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

DATE: 07/30/2013

AWARD NUMBER: NT10BIX5570112

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QUARTERLY PERFORMANCE PROG	RESS REPOR	T FOR BRO	DADBANI	D INFRASTRUCTURE PROJECTS		
General Information						
Federal Agency and Organizational Element to Which Report is Submitted	2. Award Identific	ation Numbe	r	3. DUNS Number		
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557011	2		961773509		
4. Recipient Organization						
Nebraskalink, LLC 233 S 13TH ST STE 1900, Li	ncoln, NE 68508-2	2000				
5. Current Reporting Period End Date (MM/DD/YYY	Υ)	6. Is this the	e last Repor	rt of the Award Period?		
06-30-2013				○ Yes ● 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 c	orrect and o	complete for performance of activities for the		
7a. Typed or Printed Name and Title of Certifying O	fficial	7	c. Telephor	ne (area code, number and extension)		
Sheryl Vogle		x				
		7	d. Email Ac	Idress		
			sheryl.vogle	e@nebraskalink.com		
7b. Signature of Certifying Official		70	e. Date Rep	port Submitted (MM/DD/YYYY):		
Submitted Electronically			07-30-2013			

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## **Project Indicators (This Quarter)**

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

In Q2, 2013, NebraskaLink started and completed our Grand Island town project. This allowed us to bring fiber to 23 CAI's in Grand Island. NebraskaLink also completed the builds to 12 additional CAI's in North Platte and 12 additional CAI's in Kearney. We were also able to bring fiber to 1 CAI in O'Neill and 1 CAI in Valentine. This completes our build out requirements for the NTIA BTOP Grant.

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	97	NebraskaLink is close to completion on this milestone. Once we receive invoices for final construction in the upcoming weeks, we will be 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
2h.	Network Build (all components - owned, leased, IRU, etc)	100	Complete
2i.	Equipment Deployment	100	Complete
2j.	Network Testing	99	NebraskaLink is close to completion on this project milestone. With the completion of our construction during this quarter, this milestone will be completed early in 3rd quarter 2013.
2k.	Other (please specify):	0	N/A

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).

NebraskaLink did not run into any challenges or issues during the 2nd quarter. Weather in our area was perfect to continue our construction.

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	461	NebraskaLink is on target with this milesone.
New network miles leased	1,427	NebraskaLink is on target with this milestone.
Existing network miles upgraded	0	N/A
Existing network miles leased	0	N/A
Number of miles of new fiber (aerial or underground)	461	NebraskaLink is on target with this milestone.

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Indicator	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Number of new wireless links	0	N/A
Number of new towers	0	N/A
Number of new and/or upgraded interconnection points	68	NebraskaLink is on target with this milestone

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	24
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	1
Average term of signed agreements (in quarters)	12

5b. Please list the names of the wholesale and last mile providers with whom you have signed agreements (100 words or less). Providers:

Four U Technology
Consolidated Telecom
Nebraska Central Telephone Company
Hamilton Telecommunications
Northeast Nebraska Telephone Company
Great Plains Communications
American Broadband
Windstream
Frontier
Clarks Telephone Company
Three Rivers Telephone Company

K&M Telephone Company Hershey Telephone

ATAT

AT&T

SDN Communications

Level 3

Benkelman Telephone

Arapahoe Telephone

Cox Business

Allo

Pinpoint

Glenwood Telecommunications

Unite Private Networks

**USA Communications** 

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:

NebraskaLink currently offers the following wholesale services: Direct Internet Access (DIA), Ethernet Transport and Private Line/TDM Services. These are priced on an individual basis, based on interconnection ability, local loop availability and distance for the circuit.

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

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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	24	NebraskaLink is ahead of our target baseline for signed agreements with Broadband Wholesales or last mile providers.
	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	10	10 Mbps: 5 20 Mbps: 2 50 Mbps: 2 100 Mbps: 4 150 Mbps: 1 200 Mbps: 1 250 Mbps: 1 250 Mbps: 5 500 Mbps: 3 1000 Mbps: 1 10 Gbps: 3 DS3: 2
Community Anchor nstitutions (including Government institutions)	Total subscribers served	101	NebraskaLink is currently providing service to 18 CAI's listed in their application, plus have built laterals to an additional 83 CAI's listed in our application. Many CAI's listed in our application are currently under contract with existing carriers - some have allowed us to build laterals to their sites for potential future business.
	Subscribers receiving new access	101	Laterals built to sites
	Subscribers receiving improved access	0	N/A
	Please identify the speed tiers that are available and the number or subscribers for each	15	5 Mbps: 10 Mbps: 1 20 Mbps: 3 30 Mbps: 50 Mbps: 2 60 Mbps: 1 75 Mbps: 1 100 Mbps: 4 150 Mbps: 200 Mbps: 1 250 Mbps: 2 500 Mbps: 1 250 Mbps: 3 300 Mbps: 2 500 Mbps: 2 500 Mbps: 2 1000 Mbps: 2 1000 Mbps: 2 1000 Mbps: 3 1000 Mbps: 3 1000 Mbps: 4 1500 Mbps: 3 1000 Mbps: 4 1500 Mbps: 5 1500 Mbps: 5 1500 Mbps: 6 1500 Mbps: 6 1500 Mbps: 7 1500 Mbps: 7 1500 Mbps: 8 1500 Mbps: 9 1500 Mbps
Residential / Households	Entities passed	0	N/A
	Total subscribers served	0	N/A
	Subscribers receiving new access	0	N/A
	Subscribers receiving improved access	0	N/A
	Please identify the speed tiers that are available and the number of subscribers for each	0	N/A

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Subscriber Type	Access Type	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Businesses	Entities passed	0	N/A
	Total subscribers served	0	N/A
	Subscribers receiving new access	0	N/A
	Subscribers receiving improved access	0	N/A
	Please identify the speed tiers that are available and the number of subscribers for each	0	N/A
7. Please describe any	special offerings you may provide (600 w	vords or less).	
N/A			
8a. Have your network i	management practices changed over the	last quarter?	○ Yes ● No
8b. If so, please describ	be the changes (300 words or less).		
N/A			

## 9. Community Anchor Institutions:

Using the table below, please provide a list by service area of the community anchor institutions (including Government institutions) connected to your network as a result of BTOP funds. Figures should be reported for the most recent reporting quarter only (NOT cumulatively). Also indicate whether your organization is currently providing broadband service to the anchor institution. Finally, provide a short narrative description with examples of how institutions are using BTOP-funded infrastructure (300 words or less).

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 BTOP- funded infrastructure
Grand Island Christian Elementary	Grand Island	K-12	No	Lateral has been built to the site
Trinity Lutheran School	Grand Island	K-12	No	Lateral has been built to the site
Jefferson Elementary School	Grand Island	K-12	No	Lateral has been built to the site
Starr Elementary School	Grand Island	K-12	No	Lateral has been built to the site
Howard Elementary School	Grand Island	K-12	No	Lateral has been built to the site
College Park at Grand Island	Grand Island	Community College	No	College Park at Grand Island is using the infrastructure for internet access
St Francis Medical Center	Grand Island	Medical or Healthcare Provider	No	Lateral has been built to the site
Veterans Administration Medical Center	Grand Island	Medical or Healthcare Provider	No	Lateral has been built to the site
Grand Island City Offices	Grand Island	Other Government Facility	No	Lateral has been built to the site
Hall County Courthouse  Grand Island  Other Government Facility		No	Lateral has been built to the site	

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Institution Name Service Type of Anchor Are you also the Narrative description of how anchor institutions are using BTOP-Institution (as broadband funded infrastructure Area (town defined in your service provider or county) baseline) for this institution? (Yes / No) Medical or Grand **Grand Island Clinic** Healthcare Lateral has been built to the site No Island Provider Medical or Golden Living Center -Grand Healthcare Lateral has been built to the site No Lakeview Island Provider Nebraska Dept of Other Grand Health & Human Government No Lateral has been built to the site Island Services **Facility** Other **Hall County GIS** Grand Government Lateral has been built to the site No Department Island **Facility** State of Nebraska Grand **Public Safety** No Lateral has been built to the site offices, incl State Patrol Island **Entity** Nebraska Dept of Other Grand Labor, Employment Government No Lateral has been built to the site Island Services **Facility** Other Grand **NE DOR** Lateral has been built to the site Government No Island **Facility Public Safety** City. Fire Dept. Police Grand No Lateral has been built to the site Dept Island **Entity GI Code Enforcement** Grand **Public Safety** No Lateral has been built to the site (&downtown lateral) Island **Entity** Other **Hall County Juvenile** Grand Government Lateral has been built to the site No Service Island **Facility** Grand **Christ Lutheran School** K-12 No Lateral has been built to the site Island Medical or **Third City Community** Grand Healthcare Lateral has been built to the site No Clinic Island Provider Medical or **Grand Island Specialty** Grand Healthcare No Lateral has been built to the site Clinic Island Provider Other Buffalo County Court is using the infrastructure for internet **Buffalo County Court** Kearney Government No access **Facility** Other **Buffalo County** Kearney Government No Lateral has been built to the site **Extension Office Facility** Other City of Kearney Kearney Government Lateral has been built to the site No **Housing Authority Facility** Medical or **Central Plains Surgery** Kearney Healthcare No Lateral has been built to the site Center Provider Medical or **Great Plains Radiology** Kearnev Healthcare No Lateral has been built to the site & Nuclear Medicine **Provider** Medical or **Heartland Hematology** Healthcare Kearney No Lateral has been built to the site & Oncology Provider Medical or Healthcare **Kearney Eye Institute** Kearney No Lateral has been built to the site Provider

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Midlands Cardiology Group  Good Samaritan	Kearney Kearney	Medical or Healthcare Provider	No	Lateral has been built to the site
Group  Good Samaritan	Kearnev			
		Medical or Healthcare Provider	No	Lateral has been built to the site
Society - St Johns	Kearney	Medical or Healthcare Provider	No	Lateral has been built to the site
Good Samaritan Society - St Luke's	Kearney	Medical or Healthcare Provider	No	Lateral has been built to the site
Mother Hull Home	Kearney	Medical or Healthcare Provider	No	Lateral has been built to the site
North Platte Public Library	North Platte	Library	No	Lateral has been built to the site
Lincoln County Atty & HWY Superintendent	North Platte	Other Government Facility	No	Lateral has been built to the site
West Central Health District	North Platte	Other Government Facility	No	Lateral has been built to the site
Roads Dept Traffic Eng	North Platte	Other Government Facility	No	Lateral has been built to the site
Head Start of North Platte	North Platte	Other Community Support Organization	No	Head Start of North Platte is using the infrastructure for internet access
Community Action Partnership	North Platte	Other Community Support Organization	No	Lateral has been built to the site
North Platte Senior Center	North Platte	Other Community Support Organization	No	Lateral has been built to the site
County of Lincoln	North Platte	Other Government Facility	No	Lateral has been built to the site
Lutheran Family Services of NE	North Platte	Other Community Support Organization	No	Lateral has been built to the site
Ear Nose Throat & Sinus Clinic	North Platte	Medial or Healthcare Provider	No	Lateral has been built to the site
Center for Health	North Platte	Medical or Healthcare Provider	No	Lateral has been built to the site
Centennial Park Retirement Village	North Platte	Medical or Healthcare Provider	No	Lateral has been built to the site
Golden Living Center - Lakeview	O'Neill	Medical or Healthcare Provider	No	Lateral has been built to the site
Oakwood Good Samaritan Center	Valentine	Medical or Healthcare Provider	No	Lateral has been built to the site

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1. Please describe significant project accomplishments planned for completion during the next quarter (600 words or less).

In Q3, 2013, NebraskaLink will be entering into the grant closeout stage.

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	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
2h.	Network Build (all components - owned, leased, IRU, etc.)	100	Complete
2i.	Equipment Deployment	100	Complete
2j.	Network Testing	100	Complete
2k.	Other (please specify):	0	N/A

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).

NebraskaLink is not anticipating any issues in the upcoming quarter. NebraskaLink expects to work closely with our BTOP team on the close out period of our grant.

## 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.

В	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	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
b. Land, structures, right-of-ways, appraisals, etc.	\$122,215	\$36,664	\$85,551	\$122,216	\$34,658	\$87,558	\$122,216	\$34,658	\$87,558	
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
d. Architectural and engineering fees	\$1,428,504	\$428,551	\$999,953	\$1,377,339	\$436,446	\$940,893	\$1,428,503	\$449,603	\$978,900	
e. Other architectural and engineering fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
f. Project inspection fees	\$200,642	\$60,193	\$140,449	\$133,581	\$40,074	\$93,507	\$200,633	\$57,967	\$142,666	
g. Site work	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
h. Demolition and removal	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
i. Construction	\$9,613,119	\$2,883,936	\$6,729,183	\$9,216,523	\$2,428,390	\$6,788,133	\$9,631,235	\$2,552,804	\$7,078,431	
j. Equipment	\$3,247,659	\$974,298	\$2,273,361	\$3,229,553	\$1,410,430	\$1,819,123	\$3,229,553	\$1,410,430	\$1,819,123	
k. Miscellaneous	\$1,884,813	\$565,444	\$1,319,369	\$1,884,812	\$443,624	\$1,441,188	\$1,884,812	\$443,624	\$1,441,188	
I. SUBTOTAL (add a through k) m. Contingencies	\$16,496,952	\$4,949,086	\$11,547,866	\$15,964,024	\$4,793,622	\$11,170,402	\$16,496,952	\$4,949,086	\$11,547,866	
n. TOTALS (sum of I and m)	\$16,496,952	\$4,949,086	\$11,547,866	\$15,964,024	\$4,793,622	\$11,170,402	\$16,496,952	\$4,949,086	\$11,547,866	

<sup>2.</sup> 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: \$999,532