AWARD NUMBER: NT10BIX5570003 DATE: 02/27/2012

QUARTERLY PERFORMANCE PROGRESS REPORT FOR BROADBAND INFRASTRUCTURE PROJECTS							
General Information							
1. Federal Agency and Organizational Element to Which Report is Submitted							
Department of Commerce, National Telecommunications and Information Administration	NT10BIX5570003		623894359				
4. Recipient Organization							
South Dakota Network, LLC 2900 W 10th Street	, Sioux Falls, SD 57104-254	43					
5. Current Reporting Period End Date (MM/DD/YYY	Y) 6. Is this	the last Repo	rt of the Award Period?				
12-31-2011		⊖ Yes ● No					
7. Certification: I certify to the best of my knowledg purposes set forth in the award documents.	e and belief that this report i	s correct and	complete for performance of activities for the				
7a. Typed or Printed Name and Title of Certifying O	fficial	7c. Telephone (area code, number and extension)					
Mark Shlanta			6053347185				
	7d. Email Address						
Chief Executive Officer			mark.shlanta@sdncommunications.com				
7b. Signature of Certifying Official			7e. Date Report Submitted (MM/DD/YYYY):				
Submitted Electronically			02-27-2012				

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Project Indicators (This Quarter)

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

Substantial completion of the project highlighted the last quarter of 2011. Two thirds of the project has been completed as measured by Grant Dollars received and Miles of Fiber deployed. This milestone was met by November 30th as we completed our second project year. Community Outreach efforts included a visit by South Dakota Senator Tim Johnson with a public media announcement of our progress thus far with the Broadband Technology Opportunities Program grant. Construction activity, although slowed, continued as the Midwest has experienced unseasonable warm weather this winter allowing for progress in fiber deployment.

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	76	An aggressive Baseline projection has left this metric short of forecast by seventeen percent. Some of this shortfall will be made up over the next two quarters as we originally only projected a five percent increase for the same time period. Additional crews were added to accommodate this lag.
2b.	Environmental Assessment	100	No Variance.
2c.	Network Design	100	No Variance.
2d.	Rights of Way	100	No Variance.
2e.	Construction Permits and Other Approvals	100	No Variance.
2f.	Site Preparation	90	No Variance.
2g.	Equipment Procurement	95	Equipment procurement should be completed by end of quarter one in 2012.
2h.	Network Build (all components - owned, leased, IRU, etc)	79	The Network Build milestone will continue to lag into the final year of the project. Components of this metric will continue to be incorporated into the project as construction activities take place.
2i.	Equipment Deployment	90	Exceeding Baseline. Deployment and addition of some equipment will take place in this and following quarters.
2j.	Network Testing	60	Testing of Network Equipment is currently meeting Baseline projections and will be completed by mid 2012.
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).

None at this time.

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	282	An additional forty seven miles of fiber were placed this quarter bringing the total to 282. Our Baseline had only projected five miles for the quarter. Due to unseasonably mild weather,

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ATE: 02/27/2012 EXPIRATION DATE: 12/31/2013						
Indicator	Total	plan or any additional miles beyond	easons for any variance from the baseline other relevant information) projections were able to be built. This			
New network miles lessed	0		et Baseline Projections early in 2012.			
ew network miles leased 0 N/A						
Existing network miles upgraded	0	N/A				
Existing network miles leased	0	N/A				
Number of miles of new fiber (aerial or underground)	282	Same as "New Network	miles deployed" above.			
Number of new wireless links	0	N/A				
Number of new towers	0	N/A				
Number of new and/or upgraded interconnection points	0					
For questions 5 and 6 please include information relating recipient, contractor or subcontractor is negotiating or e 5a. If applicable, please provide the following informatio as a result of your project.	ntered into.					
Indicators						
Number of signed agreements with broadband wholesale	ers or last mile p	providers	0			
Number of agreements currently being negotiated with b providers	roadband whole	esalers or last mile	0			
Average term of signed agreements (in quarters)			0			
5b. Please list the names of the wholesale and last mile N/A	providers with v	whom you have signed agre	ements (100 words or less). Providers:			
5c. What wholesale services are being provided by this pricing plans (in \$ per month) associated with each whol description: N/A			• • •			
5d. If you have designated a third party to operate all or third party, indicate if this entity is a sub recipient, contra network this this third party operates (600 words or less) Sub Recipients identified below will own and operate t City of Faith-Telephone Department, 204 N Main Stree	actor, and/or su he portion of th	bcontractor, and describe v	vith specificity the portion of your			

Interstate Telecommunications Cooperative, Inc., 312 4th Street, West, Clear Lake, South Dakota 57226

Northern Valley Communications, LLC, 235 East First Ave., Groton, South Dakota 57445

Northern Hills Transport, LLC, 2900 West 10th Street, Sioux Falls, South Dakota 57104

TrioTel Communications, Inc., 330 S Nebraska St., Salem, South Dakota 57058

Venture Communications, Inc., 218 Commercial Ave. SE, Highmore, South Dakota 57345

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 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).

Subscrib	er Type	Access Type	Total	Narrative (describe your reasons for any variance from the baseline plan or any other relevant information)
Broad Wholesale Mile Pro	rs or Last	Providers with signed agreements receiving new access	0	This milestone originally included the Sub Recipients to calculate the Baseline projection. Based upon feedback from NTIA, we will not be counting Sub Recipients as Last Mile Providers. Agreements with Sub Recipients do not involve interconnection, peering or other related verbiage.

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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)
	Providers with signed agreements receiving improved access	0	See narrative above under "Providers with signed agreements receiving new access"
	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	0	N/A
Community Anchor Institutions (including Government institutions)	Total subscribers served	436	Exceeding Baseline.
	Subscribers receiving new access	219	Exceeding Baseline.
	Subscribers receiving improved access	217	Meeting Baseline projections.
	Please identify the speed tiers that are available and the number or subscribers for each	10	5-5 Mb/s 132 -10 Mb/s 4-15 Mb/s 5-20 Mb/s 1-25 Mb/s 2-40 Mb/s 2-45 Mb/s 1-80 Mb/s 38-100 Mb/s 4-1000 Mb/s Not all of the CAI's being served are subscribing to service at this time.
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
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
. Please describe any lone at this time in the	<b>special offerings you may provide (600 w</b> e project.	vords or less).	
a. Have your network	management practices changed over the	last quarter?	⊖ Yes ● No
b. If so, please descril I/A	be the changes <mark>(300 words or less)</mark> .		
onnected to your netw umulatively). Also ind	please provide a list by service area of the ork as a result of BTOP funds. Figures s icate whether your organization is currer	hould be reported	nchor institutions (including Government institutions) red for the most recent reporting quarter only (NOT proadband service to the anchor institution. Finally, provide a unded infrastructure (300 words or less).
Institution Name	Service Type of Anchor Are you		rative description of how anchor institutions are using BTOP

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OMB CONTROL NUMBER: 0660-0037

		Area (town or county)	Institution (as defined in your baseline)	broadba service pro for thi institutio (Yes / N	ovider is on?	funded infrastructure		
	see attached	see attached	see attached	see attac	ched	see attached		
Proje	ct Indicators (Ne)	t Quarter)						
Nith he w are b	winter weather a	t it's peak in So State will occ in the next qua	outh Dakota duri cur, but only mini	ng this time	e frame, mini	n during the next quarter (600 words or less). Imal construction activity will be taking place. Some work Ioming quarters and requirements for closing out the awar		
Proje	ork Miles Deploy cted CAI's- 19 esale Providers-I							
nd "			our project does	not include t	this activity.	r project. Write "0" in the Planned Percent Complete colum If you provided additional milestones in your baseline plan		
ward	e insert them at th	ne bottom of the end of the next	reporting quarte	r. Please pro				
awaro	e insert them at th d inception to the t provided in your	ne bottom of the end of the next	reporting quarte (300 words or les P P	r. Please pro	ovide a narra	instructions, figures should be reported cumulatively from ative description if the percent complete is different from the describe reasons for any variance from baseline plan or any other relevant information)		
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2a. 2b. 2c.	e insert them at th d inception to the t provided in your Overall Project Environmental As	ne bottom of the end of the next baseline plan Milestone	reporting quarte (300 words or les P P	r. Please pros	Narrative (c Narrative (c An aggressive bercent. Some briginally only Additional crev Meeting Basel	ative description if the percent complete is different from the describe reasons for any variance from baseline plan or any other relevant information) Baseline projection has left this metric short of forecast by twelve of this shortfall will be made up over the next two quarters as w projected a five percent increase for the same time period. ws were added to accommodate this lag. ine.		
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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).

None at this time.

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# 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		from Project nd of Current Period		Inceptio	ed Actuals fro n through End eporting Perio	d of Next			
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	\$75,000	\$15,000	\$60,000	\$128,320	\$25,664	\$102,656	\$140,000	\$28,000	\$112,000
b. Land, structures, right-of-ways, appraisals, etc.	\$700,000	\$140,000	\$560,000	\$512,980	\$102,596	\$410,384	\$550,000	\$110,000	\$440,000
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$3,533,729	\$706,746	\$2,826,983	\$2,020,777	\$404,156	\$1,616,621	\$2,500,000	\$500,000	\$2,000,000
e. Other architectural and engineering fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
f. Project inspection fees	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
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	\$16,511,000	\$3,302,200	\$13,208,800	\$12,218,619	\$2,443,724	\$9,774,895	\$14,000,000	\$2,800,000	\$11,200,000
j. Equipment	\$3,513,857	\$702,771	\$2,811,086	\$4,279,896	\$855,979	\$3,423,917	\$4,300,000	\$860,000	\$3,440,000
k. Miscellaneous	\$1,381,717	\$276,344	\$1,105,373	\$400,942	\$80,188	\$320,754	\$450,000	\$90,000	\$360,000
I. SUBTOTAL (add a through k)	\$25,715,303	\$5,143,061	\$20,572,242	\$19,561,534	\$3,912,307	\$15,649,227	\$21,940,000	\$4,388,000	\$17,552,000
m. Contingencies	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
n. TOTALS (sum of I and m)	\$25,715,303	\$5,143,061	\$20,572,242	\$19,561,534	\$3,912,307	\$15,649,227	\$21,940,000	\$4,388,000	\$17,552,000
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.									
Application Budget Program Income: \$0 b. Program Income to Date: \$216.025									

a. Application Budget Program Income: \$0

b. Program Income to Date: \$216,025