AWARD NUMBER: NT10BIX5570077

DATE: 08/09/2012

OMB CONTROL NUMBER: 0660-0037 EXPIRATION DATE: 12/31/2013

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QUARTERLY PERFORMANCE PROG	RESS REPOR	I FOR BRO	DADBAN	D INFRASTRUCTURE PR	OJECIS
General Information					
Federal Agency and Organizational Element to Which Report is Submitted	2. Award Identific	ation Number		3. DUNS Number	
Department of Commerce, National Telecommunications and Information Administration	NT10BIX557007	77	061463618		
4. Recipient Organization				,	
Silver Star Telephone Company, INC. 104101 U	S Hwy 89, Stop 2,	Freedom, W	Y 83120-	8809	
5. Current Reporting Period End Date (MM/DD/YYY	Y)	6. Is this the	last Repo	rt of the Award Period?	
06-30-2012				○ 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 co	rrect and	complete for performance of ac	tivities for the
7a. Typed or Printed Name and Title of Certifying O	fficial	7c	. Telepho	ne (area code, number and exte	nsion)
Michelle Motzkus		x			
		7d	. Email Ad	ddress	
		m	namotzkus	s@silverstar.net	
7b. Signature of Certifying Official		7e	. Date Rep	port Submitted (MM/DD/YYYY):	
Submitted Electronically		0	8-09-2012	2	

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Project Indicators (This Quarter)

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

Recipient experienced no issues or challenges during this past quarter; project progress is well ahead of project baseline indicators.

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	83	Variance due to accelerated construction progress
2b.	Environmental Assessment	100	No Variance
2c.	Network Design	100	No Variance
2d.	Rights of Way	0	N/A
2e.	Construction Permits and Other Approvals	100	No Variance
2f.	Site Preparation	0	N/A
2g.	Equipment Procurement	100	Variance due to accelerated construction
/n	Network Build (all components - owned, leased, IRU, etc)	90	Variance due to accelerated construction
2i.	Equipment Deployment	90	Variance due to accelerated construction
2j.	Network Testing	90	Variance due to accelerated construction
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).

N/A

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	39	Variance due to accelerated construction progress
New 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)	39	Variance due to accelerated construction progress
Number of new wireless links	0	N/A
Number of new towers	0	N/A
Number of new and/or upgraded interconnection points	0	N/A

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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	0
Number of agreements currently being negotiated with broadband wholesalers or last mile providers	0
Average term of signed agreements (in quarters)	0

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

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:

N/A

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 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	0	N/A
	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	0	N/A
Community Anchor Institutions (including Government institutions)	Total subscribers served	30	CAI's include elementary education entities, several Federal department/division entities. Teton County, Town of Jackson, US Post Office and US Forest Service entities, as well as medical facilities and community support organizations. Variance due to accelerated construction schedule.
	Subscribers receiving new access	0	N/A
	Subscribers receiving improved access	30	CAI's include elementary education entities, several Federal department/division entities. Teton County, Town of Jackson, US Post Office and US Forest Service entities, as well as medical facilities and community support organizations.
	Please identify the speed tiers that are available and the number or	1	Maximum 1 Gbps; No Variance

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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)
	subscribers for each		
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	1	N/A
	Subscribers receiving new access	0	N/A
	Subscribers receiving improved access	1	N/A
	Please identify the speed tiers that are available and the number of subscribers for each	1	100 Mbps
7. Please describe any N/A	special offerings you may provide (600 v	vords or less).	
8a. Have your network	management practices changed over the	last quarter?	○ Yes ● No
8b. If so, please descri	be the changes (300 words or less).		

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
C Bar V Ranch	Wilson	Education	N/A	Drop has been placed. Doing testing; no service has been sold yet
Central Wyoming College	Jackson	Education	N/A	Drop has been placed. Doing testing; no service has been sold yet
Central Wyoming College-Center for the Arts	Jackson	Education	N/A	Drop has been placed. Doing testing; no service has been sold yet
Jackson Hole Post Office/Pearl Street	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Jackson Hole Post Office/Maple Street	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Courthouse	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet

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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
Teton County Detention and Dispatch	Jackson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Education Foundation	Jackson	Education	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Emergency Ops Center	Jackson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Fairground	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Fire Administration	Jackson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Library	Jackson	Education	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Lift Station	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Maintenance Bldg- Parks & Recr.	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Road & Levee	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Search & Rescue	Jackson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton County Sheriff	Jackson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton Pines Fires Station #6	Wilson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet
Town of Jackson Maint. Garage - Water Bldg.	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Teton of Jackson Public Works Shop	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Town of Jackson Town Hall	Jackson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
US Post Office - Wilson	Wilson	OGF	N/A	Drop has been placed. Doing testing; no service has been sold yet
Wilson Fire Department	Wilson	Public Safety	N/A	Drop has been placed. Doing testing; no service has been sold yet

Project Indicators (Next Quarter)

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

Recipient anticipates 100% completion of the project construction and CAI drops and 100% overall project completion. Over 41 fiber network miles will be placed and 50 CAI's will be connected to the network (upon final agency approval of pending project modification award action requests).

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	Variance due to accelerated construction progress

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	Planned Percent Milestone Complete		Narrative (describe reasons for any variance from baseline plan or any other relevant information)				
2b.	Environmental Assessment	100	No Variance				
2c.	Network Design	100	No Variance				
2d.	Rights of Way	0	N/A				
2e.	Construction Permits and Other Approvals	100	No Variance				
2f.	Site Preparation	0	N/A				
2g.	Equipment Procurement	100	Variance due to accelerated construction progress				
2h.	Network Build (all components - owned, leased, IRU, etc.)	100	Variance due to accelerated construction progress				
2i.	Equipment Deployment	100	Variance due to accelerated construction progress				
2j.	Network Testing	100	Variance due to accelerated construction progress				
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).

Recipient anticipates that project construction will be completed by quarter end and expects to experience no issues or challenges, with the exception of receiving final agency approval of pending project modification award action requests.

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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	udget for Enti	ire Project			from Project nd of Current 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	\$20,000	\$20,000	\$0	\$13,267	\$13,267	\$0	\$20,000	\$20,000	\$0
b. Land, structures, right-of-ways, appraisals, etc.	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
c. Relocation expenses and payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
d. Architectural and engineering fees	\$405,948	\$405,948	\$0	\$486,072	\$486,072	\$0	\$405,948	\$405,948	\$0
e. Other architectural and engineering fees	\$9,700	\$9,700	\$0	\$4,979	\$4,979	\$0	\$9,700	\$9,700	\$0
f. Project inspection fees	\$304,800	\$304,800	\$0	\$324,778	\$324,778	\$0	\$304,800	\$304,800	\$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	\$5,043,298	\$275,006	\$4,768,293	\$4,029,673	\$185,152	\$3,844,521	\$5,043,298	\$275,006	\$4,768,293
j. Equipment	\$562,825	\$267,494	\$295,330	\$383,803	\$287,333	\$96,470	\$582,664	\$267,494	\$295,330
k. Miscellaneous	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
I. SUBTOTAL (add a through k) m. Contingencies	\$6,346,571 \$0	\$1,282,948 \$0	\$5,063,623 \$0	\$5,242,572 \$0	\$1,301,581 \$0	\$3,940,991 \$0	\$6,366,410 \$0	\$1,282,948 \$0	\$5,063,623 \$0
n. TOTALS (sum of I and m)	\$6,346,571	\$1,282,948	\$5,063,623	\$5,242,572	\$1,301,581	\$3,940,991	\$6,366,410	\$1,282,948	\$5,063,623

^{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