Performance Progress Report							2. Award Or Grant Number 21-50-M09061 4. Report Date (MM/DD/YYYY) 10-19-2011			
Commonwealth of	Kentucky						N/A		,	
3. Street Address							8. Final Rep	oort?	9. Report Frequency	
700 Capitol Avenue,							I () Yes		QuarterlySemi Annual	
5. City, State, Zip Code								No Annua		
Frankfort, KY 406		.							◯ Final	
7. Project / Grant Period 7a. 7b. Start Date: (MM/DD/YYYY) End Date: (MM/DD/YYYY) Reporting Period End Date:					:	9a. If Other, please describe:				
			9-30-2011 N/A							
10. Broadband	Mapping		10a. Provider Table	1						
Number of Providers Identified	Number of Providers Co	ntacted	Number of Agreemen Reached for Data Sha		Number of Partial Data Sets Received	Numbe	r of ete Data Sets	Numbe Data S	er of ets Verified	
0	0	nacica	0	aring	0	0	ne Data Octo	0	Cts vermed	
	tting the require	1 PROV	/IDER DATA by using the	ne Ex	cel spreadsheet provid	ded by the	SBDD grants	s office?	OYes No	
			h any providers that ind							
			with each of these prov							
			provided information Supplemental Answ			enges exp	perienced w	ith each	of the providers.	
	cting data throu undertaken in tl		r means (e.g. data extra e	action	n, extrapolation, etc), p	lease desc	cribe your pro	gress to	date and the relevant	
			provided additional v			ng with tl	ne progress	and act	ivities in collecting the	
10f. Please describe	e the verification	activitie	es you plan to implemer	nt						
inputs being transr by carriers and/or s calculation tool to p in provider wireless of provider tower a	nitter location supplemented provide estima s service area nd antenna da A. New avenu	and, w by dat tes of f covera ta, dep es for a	a available from publ fixed wireless broadb age. The Prior Mappi bloyment of this audit acquiring the needed	on spic we and and of the of t	pectrum power level- beb sites and other so coverage areas. Thi lata is also used as a Vireless Broadband	s and oth ources. [is datase a validation Availabili	er relevant Data will the t is used as on source fo ty is planne	transmis n be inp a sourc or gap ai d before	ession factors provided ut to a contour e to determine gaps nalysis. Due to a lack the April 1, 2012	
			mitted a white paper data submission to tl			EVELOPN	IENT & VAI	LIDATIC	N	
10g. Have you initia										
For more details, p	lease refer to	the Q3	Supplemental Answ	ers [Document.					
10i. If verification ac	tivities have not	been ir	nitiated please provide a	a proj	ected time line for beg	inning and	I completing s	such activ	vities	
Evaluation of repor	rted fixed wire	ess co	verage utilizing conto	our c	alculation tools, as o	described	in 10f abov	e, will a	lso be implemented.	

Deployment of these verification activities is planned for the April 2012 NTIA submittal.										
Staffing										
10j. How many jobs have been created or retained as a result of this project?										
3.15										
	i.iU									
10k. Is the project currently fully staffed? Yes No										
10l. If no, please explain how any lack of staffing may impact the project's time line and when the project will be fully staffed We believe that full staffing was achieved during the 3rd Quarter 2010. At this time, university team validators have concluded their										
involvement. Temporary staff hired by our mapping contractor, Michael Baker Inc., is no longer being utilized. 10m. When fully staffed, how many full-time equivalent (FTE) jobs do you expect to create or retain as a result of this project?										
7.54										
10n. Staffing Table										
		Job Title					FTE %	Date of Hire		
Administrative Assista	ant						1	02/01/2010		
Assistant Project Man	ager						1	02/01/2010		
Civil Engineer		66	02/01/2010							
GIS Associate		52	02/01/2010							
GIS Specialist I								02/01/2010		
GIS Specialist II		49	02/01/2010							
GIS Technician	3	02/01/2010								
Senior Software Deve		31	02/01/2010							
Technical Manager								02/01/2010		
Technical Specialist								02/01/2010		
Technical Consultant								02/01/2010		
	Add Row Remove Row									
Sub Contracts 10o. Subcontracts Table										
Name of Subcontractor	PED Issued Contract						Funds In-Kind Funds			
Michael Baker Inc.,	Data Collection/ Validation Services	Y	Υ	02/01/2010	12/31/2014	3,674,747	0			
Murray State University	Validation Services	N	Υ	06/15/2010	06/30/2011	/30/2011 399,762 0				
Kentucky Area Development Districts				11/01/2011	12/31/2014	450,000 0				
Council on Post Secondary Education Develop/Manage Regional Planning groups; Survey N N 11/01/2011 12/31/2014 150,000						0				
Add Row						Pon	nove Row			

Performance Progress Report OMB Approval Number: 0660-0034 Expiration Date: 12/31/2013

Funding

10p. How much Federal funding has been expended as of the end of the last quarter? \$1,667,189 10q. How much Remains? \$3,635,528 \$825,675 10r. How much matching funds have been expended as of the end of last quarter? \$500,513 10s. How much Remains? 10t. Budget Worksheet Federal Federal Proposed Total Matching Funds **Total Funds** Mapping Budget Element Funds Funds In-Kind Budget Expended Expended Expended Granted Personal Salaries \$56,943 \$798,048 \$854,991 \$212,100 \$212,100 Personnel Fringe Benefits \$19,038 \$96,826 \$115,864 \$0 \$35,614 \$35,614 \$0 \$6,000 \$6,000 \$0 \$1,605 \$1,605 Travel Equipment \$0 \$16,956 \$16,956 \$0 \$0 \$0 \$3.883 \$3.883 \$0 \$0 \$0 \$0 Materials / Supplies Subcontracts Total \$4.674.509 \$0 \$4,674,509 \$1,667,189 \$1,667,189 \$0 Subcontract #1 \$3,674,747 \$0 \$3,674,747 \$1,267,427 \$0 \$1,267,427 Subcontract #2 \$399,762 \$0 \$399,762 \$399,762 \$0 \$399,762 Subcontract #3 \$450,000 \$0 \$450,000 \$0 \$0 \$0 Subcontract #4 \$150,000 \$150,000 \$0 \$0 \$0 \$0 Subcontract #5 \$0 \$0 \$0 \$0 \$0 \$0 Construction \$0 \$0 \$0 \$0 \$0 \$0 Other \$552,227 \$408,358 \$960,585 \$0 \$247,311 \$247,311 **Total Direct Costs** \$5,302,717 \$1,326,188 \$6,628,905 \$1,667,189 \$500,513 \$2,167,702 **Total Indirect Costs** \$0 \$0 \$0 \$0 \$0 \$0 \$5,302,717 \$500.513 \$2.167.702 **Total Costs** \$1.326.188 \$6.628.905 \$1.667.189 % Of Total 80 20 100 77 23 100 Hardware / Software 10u. Has the project team purchased the software / hardware described in the application? Yes • No 10v. If yes, please list N/A 10w. Please note any software / hardware that has yet to be purchased and explain why it has not been purchased N/A 10x. Has the project team purchased or used any data sets? Yes No 10y. If yes, please list N/A

10z. Are there any additional project milestones or information that has not been included? Yes No

10aa. If yes, please list						
N/A						
10bb. Please describe any	challenge or obstacle	that you have encou	ntered and detail th	ne mitigation strategion	es the project team i	s employing
As previously reported, to community anchor institution and requests for data has easy as possible for entities to comply. We were sources for obtaining if are currently working with have identified key stake yet been successful in a sharing data regarding be	utions (CAI). We have been sporadic are entities to supply us well continue to work on formation from our the technology teal eholders in the Dept. ctually acquiring any	ave identified apprond undependable. with the requested closely with our stack. For Q3, we am at the Kentucky of Education and data. We conduction	opriate stakehold We continue to we linformation. However, we have focused our pepartment of E stressed the mutted initial meeting.	ers in the various a vork with our subco wever, we have no ubcontractors to de r efforts on the colle Education in helpin ual benefit of colle gs with them to est	areas however resontractors to develot found the key to evelop other metholection of K-12 public lead this importacting this informat ablish timelines ar	sponses to queries op tools to make it motivating these ods and identify blic schools. We ant effort. While we ion, we have not
10cc. Please provide any c	other information that ye	ou think would be us	eful to NTIA as it as	ssesses your Broadb	oand Mapping Projec	zt
N/A						
11. Broadband Pla	anning					
11a. Please describe progr description of each m	ress made against all g ajor activity / milestone				roject Plan. Be sure	to include a
After some organizations please refer to the Q3 Si	upplemental Answer	s Document.				
Please refer to the answ						
11c. Does the Project Tea	m anticipate any chang	ges to the project pla	n for Broadband Pl	anning? •Yes	○ No	
11d. If yes, please describe be implemented	e these anticipated cha	inges. Please note t	hat NTIA will need	to approve changes	to the Project Plan b	efore they can
We believe that some m supplemental document	•	to be alterered, re	moved or moved	. We have describe	ed this is more def	tail in our
Funding						
11e. How much Federal fu	nding has been expend	ded as of the end of	the last quarter? \$0) 11f.	How much Remains	? \$0
11g. How much matching f	unds have been expen	nded as of the end of	last quarter? \$	0 11h.	. How much Remain	s? \$0
11i. Planning Worksheet						
Personal Salaries	\$0	\$0	\$0	\$0	\$0	\$0
Personnel Fringe Benefits	\$0	\$0	\$0	\$0	\$0	\$0
Travel	\$0	\$0	\$0	\$0	\$0	\$0
Equipment	\$0	\$0	\$0	\$0	\$0	\$0
Materials / Supplies	\$0	\$0	\$0	\$0	\$0	\$0

11i. Planning Worksheet						
Subcontracts Total	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #1	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #2	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #3	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #4	\$0	\$0	\$0	\$0	\$0	\$0
Subcontract #5	\$0	\$0	\$0	\$0	\$0	\$0
Construction	\$0	\$0	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0	\$0	\$0
Total Direct Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Indirect Costs	\$0	\$0	\$0	\$0	\$0	\$0
Total Costs	\$0	\$0	\$0	\$0	\$0	\$0
% Of Total	0	0	0	0	0	0

Additional Planning Information

11j. Are there any additional project milestones or information that has not been included?

No

11k. Please describe any challenge or obstacle that you have encountered and detail the mitigation strategies the Project Team is employing

N/A, see above and supplemental document questions 11a.

11I. Please provide any other information that you think would be useful to NTIA as it assesses your Broadband Mapping Project

N/A

12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose set forth in the award documents.						
12a. Typed or Printed Name and Title of Authorized Certifying Official	12c. Telephone (area code, number, and extension)					
Steve Landers	(
	12d. Email Address					
	steve.landers@ky.gov					
12b. Signature of Authorized Certifying Official	12e. Date Report Submitted (Month, Day, Year)					
Submitted Electronically	10-31-2011					