AWARD NUMBER: NT10BIX5570094

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013 DATE: 04/23/2012

BROADBAND I	INFRASTRUCTURE PROJECTS
ation Number	3. DUNS Number
)4	019202949
6. Is this the last	Annual Report of the Award Period?
port is correct and o	complete for performance of activities for the
7c. Telephone (are	ea code, number and extension)
1601432812	
7d. Email Address	S
David.Johnson@	⊉its.ms.gov
_	ubmitted (MM/DD/YYYY):
04-23-2012	
	ation Number  6. Is this the last  port is correct and  7c. Telephone (ar  1601432812  7d. Email Address  David.Johnson@  7e. Date Report S

AWARD NUMBER: NT10BIX5570094

OMB CONTROL NUMBER: 0660-0037 DATE: 04/23/2012 EXPIRATION DATE: 12/31/2013

## **OVERALL PROJECT PERFORMANCE INDICATORS**

1. Please provide the following average cost figures for your project. Please review the instructions to determine how to calculate these figures. Write "0" in the second column and "N/A" in the third column if your project does not yet have this information. Depending on whether your project contains Middle Mile and/or Last Mile components, some metrics may not apply. Please provide a narrative description if the total is different from the target provided in your baseline plan (600 words or less).

Cost Indicator	Average Cost / Speed	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Average cost per new mile (Middle Mile)	\$3559.40	428 new miles completed in 2011 which included the installation of microwave backhaul equipment for 24 new network links in Phase 2C & 2D. Each set of microwave dishes costs \$63,476 which equates to \$3559.40 per mile.
Average cost per household passed (Last Mile)	0	N/A
Average cost per subscriber (Last Mile)	0	N/A
Maximum broadband speed advertised (Middle Mile)	0	N/A
Maximum broadband speed advertised (Last Mile)	0	N/A
Average broadband speed provided (Middle Mile)	0	The upgraded microwave backhaul was in the initial stages of deployment and therefore was not utilized in 2011.
Average broadband speed provided (Last Mile)	0	The upgraded microwave backhaul was in the initial stages of deployment and therefore was not utilized in 2011.

2. Please provide each facility name and type, the county where the facility is located, and census tract information for any facilities funded by your project during this annual reporting period. Report only facilities for which construction has been completed.

Facility Identifier / Name	Facility Type	County	Census Tracts
No Facilities have been completed at this time.	N/A	N/A	N/A

Add Facility Remove Facility

3. Please identify (1) the total number of interconnection, peering, and/or transit agreements entered into during this annual reporting period; (2) the total number of agreements of each type that you are currently negotiating; and (3) whether you have denied any request for

•		-				•	•
staraannaatian and if aa	why If you have not	antarad into a	ny agraamanta ni	aaaa uurita	"NI/A"		
nterconnection and if so	, why. If you have not	entereu mio a	iny agreements, pr	ease wille	; IN/A.		
			, ,				

Interconnection Agreements (600 words or less)

N/A

Peering and Transit Agreements (600 words or less)

N/A

AWARD NUMBER: NT10BIX5570094

OMB CONTROL NUMBER: 0660-0037

DATE: 04/23/2012

EXPIRATION DATE: 12/31/2013

## CAPACITY, UTILIZATION, AND CAPABILITY INDICATORS

4. Community Anchor Institutions: In the chart below, please provide information on the types of community anchor institutions capable of receiving service (i.e., anchor institutions connected to your network plus those passed by your network) as a result of BTOP funds.

Type of Community Anchor Institution	Total Number Within Service Area	Type of Community Anchor Institution	Total Number Within Service Area
Schools (K-12)	0	Public Housing	0
Libraries	0	Other Institutions of Higher Education	0
Medical and Healthcare Providers	90	Other Community Support Organizations	0
Public Safety Entities	217	Other Government Facilities	0
Community Colleges	0	Total Community Anchor Institutions	307

5. Please indicate the average increase in broadband speed provided to the community anchor institution customers as a result of your project, including a description of how this increase was calculated (600 words or less).

In 2011, we were in the initial stages of designing and deploying the components of the LTE network. We had not begun offering broadband services to community anchor institutions during 2011.

6. What retail services are being provided by this project? Please describe below. (600 words or less). As an attachment to this report, please provide pricing plans (in \$ per month) associated with each retail service. Retail services description:

N/A

- 7a. What network management policies (e.g., bandwidth limitations, traffic prioritization) are in place for the services provided by your project? 7b. Have you ever limited or blocked consumers from accessing any lawful content, service, service provider, or application, or prevented any consumers from attaching any legal device to the network? If so, please explain why (300 words or less)?
- 7a. Network Management is within the scope of RFP 3639 which has been awarded to Motorola Solutions. Traffic prioritization will be in accordance with the State's FCC waiver for use of 700 MHz PSST Spectrum.

7b. No

8. If applicable, please provide the total number and the percentage of subscribers who have dropped the broadband service provided through this project (total number of households and/or businesses and the "churn rate") and the subscribers' reasons for discontinuing their service (600 words or less).

Service is not available at this time.

9. Please provide the following information regarding the number of fiber strand-miles:

Total Number of	Total Number of Active Fiber	Total Number of Leased Fiber	Total Number of Dark Fiber	Total Number of Strand-miles Being Built		eing Built
Strand-miles	Strand-miles Used by Recipient	Strand-miles	Strand-miles	Active	Leased	Dark
0	0	0	0	0	0	0

10. If you wholesale dark fiber, please list your wholesale customers and the number of fiber miles you currently are leasing to those customers:

N/A

11. Please provide the following information regarding the facility collocation capacity:

0 0 0	Total Facility (total square feet for all facilities)	Number of Square Feet Used by Recipient	Number of Square Feet Leased	Number of Square Feet Available
	0	0	0	0

AWARD NUMBER: NT10BIX5570094

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013 DATE: 04/23/2012

12. If you do not own collocation space, please describe how and where other network providers and/or customers interconnect with your network (600 words or less).
Facilities have not been established at this time. Customers will connect via a mobile wireless device.
13. To the extent that you have made any subcontracts or sub grants, please provide the number of subcontracts or sub grants that have been made to socially and economically disadvantaged small business (SDB) concerns as defined by section 8(a) of the Small Business Act, 15 U.S.C. 647, as modified by NTIA's adoption of an alternative small business size standard for use in BTOP. Please also provide the names of these SDB entities (150 words or less).  N/A
14. Please describe any best practices/lessons learned that can be shared with other similar BTOP projects (900 words or less).  N/A
15. Using the Excel spreadsheet template titled "Annual PPR CCI Addendum", please provide an updated list of Community Anchor Institutions (CAIs) that you have connected and plan to connect to your network.
16. Using the Excel spreadsheet template titled "Annual PPR CCI Addendum", please provide a list of community pairs that are receiving new or improved broadband service as a result of BTOP grant funds.
17. Please provide up-to-date network route maps in a single file, in a Google Earth compatible format (e.g., KMZ file).