RECIPIENT NAME: AWARD NUMBER: DATE: OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12-31-2010

QUARTERLY PERFORMANCE PROGRESS REPORT FOR SUSTAINABLE BROADBAND ADOPTION

eneral Information				
Federal Agency and Organizational Element to Which Report is Submitted GMIS	2. Award Identific 53-43-B10005	ation Number	3a. DUNS Number 133872619	
CIVIIC	00-43-10000		3b. EIN 300158253	
4. Recipient Organization (Name and complete addr TINCAN 1317 West Second Ave., Spokane, WA	•	•	, and zip code)	
Throat 1917 West decond Ave., Opokane, WA	. 33201 GGA 1 III	Toongressional District		
5. Current Reporting Period End Date (MM/DD/YYY	Υ)	6. Is this the last Report of	f the Award Period?	
06-30-2010		C	Yes • No	
7. Certification: I certify to the best of my knowledge purposes set forth in the award documents.	is report is correct and cor	nplete for performance of activities for the		
7a. Typed or Printed Name and Title of Certifying Official		7c. Telephone	(area code, number and extension)	
Karen L. Michaelson, Ph.D. Executive Director		509-744-0972		
		7d. Email Addr	ess	
		kmichaelson@	Dasisna.com	
7b. Signature of Certifying Official		7e. Date Repor	t Submitted (MM/DD/YYYY):	
		07/28/2010		

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1.	Please describe significant	anificant pro	iect accom	plishments com	pleted during	this quarter	(150 words or less	١.

Tincan's Grand opening of their main facility was widely publicized and well attended by both constituents, partners, and political figures. Relationships have been developed with ISP's who will promote Tincan's broadband efforts.

2. Please provide the percent complete for the following key milestones in your project. Write "N/A" in the second 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 (100 words or less).

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2.a.	Overall Project	10	
2.b.	Equipment Purchases		n/a
2.c.	Awareness Campaigns	6	
2.d.	Outreach Activities	6	
2.e.	Training Programs	6	see description in PCC
2.f.	Other (please specify):		

3. 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 (150 word
or less).

none

4a. In the chart below, please provide the requested information on your BTOP grant-funded SBA activities. Please also provide a short description of the activity (100 words or less). Unless otherwise indicated in the instructions, figures should be reported cumulatively from award inception to the end of the most recent reporting quarter.

Name of the SBA Activity	Location of SBA Activity	Description of Activity (100 words or less)	Size of Target Audience	Actual Number of Participants	New Subscribers (Households and / or Businesses)
		see attached list			
		Total:			

4b.	Please describe your	method for	determining num	ber of househ	olds and/or b	usinesses sub	scribing to broad	dband as a r	esult of you	ı٢
SBA	A programs (100 words	s or less).								
n/a										

4c	c. Please provide a narrative description if the total number of new subscribers is different from the targets provided in your baseline plar
(10	00 words or less).
n/a	'a

4d. Please provide the number of households and the number of businesses receiving discounted broadband service as result of BTOP funds.

Households: 0	Businesses: 0

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Project Indicators (Next Quarter)

1. Please describe significant project accomplishments planned for completion during the next quarter (150 words or less). Planning for outreach to businesses, community centers; increased training activity; agreements with ISPs

2. Please provide the percent complete anticipated for the following key milestones in your project as of the end of the next quarter. Write "N/A" in the second 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 planned percent complete is different from the target provided in your baseline plan (100 words or less).

	Milestone	Percent Complete	Narrative (describe reasons for any variance from baseline plan or any other relevant information)
2.a.	Overall Project	16	
2.b.	Equipment Purchases		n/a
2.c.	Awareness Campaigns	16	
2.d.	Outreach Activities	12	
2.e.	Training Programs	16	see PCC report
2.f.	Other (please specify):		

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 (150 words or less).

none

Sustainable Broadband Adoption Budget Execution Details

Activity Based Expenditures (Sustainable Broadband Adoption)

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				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. Personnel	\$577,903	\$61,828	\$516,075	\$77,351	\$790	\$76,561	\$119,790	\$790	\$119,000
b. Fringe Benefits	\$127,753	\$10,777	\$116,976	\$15,208	\$0	\$15,208	\$22,708	\$0	\$22,708
c. Travel	\$0	\$0	\$0	\$40	\$40	\$0	\$450	\$450	\$0
d. Equipment	\$3,975	\$0	\$3,975	\$0	\$0	\$0	\$0	\$0	\$0
e. Supplies	\$36,000	\$0	\$36,000	\$18,737	\$18,737	\$0	\$44,137	\$25,000	\$19,137
f. Contractual	\$754,746	\$655,746	\$99,000	\$24,825	\$17,724	\$7,101	\$41,101	\$30,000	\$11,101
g. Construction	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
h. Other	\$52,000	\$0	\$52,000	\$9,452	\$6,849	\$2,603	\$12,000	\$8,200	\$3,800
i. Total Direct Charges (sum of a through h)	\$1,552,377	\$728,351	\$824,026	\$145,613	\$44,140	\$101,473	\$240,186	\$64,440	\$175,746
j. Indirect Charges	\$156,565	\$0	\$156,565	\$19,280	\$0	\$19,280	\$33,392	\$0	\$33,392
TOTALS (sum of i and j)	\$1,708,942	\$728,351	\$980,591	\$164,893	\$44,140	\$120,753	\$273,578	\$64,440	\$209,138

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: \$0