | | | | |
| | 17a-9. Total Spent on Aerial Fiber Deployment this reporting period | | | | | | | | | | |
| | 17a-10. Total spent on Fiber Deployment this reporting period | | | | | | | | | | |
| | 17a-11. Please provide any additional information about the Fiber Optic deployment (200 words or less) | | | | | | | | | | |
| | 17a-12. Please provide the digital mappings (e.g., CAD, Revit, KMZ, KML) for the microwave nodes created during this reporting period. | | | | | | | | | | |

National Telecommunications and Information Administration (NTIA)

| | | Nationa | ii Telecommunications Middle N | and information Adm file Grant Program | nistration (NIIA) | | | | | | | | | |
|---|---|-----------------------------|-----------------------------------|---|----------------------------------|---------------------------------|---------------------------------|---------------------------------|------------------------------|----------|----------|--|--|--|
| | | Ye | ar 1 | Ye | ar 2 | Yea | er 3 | Yea | ar 4 | Ye | ar 5 | | | |
| | 17b. Microwave Based | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | | | |
| | 17b-1. How many microwave nodes have been deployed? | | | | | | | | | | | | | |
| | 17b-2. How many microwave nodes are operating for reporting period? | | | | | | | | | | | | | |
| ED. | 17b-3. Installation cost per microwavable node | | | | | | | | | | | | | |
| VEBA | 17b-4. Number of new towers built to support microwave structure | | | | | | | | | | | | | |
| MICROWAVE BASED | 17b-5. If applicable, what type of tower was constructed (a) Monopole (b) Self-Support, or (c) Guyed during this reporting period? | | | | | | | | | | | | | |
| MIC | 17b-6. Average cost per tower installed | | | | | | | | | | | | | |
| | 17b-7. Total spend on Tower deployment this reporting period | | | | | | | | | | | | | |
| | 17b-8. Total spend on microwave deployment this reporting period | | | | | | | | | | | | | |
| | 176-9. If you answered "other" to question 5a.6 or if it is a combination of multiple types, please provide a detailed narrative description detailing what type of tower or what combination of towers is used for the project and the their associated costs. (200 words or less). | | | | | | | | | | | | | |
| | 17b-10. Please provide the digital mappings (e.g., CAD, Revit, KMZ, KML) for each new aerial fiber and buried fiber equipment installed during this reporting p | eriod. | | | | | | | | | | | | |
| | | Ye | ar 1 | Ye | ar 2 | Yea | ır 3 | Yea | ar 4 | Ye | ar 5 | | | |
| SATELUTE | 17c. Satellite | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | Period 1 | Period 2 | | | |
| | 17c-1. What satellite provider is being used? | | | | | | | | | | | | | |
| | 17c-2. What is the estimated capacity of the satellite link (i.e. throughput)? | | | | | | | | | | | | | |
| s | 17c-3. What is the associated cost to use this satellite service? | | | | | | | | | | | | | |
| | 17c-4. Please provide any additional information about the Satellite deployment (200 words or less) | | | | | | | | | | | | | |
| | 7c-5. Please provide the digital mappings (e.g., CAD, Revit, KMZ, KML) for each new aerial fiber and buried fiber equipment installed during this reporting period. | | | | | | | | | | | | | |
| | Certifications 18. Please provide certification evidencing compliance with Federal labor and employment laws along with the requirements of Infrastructure Investment and Jo | bs Act and Middle Mile Gran | t Program, for the bi-annual p | period for which this report is | being filed. | | | | | | | | | |
| SNC | | | | | | | | | | | | | | |
| CERTIFICATIONS | 19. Please provide certification evidencing compliance with the Build America, Buy America Act. The Build America, Buy America Act requires that all of the iron, | | . To shadle a bask was limbard as | <i>4</i> 1 | | | مراجع والماليات ومعارفات ومراجع | and and in the United States of | along a confirm to according | | | | | |
| CERTI | 17. Piesse provide certification evidencing compliance with the build America, buy America Act, the build America, buy America Act, requires that all of the iron, | steer, manufactured product | s (including but not limited to | inder-optic communications | actilities), and construction ma | ateriais used in the project or | other eligible activities are p | roduced in the United States u | niess a waiver is granted. | | | | | |
| | | | | | | | | | | | | | | |
| ч | 20. I certify to the best of knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award do | ocuments. | | | | | | | Γ | | | | | |
| ANNUA NON | 20a. Typed or Printed Name and Title of Authorized Certifying Official: | | | | | | 20c. Telepho extension): | ne (area code, number and | | | | | | |
| IFICAT | | | 204 5 1 4 | dener | | | | | | | | | | |
| GRANT PROGRAM BI-ANNUAL REPORT CERTIFICATION | 20b. Signature of Certifying Official: | 20d. Email Address: | | | | | | | | | | | | |
| MM GRANT REPOI | | | | | | | 20e. Date: | | | | | | | |