



Does your project contain an infrastructure build component?  
Yes



OMB Control No. 0660-0047 Expiration Date: 07/31/2025

TRIBAL BROADBAND CONNECTIVITY PROGRAM ANNUAL REPORT						
GENERAL INFORMATION						
<b>GENERAL</b>	Recipient Organization:	Keweenaw Bay Indian Community	Award Identification Number:	NT23TBC0290091-T1-01		
	Recipient Street Address:	16429 Beartown Rd.	Report Submission Date (MM/DD/YYYY):	07/24/2024		
	City, State, Zip Code:	Baraga, MI 49908				
	UEI Number:	Q78EDCFBCKB3	Period of Performance Start Date (MM/DD/YYYY):	08/01/2023	Period of Performance End Date (MM/DD/YYYY):	07/31/2024
	Report Period Start Date (MM/DD/YYYY):	08/01/2023	Report Period End Date (MM/DD/YYYY):	07/31/2024		
	Report Period Start Date (MM/DD/YYYY):	08/01/2023	Report Period End Date (MM/DD/YYYY):	07/31/2024		
1	<p>Provide the total number of project locations (Tribal households, businesses, and community anchor institutions) that your organization provided broadband service to using grant funds. (600 words or less)</p> <p>Infrastructure Deployment projects must attach associated shapefiles for the proposed service area. Use &amp; Adoption projects are not required to provide shapefiles, but must complete question 1. Planning projects may enter "N/A".</p> <p>Construction has not started for the project.</p>					
2						
3	<p>List all contractors that received grant funds and briefly explain what the funds were used for. Report this item cumulatively from the start of the award through the end of the annual report period captured in this report. If your project does not include contractors, write "NA". (600 words or less)</p> <p>Baraga Telephone Company is the partner on this project utilizing funds to implement the infrastructure needs. Nothing additional awarded at this time.</p>					
4	<p>Describe how the recipient organization expended grant funds. Report this item cumulatively from the start of the award through the end of the annual report period captured in this report. (600 words or less)</p> <p>None until the Environmental Study is complete.</p>					
5	<p>List all subrecipients that received grant funds and briefly explain what the funds were used for. Report this item cumulatively from the start of the award through the end of the annual report period captured in this report. If your project does not include subrecipients, write "NA". (600 words or less)</p> <p>Contingent funds are budgeted for general contract support (consultant firm for grant submission).</p>					
6	<p>Describe any challenges your organization experienced while conducting your TBCP project during the past annual report period. Explain how you addressed those challenges. (600 words or less)</p> <p>Waiting for partner to complete environmental assessment.</p>					
7	<p>Describe how your organization met and maintained broadband requirements, as outlined in the NOFO purpose areas below. (600 words or less)</p> <p><b>Infrastructure Deployment:</b> Broadband infrastructure deployment, including (but not limited to) support for the establishment of carrier-neutral submarine cable landing stations.</p> <p><b>Use and Adoption:</b> Projects that promote the adoption and use of broadband services, including: affordable broadband programs, such as providing free or reduced-cost broadband service and preventing disconnection of existing broadband service; distance learning; telehealth; digital inclusion efforts; and broadband adoption activities.</p> <p><b>Planning:</b> Proposals to conduct planning, engineering, feasibility, or sustainability studies as part of the necessary steps to develop a technological solution for broadband deployment.</p> <p>Planning continues with some action taken on completing the environmental study. Once complete funds can be disbursed and more development within the project can proceed.</p>					

8	<p>Describe all project achievements during the reporting period. (600 words or less)</p> <p>All grant reporting has been completed.</p>		
9	<p><b>INFRASTRUCTURE DEPLOYMENT PROJECTS:</b> Using the Excel spreadsheet template titled "TBCP Reports Addendum A", please provide an updated count of Households within each of the eligible tribal block groups along with their Location ID that you connected to your network. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier for the geographic coordinates, and where available, the address(es) associated with each location.</p>		
10	<p><b>INFRASTRUCTURE DEPLOYMENT PROJECTS:</b> Using the Excel spreadsheet template titled "TBCP Reports Addendum B", please provide an updated count of Tribal Businesses within each of the eligible tribal block groups along with their Location ID that you connected to your network. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier for the geographic coordinates, and where available, the address(es) associated with each location.</p>		
11	<p><b>INFRASTRUCTURE DEPLOYMENT PROJECTS:</b> Using the Excel spreadsheet template titled "TBCP Reports Addendum C", please provide an updated count of Community Anchor Institutions (CAIs) within each of the eligible tribal block groups along with their Location ID that you connected to your network. The locations should match and conform to the Federal Communications Commission (FCC) Broadband Serviceable Location Fabric, which is a unique identifier for the geographic coordinates, and where available, the address(es) associated with each location.</p>		
CERTIFICATION	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 documents.		
	Typed or printed name and title of Authorized Certifying Official:		Telephone (area code, number and extension):
	Brigitte LaPointe-Dunham, CEO		906-353-6623
	Signature of Certifying Official:		Email Address:
<i>Brigitte LaPointe-Dunham</i>		Date: 7/29/2024	blapointe@kbic-nsn.gov







TRIBAL BROADBAND CONNECTIVITY PROGRAM REPORTS ADDENDUM A


<b>CERTIFICATION</b>	<b>I certify to the best of knowledge and belief that this report is correct and complete for performance of activities fo</b>	
	<b>Typed or printed name and title of Authorized Certifying Official:</b>	0
	<b>Signature of Certifying Official:</b>	







































