



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

TRIBAL BROADBAND CONNECTIVITY PROGRAM ANNUAL REPORT				
GENERAL INFORMATION				
GENERAL	Recipient Organization:	Port Gamble S'Klallam tribe	Award Identification Number:	
	Recipient Street Address:	31912 Little Boston RD ne	Report Submission Date (MM/DD/YYYY):	
	City, State, Zip Code:		05/01/2023	
	DUNS/UEI Number:			
	Period of Performance Start Date (MM/DD/YYYY):	04/01/2022	Period of Performance End Date (MM/DD/YYYY):	03/31/2023
	Report Period Start Date (MM/DD/YYYY):	04/01/2022	Report Period End Date (MM/DD/YYYY):	04/01/2023
1	Provide the number of locations or geographic areas at which broadband service was provided using the grant funds. (Please attach associated shapefiles of geographic areas) (600 words or less) no progress, as we are waiting for the EPA study to complete.			
2	Please describe each service provided with grant funds. (600 words or less) no progress, as we are waiting for the EPA study to complete.			
3	If applicable, please list subcontractors and describe how they expended funds. (600 words or less) Krista Webb consulting \$2970.00, to complete CatEx documentation, which has not started as we have just received the final submission as per policy min 3 bids.			
4	Please describe how the recipient and subrecipient (if applicable) expended the funds. (600 words or less) We had purchased equipment as soon as the ASAP approved PGST. In a meeting on 10/17 I was made aware of the EPA pre-requisite. I had not received the Grant award package when we were awarded, the grant award documentation went directly to the Tribal chair and was not forwarded on to me or anyone else. After I was made aware of the pre-req EPA, all spending for equipment was halted, we had not started any work only order of supplies. I have completed our accountings 3 bid process to get the study completed.			
5	If applicable, please list each subrecipients that received a subgrant through funding. (600 words or less) N/A			
6	Please provide the barriers to broadband use and adoption or broadband infrastructure deployment work that you experienced during the reporting period of this award to date. What steps did you take to address them? (600 words or less) None to date.			
7	Please describe whether or not your organization connected NOFO purpose areas to broadband adoption and use or broadband infrastructure deployment work. (600 words or less) no progress, as we are waiting for the EPA study to complete.			
8	Please describe your project's achieved accomplishments during this reporting period. (600 words or less) no progress, as we are waiting for the EPA study to complete.			
9	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. Please be sure to select 'Annual Report' checkbox when completing the addendum.			
10	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. Please be sure to select 'Annual Report' checkbox when completing the addendum.			
11	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. Please be sure to select 'Annual Report' checkbox when completing the addendum.			
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):	360 297 6249	
	Roxanne Hockett			
	Signature of Certifying Official:	Email Address:	roxanneh@pgst.nsn.us	
	/s/Roxanne Hockett	Date:	5/2/2023	



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TRIBAL BROADBAND CONNECTIVITY PROGRAM REPORTS ADDENDUM B

Recipient Organization:		Award Identification Number:	
Recipient Street Address:		Report Submission Date (MM/DD/YYYY):	
City, State, Zip Code:		DUNS/UEI Number:	
Reporting Period Start Date (MM/DD/YYYY):			Baseline Report <input type="checkbox"/>
Reporting Period End Date (MM/DD/YYYY):		Report Type:	Annual Report <input type="checkbox"/>

Tribal Business Locations in the Service Area

The Location ID is the Fabric ID associated with the Federal Communications Commission maps required by the Broadband Deployment Broadband Deployment Accuracy and Technology Availability (DATA) Act, Pub. L. No. 116-130, 134 Stat. 228 (2020) (codified at 47 U.S.C. §§ 641-646) (Broadband DATA Maps). The "location_id" data element is a unique identifier for the location served. A Location ID should be included for each location in the Broadband Serviceable Location Fabric when the Fabric is made available to filers. Number of units refers to one location that has multiple units within that one location. Please insert rows at the bottom of the table to report additional location data if needed. Number of units refers to one location that has multiple units within that one location. Please insert rows at the bottom of the table to report additional location data if needed.

CERTIFICATION	Typed or printed name and title of Authorized Certifying Official:		Telephone (area code, number and extension):	
	Signature of Certifying Official:		Email Address:	
			Date:	



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TRIBAL BROADBAND CONNECTIVITY PROGRAM REPORTS ADDENDUM C

Recipient Organization:		Award Identification Number:	
Recipient Street Address:		Report Submission Date (MM/DD/YYYY):	
City, State, Zip Code:		DUNS/UEI Number:	
Reporting Period Start Date (MM/DD/YYYY):		Report Type:	Baseline Report <input type="checkbox"/>
Reporting Period End Date (MM/DD/YYYY):			Annual Report <input type="checkbox"/>

Community Anchor Institution (CAI) Locations in the Service Area

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	Signature of Certifying Official:		Email Address:	
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