FCC For	m 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name: Person USAC should contact with questions about this data	Kathy Reinhart	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4199372222 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	kmr@bascomtelephone.com	
	Form Type	54.313 and 54.422	

Contract to the last	ervice Quality Improvement Reporting ollection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	3005.89		
<015>	Study Area Name	BASCOM MUTUAL TE	L CO	
:020>	Program Year	2017		
:030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart		
035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.		
:039>	Contact Email Address - Email Address of person identified in data line <030>	kmrwbascomteleph	one com	
:110>	Has your company received its ETC certification from the FCC?	(yes / no	00	,
	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5		$\cap$	
<111>	year plan" filed with the FCC?	(yes / no	100	
:112>	service.  Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If you CETC which only receives frozen support, your progress report is only required to address voice telephony service.		589oh112.pdf	
		***		Name of Attached Document
	Please select the appropriate responses below (Yes, No, Not Applicable) to co	onfirm		
	that the attached document(s), on line 112, contains a progress report on its	five-year		
	service quality improvement plan pursuant to §54.202(a). The information sha	all be		
	submitted at the wire center level or census block as appropriate.			
	Maps detailing progress towards meeting plan targets		Yes	7
113>	iviabs detailing progress towards meeting plan targets		-	<b>-</b>
	Report how much universal service (USF) support was received		Yes	
114>	Report how much universal service (USF) support was received	ntove service quality	Yes	-
114> 115>	Report how much universal service (USF) support was received  How much (USF) was used to improve service quality and how support was used to im-		Yes	
113> 114> 115> 116> 117>	Report how much universal service (USF) support was received How much (USF) was used to improve service quality and how support was used to im How much (USF) was used to improve service coverage and how support was used to	improve service coverage	Yes Yes	
114> 115> 116>	Report how much universal service (USF) support was received  How much (USF) was used to improve service quality and how support was used to im-	improve service coverage	Yes	

Page :

(200) Service Outage Reporting (Voice)	FCC Form 481
ata Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext	_
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr*bascomtelephone.com	PE ANTHONY

8	<a>&gt;</a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d>&gt;</d>	<e></e>	<f></f>	<g></g>	<h></h>
- 1	NORS									Did This Outage		
- 1	Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
- 1	Number	Date	Time	Date		Customers Affected	Total Number of	Affected	Description (Check	Study Areas	Service Outage	Preventative
- 1		25/20/20	XACCENTO:		20000		Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
1		-					customers	(163) 110)	an that apply)	(163) 110)	Resolution	riocedures
- }												
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	fulfilled Service Request ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr*bascomtelephone com	
<300> U	nfulfilled service request (voice)	0	
<310> 0	Detail on attempts (voice)		
	Nam	e of Attached Document	
<320> (	Unfulfilled service request (broadband)	0	
<330>	Detail on attempts (broadband)		
	N	lame of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481	
Data Collection Form	OMB Control No. 3060-0986/OMB Control No.	ntrol No. 3060-0819
	July 2013	

<010>	Study Area Code	320589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should conta	ect regarding this data Kathy	Reinhart
<035>	Contact Telephone Number - Number of p <030>	erson identified in data line	4:9977222 ext
<039>	Contact Email Address - Email Address of p <030>	person identified in data line	kmrëbascontelephone rem
<400>	Select from the drop-down list to indicate the voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or ot	telephony service in the prior hyou are designated an ETC fo	officed only fined torce
<410>	Complaints per 1000 customers for fixed vi	oice	0.0
<420>	Complaints per 1000 customers for mobile	voice	
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or gre the prior calendar year for each service are an ETC for any facilities you own, operate,	ater) for broadband service in a in which you are designated	The state of the s
<440>	Complaints per 1000 customers for fixed b	roadband	0.0
<450>	Complaints per 1000 customers for mobile	broadband	

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589		
<015>	Study Area Name	BASCOM MUTUAL	L TEL CO	
<020>	Program Year	2017		
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinha	rt	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 e	ext	988
<039>	Contact Email Address - Email Address of person Identified in data line <030>	kmr@bascomte	Lephone com	
<500>	Certify compliance with applicable service quality standards and consumer pro	tection rules	Yes	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	les Compliance	300589oh510.pdf	

(600) Functionality in Emergency Situations	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	2. Carrier (1. 1)
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmrthascomtelephone com	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
r610>	Descriptive document for Functionality in Emergency Situations	300589oh610.pdf	

	ce Offerings including Voice Rate Data lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data li	ine <030> 4199372222 ext	
<039>	Contact Email Address - Email Address of person identified in data I	ine <030> kmr@bascomtelephone.com	All
	esidential Local Service Charge Effective Date  1/1/2016 ingle State-wide Residential Local Service Charge  11:0	100	

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<0
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
							**************************************	
				See at	tached worksheet			
						15525		
	*							
- in								

	oadbrand Price Offerings lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code 3	00589	
<015>	Study Area Name	BASCOM MUTUAL TEL CC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext	
<030>	Contact Email Address - Email Address of person identified in data line <030s	kmyshagamtalanhana aan	

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	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
	11000								
_									
				- See attac worksheet -	hed				

	erating Companies lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr@bascomtelephone.com	

<810>	Reporting Carrier	Bascom Mutual Telephone Company	
<811>	Holding Company	BTC Multimedia, LLC	300
<812>	Operating Company	NA .	- Allow

l>	<al></al>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
		See attached worksheet	
The state of the s			

(900) Tribal Lands Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0985/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	· · · · · · · · · · · · · · · · · · ·
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	77.50 Mat vo to 1994.700 - 19
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 AXt.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr@bascomtelephone com	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attach	ed Document
If your o	ompany serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	rm the status described on the attached document(s), on line 920,		
demons	trates coordination with the Tribal government pursuant to	Select	
§ 54.313	B(a)(9) includes:	Yes or No or	
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Not Applicable	
<922>	Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
926>	Compliance with Facilities Siting rules		
<927>	Compliance with Environmental Review processes		
	Compliance with Cultural Preservation review processes		
<928>			

(1000) Voice and Broadband Service Rate Comparability Data Collection Form	FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-1  July 2013
<010> Study Area Code	100599

<010>	Study Area Code		300589
<015>	Study Area Name		BASCOM MUTUAL TEL CO
<020>	Program Year		2017
<030>	Contact Name - Person USAC should contact regarding this data		Kathy Reinhart
<035>	Contact Telephone Number - Number of person identified in data line <	:030>	4199372222 ext
<039>	Contact Email Address - Email Address of person identified in data line	<030>	kmr*bascomtelephone.com
<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance	30058	90h1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification		- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	300589	oh1030.pdf

Name of Attached Document

	o Terrestrial Backhaul Reporting ection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	3005#9	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinbart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr*bascomtelephone com	
:1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

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Data Collect			0	C Form 481 MB Control No. 3060-0986/OMB Control No. 3060-0819 y 2013
including Ka	te-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		Ju	γ 2013
<010> St	udy Area Code	300589		
	udy Area Name	BASCOM MUTUAL TEL CC		
	ogram Year	2017		
	ntact Name - Person USAC should contact regarding this data	Kathy Reinhart 4199372222 ext		
	intact Telephone Number - Number of person identified in data line <030> intact Email Address - Email Address of person identified in data line <030>	Kmr#bascomtelephone.com		
Select the and Conn	appropriate responses below (Yes, No, Not Applicable) to note ect America Phase II support as set forth in 47 CFR § 54.313(b)	e compliance as a recipion of the compliance as a recipion of	ent of Incremental High Cost support, High tion reported on this form and in the docu	Cost support to offset access charge reductions, ments attached below is accurate.
In	cremental Connect America Phase I reporting			
<2010>	2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note	that for the July 1		
	2016 certification, this applies to Round 2 recipients			
	Support			
<2011>	3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note	that for the luke 1		
\2011>		a deligibility of a construction of the constr		
	2016 certification, this applies to Round 1 recipients	orincremental		
	Support			
<2022>	Recipient certifies, representing year two after filing	a notice of		
	acceptance of funding pursuant to 54.312(c), that the	locations in		
	question are not receiving support under the Broadb	and Initiatives		
	Program or the Broadband Technology Opportunities	Program for		
	projects that will provide broadband with speeds of a	A STATE OF THE PARTY OF THE PAR		
	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients on			
<2023>				
<2023>	The attachment on line 2024 includes a statement of			
	capital funding expended in the previous year in mee			
	America Phase I deployment obligations, accompanie			
	blocks indicating where funding was spent. This cove	rs year two -		
	54.313(b)(2)(ii). Round 2 recipients only.			
<2024A>	Round 2 Recipient of Incremental Support?			
	0.00			
<2024Ds	Attack list of consus blocks indication where for disc.			
<2024B>	Attach list of census blocks indicating where funding	was spent in year	Name of Attached Document Listin	g
	two - 54.313(b)(2)(ii). Round 2 recipients only.		Required Information	×
<2025A>	Round 1 or Round 2 Recipient of Incremental Support	t?		
<2025B>	Attach geocoded Information for Phase I milestone re	ports (Round 1 for	Name of Attached Document Listin	σ
LOZSO	year three and Round 2 for year two) - Connect Amer		Required Information	5
		ica i uliu , wc	nequired information	
	Docket 10-90, Report and Order, FCC 13-			L w
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

ata Collection For	rrier Additional Documentation (Continued) m eturn Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
Price	Cap Carrier Connect America ICC Support (47 CFR § 54.313(d))	
<2016>	Certification support used to build broadband	
Connect	: America Phase II Reporting (47 CFR § 54.313(e))	
<2017A>	Connect America Fund Phase II recipient?	
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information
<2018>	cap carrier used for capital expenditures in 2015. Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(2)(ii)	Name of Attached Document Listing Required Information
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(2)(v)	
<2020>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in \$54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)	
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)	
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)	
<2027>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)	

(3005) Rate Data Collect	Of Return Carrier Additional Documentation tion Form				FCC Form 481 OMB Control No. 3060-0985/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		300589		
<015>	Study Area Name			MUTUAL T	ET CO
<020>	Program Year	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2017	MOTOAL I	Ell CO
<030>	Contact Name - Person USAC should contact regarding this	data		einhart	
<035>	Contact Telephone Number - Number of person identified i	n data line <030>	41993722	V-555	
<039>	Contact Email Address - Email Address of person identified		-	comtelep	hone.com
		and data line 40502			
complian	the items below to note compliance with five year ce with the financial reporting requirements set fort ments attached below is accurate.				
(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
(3010A)	Milestone Certification {47 CFR § 54.313{f}(1)(i)}		Yes - At	tach Certifica	300589oh3010.pdf
(3010B)	Please Provide Attachment	Name of Attach	ed Document Li	sting Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Com			
(3012B)	Please Provide Attachment	Name of Attach Information	ed Document Li	sting Required	
(3013)	Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2))	(Yes/No)	0	0	
(3014)	If yes, does your company file the RUS annual report  Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance	(Yes/No)			
(3015)	requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)				
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attache Information	ed Document Lis	sting Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the	(Yes/N	o) <b>(</b>	0	
(3019)	boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS			7	
(3020)	Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows			1	
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line			1	
(3022)	3026 pursuant to § 54.313(f)(2), contains: Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for				
(3023)	Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				200580ab202c wdf - 20050a-12227
3026)	Attach the worksheet listing required information	Name of Attache	d Document Lis	ting Required	300589ch3026.pdf, 300589ch3026.xlax

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481	
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3050-0819	
	July 2013	

<010>	Study Area Code	300589
<015>	Study Area Name	BASCOM MUTUAL TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmribascomtelephone com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300589
<015>	Study Area Name	BASCOM MUTUAL TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 4199372222 ext
<039>	Contact Email Address - Email Address of person identified in data I	ne <030> kmrsbascomtelephone.com

#### 4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

#### Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001.** Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

#### Community Anchor Institutions - FCC 14-98 (paragraph 79)

speed and data usage allowances available in the

relevant geographic area.

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

100 to 15 159800		
If yes to 4003A, please provide a response for 4003	18.	
4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to	Name of Attached Document Listing Required Information	
broadband service in the preceding calendar year.  Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	,
4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information	

Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-08 July 2013	
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr@bascomtelephone.com	

# TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

certify that I am an officer of the reporting carrier; my responsibiliti recipients; and, to the best of my knowledge, the information report	es include ensuring the accuracy of the annual reporting requirements for universal service suppo ed on this form and in any attachments is accurate.
Name of Reporting Carrier: BASCOM MUTUAL TEL CO	
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/24/2016
Printed name of Authorized Officer: Kathy Reinhart	
Title or position of Authorized Officer: Assistant Treasurer	
Telephone number of Authorized Officer: 4199372222 ext.	
Study Area Code of Reporting Carrier: 300589	Filing Due Date for this form: 07/01/2016

Certification - Agent / Carrier Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	300589	
<015>	Study Area Name	BASCOM MUTUAL TEL CO	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr@bascomtelephone.co	m

# TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting carrier.
also certify that I am an officer of the reporting carrier; m	esponsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized
agent; and, to the best of my knowledge, the reports and	ta provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:

### TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	: Authorized to File Annual Reports for CAF or LI Recipi	ents on Behalf of Reporting Carrier
l, as agent for the reporting carrier, certify that I am auti the data reported herein based on data provided by the	horized to submit the annual reports for universal service suppor reporting carrier; and, to the best of my knowledge, the informa	t reciplents on behalf of the reporting carrier; I have provided tion reported herein is accurate.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agen	t	
Telephone number of Authorized Agent or Employee of A	gent:	

Attachments

ta Collec	Offerings including Voice Rate Data ction Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> S	Study Area Code	300589	
<015> 5	Study Area Name	BASCOM MUTUAL TEL CO	
<020> P	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart	3,000
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext.	
<039> C	Contact Email Address - Email Address of person identified in data line <030>	kmr@bascomtelephone.com	

<703>

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State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fee
OH	Bascom		FR	11.0	0.0	0.0	0.0	11.0
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	20							
	110							
							10-	
17-033-18-0			35 - 36 - 36 - 36 - 36 - 36 - 36 - 36 -	Sec. No.				
					0300 0.19110 W		### TO THE TOTAL THE TOTAL TO T	
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(710) Broadband Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0985/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	300589
<015>	Study Area Name	BASCOM MUTUAL TEL CO
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Kathy Reinhart
<035>	Contact Telephone Number - Number of person identified in data line <030>	4199372222 ext
<039>	Contact Email Address - Email Address of person identified in data line <030>	kmr#bascomtelephone.com

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State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees		Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select)
сн	BASCOM	45.C	0.0	45.0	5 0	1.0	999999	Cther, NO LIMIT ON USAGE ALLOWANCE
сн	BASCOM	60.0	0.0	60.0	8.0	2.0	999999	Cther, NO LIMIT ON USAGE ALLOWAND
сн	BASCOM	70.0	0.0	70.0	12.0	3.0	999999	Cther, NO LIMIT ON USAGE ALLOWAND
CH	BASCOM	85.0	0.0	85.0	25.0	7.0	299999	Other, NO LIMIT ON USAGE ALLOWAND
сн	BASCOM	100.0	0.0	100.0	35.0	10.C	999999	Other, NO LIMIT ON USAGE ALLOWAND
сн	BASCOM	130.0	0.0	130.0	50.D	15.C	999999	Other, NO LIMIT ON USAGE ALLOWAND
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	erating Companies lection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
				July 2013
<010>	Study Area Code		300589	
<015>	Study Area Name		BASCOM MUTUAL TEL CO	Target No. 18 April 19 April 1
<020>	Program Year		2017	
<030>	Contact Name - Person	USAC should contact regarding this data	Kathy Reinhart	
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	4199372222 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	kmr#bascomtelephone.com	
<810>	Reporting Carrier	Bascom Mutual Telephone Company		
<811>	Holding Company	BTC Multimedia, LLC		
<812>	Operating Company	NA		

13>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
BTC Mult	imedia, LLC		
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	98-397		
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#### **BASCOM MUTUAL TELEPHONE COMPANY**

## 300589oh510.pdf

Line 510, Service Quality Standards and Consumer Protection Rules Compliance

Documentation of the company's compliance with certification requirements pursuant to 47 CFR §54.313(a)(5).

In addition to the rules and regulations contained in Title 47, Code of Federal Regulations, Bascom Mutual Telephone Company is subject to the following Service Quality Standards and Consumer Protection Rules of the Public Utilities Commission of Ohio:

# Ohio Administrative Code

Ohio Administr	ative Code
4901:1-6-09	Eligible Telecommunication Carrier certification (high cost and Lifeline).
4901:1-6-12	Service Requirements for BLES (Basic Local Exchange Service), including installation and
	repair intervals, deposits, payments and disconnection.
4901:1-6-13	Warm line service.
4901:1-6-14	BLES pricing parameters, including late payment charges and reconnection fees.
4901:1-6-15	Directory Information.
4901:1-6-16	Unfair or deceptive acts and practices.
4901:1-6-17	Truth in billing requirements.
4901:1-6-18	Slamming and preferred carrier freezes.
4901:1-6-19	Lifeline requirements.
4901:1-6-20	Discounts for persons with communications disabilities.
4901:1-6-27	Provider of last resort (POLR).
4901:1-6-30	Company records and complaint procedures.
4901:1-6-31	Emergency and outage operations.
4901:1-7-03	Toll presubscription.
4901:1-7-24	Local number portability (LNP).
4901:1-7-26	Competition safeguards (CPNI).
01: 0 : 10	D. C.

# Ohio Revised Code

4927.06	Unfair or deceptive trade practices.
4927.08	Basic local exchange service standards.
4927.09	Access to 9-1-1 service.
4927.11	Access to basic local exchange service.
4927.12	Alteration of rates for basic local exchange service.
4927.13	Lifeline service for eligible residential customers.
4927.14	Adoption of rules for rates for persons with disabilities.
4927.15	Rates, terms and conditions for 9-1-1 and other services.
4927.17	Notice of rates, terms or conditions of service; contact information to be provided on
	bills and notices.
4927.21	Complaints against telephone company.

The company has established policies and procedures designed to protect consumers, including publishing customer rights, formal complaint procedures, and policies related to privacy, slamming and network management. These can be viewed on the company's web site at www.bascomtelephone.com.

The company observes strict compliance to all CPNI rules, including training for new employees, refresher training for current employees, maintaining written practices for handling CPNI and submitting annual certifications to regulatory agencies. The CPNI manual is available for inspection at the company business office. The company uses third party verification to prevent slamming and uses a contracted service order administrator to process LNP requests within the time constraints contained in the rules. Customer billing is performed by a billing vendor that maintains software that complies with all truth in billing requirements, including the information that is required to be displayed on the customer bill. The company maintains a CALEA manual and utilizes a third party vendor to make sure that all CALEA requests are processed in accordance with applicable laws and regulations. The CALEA manual and procedures are filed with the appropriate agencies and are also maintained at the company business office.

The company's Basic Local Exchange Service Tariff, PUCO No. 4, contains BLES pricing, 9-1-1, Lifeline and IntraLATA presubscription information, terms and conditions. The tariff is available at the company business office and in the tariff section of the PUCO website http://www.puco.ohio.gov.

While all of the regulations apply to the regulated, voice services provided by the Company, many also apply to the provision of broadband services, such as CALEA, CPNI, truth in billing, unfair or deceptive acts or practices, emergency operations and network management. The company adheres to those standards that apply to broadband service in the same manner as it does for voice service. Some examples of regulations that do not apply to broadband are Warm Line Service, BLES requirements, directory information and toll presubscription.

Other sections of FCC Form 481 contain additional information regarding the following: Lifeline terms and conditions - Line 1210 Emergency operations - Line 610

#### **BASCOM MUTUAL TELEPHONE COMPANY**

#### 300589oh610.pdf

Line 610, Functionality in Emergency Situations - Voice and Broadband

Documentation of the company's processes implemented to assure compliance with certification requirements pursuant to 47 CFR §54.313(a)(6) and §54.202(a)(2).

Bascom Mutual Telephone Company has an employee call-out procedure in place to mobilize its entire workforce in the event of an emergency situation. The notification process utilizes landline, cellular and internet technologies. In the event of total failure of all communications technologies, company practices include having employees report to the central office to obtain further instructions.

The central office and core network functionality is supported by 8 hours of battery reserve and a 60 kw natural gas generator set capable of running indefinitely for unlimited hours. Customer NID's containing active electronic equipment are supported by 8 hours of continuous talk time battery reserve. The company also maintains a number of portable generator sets that can be deployed in the event they are needed.

The facility network is designed as a diverse-routed fiber optic ring, capable of instantaneously switching traffic around damaged facilities. Employees are trained in fiber optic splicing and the necessary equipment is maintained on-site for rapid deployment and restoration. Separate facilities support the PSTN and broadband network connections to other carriers. In the event that all PSTN facilities are damaged, the switch is capable of both TDM and IP formats, providing the ability to reroute PSTN traffic via dedicated IP facilities to other carriers.

The network is capable of managing traffic spikes caused by emergency situations. This is accomplished by maintaining properly sized trunk groups to the PSTN and by providing substantial broadband backbone bandwidth capable of carrying overflow voice traffic in addition to data traffic.

The capabilities and procedures listed above apply to the Company's voice and broadband networks since many functions are intertwined. For example, the fixed, central office generator set provides power to both the voice switching and circuit equipment as well as the DSLAMs, routers, optical terminals and other broadband equipment. The same is true for the portable generator sets provide emergency power to the voice and broadband equipment located in the field network nodes. Personnel call-out and response is identical for situations that interrupt the voice as well as broadband network.



Line 1010, Voice Services Rate Comparability

Bascom Mutual Telephone Company certifies that its residential voice service rates are less than two standard deviations above the national average urban rate for voice service, as specified in the most recent public notice issued by the Wireline Competition Bureau (DA 15-470). The current voice service rate is \$11.00, which is below the national average urban rate floor of \$21.22. As such, it is well below two standard deviations above the national average urban rate (the reasonable comparability benchmark rate of \$47.48).

Kathy Reinhart, Assistant Treasurer



Line 1030, Broadband Services Rate Comparability

Bascom Mutual Telephone Company certifies that its residential broadband service rates are less than the national urban benchmark rate for broadband service, as specified in the public notice issued by the Wireline Competition Bureau (DA 15-470). The current broadband service rate for 12 Mbps download speed and 3 Mbps upload speed with unlimited usage is \$69.95, which is below the national urban benchmark of \$77.80.

Kathy Reinhart, Assistant Treasurer

#### BASCOM MUTUAL TELEPHONE COMPANY

#### 300589oh1210.pdf

Line 1210, Terms & Conditions of Voice Telephony Lifeline Plans

Bascom Mutual Telephone Co. (SAC 300589) has established terms and conditions for Lifeline customers that incorporate the federal and state requirements as documented in its Basic Local Exchange Service Tariff PUCO No. 4 Section 5, First Revised Sheet No. 1.

The Company shall provide Lifeline service as defined in 47 C.F.R. § 54.401 (a) on a non-discriminatory basis to all qualifying low-income customers. The Company's Lifeline service offering shall comply with all applicable federal and state laws, including, but not limited to, 47 C.F.R. Part 54, Subpart E; the FCC's Lifeline reform order (Report and Order released February 6, 2012, WC Docket No, 11-42, et. al) and any subsequent clarifying orders; Section 4927.13, Revised Code; Rule 4901:1-6-19, Ohio Administrative Code; and, the Commission's nontraditional Lifeline service order (Finding and Order adopted May 23, 2012, Case No. 10-2377-TP-COI) and any subsequent entries and/or orders.

In 2014, the company began participating in the National Lifeline Availability Database (NLAD). This database is designed to help the company identify and resolve duplicate claims for Lifeline Program-supported service and to prevent future duplicates. All applications for Lifeline service are verified using NLAD in order to prevent duplicate service from being established.

The Lifeline discount applies to Basic Local Exchange Service (BLES) as defined by Ohio Revised Code 4927.01(A)(1). For residence customers, BLES consists of local dial tone service, flat-rate telephone exchange service, touch-tone dialing service, access to and usage of 9-1-1 services, provision of a telephone directory at no charge, listing in that directory, per call caller identification blocking services, access to telecommunications relay service and access to toll presubscription, interexchange or toll providers or both, and networks of other telephone companies. The company also provides an optional toll denial feature at no additional charge. The current rate for residential BLES is \$11.00 per month.

The company applies the Lifeline support amount as follows: first, to waive the End User Common Line EUCL) Charge of \$6.50 and second, to discount the residential BLES charge with the remaining balance of the support amount, in compliance with 47 CFR §54.403(b).

Residential BLES customers may also add optional service features and subscribe to a variety of long distance calling plans offered by the company. No discount is applied to these services because the entire Lifeline support amount is exhausted after applying it to the EUCL and BLES charges.

# Five-Year Progress Report Redacted in Its Entirety

# Financial Information Redacted in Its Entirety



Line 3010, Progress Report on 5 Year Plan - Milestone Certification

Pursuant to 47 CFR §54.313(f)(1)(i), Bascom Mutual Telephone Company (SAC 300589) certifies that it is able to provide broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream to all customers within its study area, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to reasonably comparable offerings in urban areas, and that requests for such service are met within a reasonable amount of time.

In support of this certification, the Company's broadband network is 100% fiber-to-the-premise and is capable of speeds in excess of 100 Mbps. Requests for service are typically fulfilled within one to two business days, oftentimes on the same day as the request. Broadband maximum speed offerings are currently 50 Mbps downstream/15 Mbps upstream for residential customers and 50 Mbps downstream/50 Mbps upstream for business customers. The company provides unlimited usage with all of its broadband offerings.

Kathy Reinhart, Assistant Treasurer

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		RATE	FLOOR DATA COL	LECTIC OMB Con	troi Number 306	0-0986			
Block 1	Contact Information								
ROW# DATA ELEMENT				FORMAT OF REQUESTED DATA		RESPONSE			
1 Carrier Study Area Code			6 numeric digit	6 numeric digits 300589					
2	Carrier Study Area Name	alpha characte	rs BASCO	M MUTUAL TEL.	CO.				
3	Service Provider Identification Number		9 numeric digit	s 143001	650				
4	Residential Local Service Charge Effective Date		mm/dd/yy	07/01/1	6				
5	Contact Name		alpha characte	rs REINH	REINHART, KATHY				
6	Contact Telephone Numb	per (include area code)	9 numeric digit	s 419-93	419-937-2222				
7	Sheet Number		numeric digit(s	numeric digit(s)					
8	Total Number of Sheets		numeric digit(s	)					
				ocal Service Rates, Fee	s, and Line Coun	ts			
	Column 1 Residential Local Service Charge	Column 2 State Subscriber Line Charge	Column 3 State Universal Service Fee	Column 4 Manditory Extended Area Service Charge	Column 5 Loops	Column 6 Exchange Name/ Zone Name	Column 7 Class Of Service		
9	11.00	0.00	0.00	0.00		BASCOM MUTUAL TEL CO	RESIDENTIAL		

Rate Floor Template

Certification	of Officer as to	the Accuracy	of the Data Reporte	d for the Rate F	Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier BASCOM	MUTUAL TEL CO	)			
Signature of authorized officer LALLY Kein Wayt				Date 05/23/16	
Printed name of authorized officer KAT	HY REINHART				
Tille or position of authorized officer AS	ST TREASURER				
Telephone number of authorized officer: (	419) 937-2222, ext.		***************************************		
Study Area Code of Reporting Carrier	300589	Filing Due Date for this form (mm/dd/yyyy)	07/01/2016		

This foregoing document was electronically filed with the Public Utilities

**Commission of Ohio Docketing Information System on** 

6/28/2016 3:03:58 PM

in

Case No(s). 16-1115-TP-COI, 16-1116-TP-COI

Summary: Report Redacted Form 481-Carrier Annual Report including Redacted Rate Floor Data on behalf of Bascom Mutual Telephone Company electronically filed by Mr. William A. Adams on behalf of Bascom Mutual Telephone Company