AFFIDAVIT

As an authorized corporate officer of Smithville Communications Inc. (company name), I, Darby A. McCarty (print name), under penalty of perjury, hereby affirm familiarity with and understanding of the requirements of the Communications Act of 1934 as amended by the Telecommunications Act of 1996 with respect to the receipt of Universal Service funds and affirm that funds received will be used only for the provision, maintenance, and upgrading of facilities and services for which the support is intended pursuant to 47 U.S.C. 254(e).

Darby A McCarty
(Signature)

CEO
(Title)

6/19/2017
(Date)

Subscribed and Sworn to before me this 19th day of June, A.D. 2017

NOTARY PUBLIC Amanda M. Flora

My Commission Expires October 18, 2018

Attachment B

2017 High Cost/Connect America Universal Service Funding Certification For Eligible Telecommunications Companies IURC Cause No. 44947

Each ETC that receives high cost or Connect America Fund (CAF) support is required to complete this form in order to receive certification by the Indiana Utility Regulatory Commission that the carrier is eligible to receive such federal support for the coming year. ***The FCC requires ETCs to provide copies of reports and certifications filed pursuant to 47 C.F.R 54.313 to the relevant state commission. Please include a completed copy of the FCC form 481 with this filing.*** *If you have any questions, please contact Sally Getz at 317-234-1543.* ***This information is due back to the Commission on July 3, 2017.***

Carrier Name: Smithville Communications Inc.

Study Area Code 320818

Carrier Address: 1600 W. Temperance St.

Ellettsville, IN 47429

Contact Name: Stephanie Wall

Contact Email: stephanie.wall@smithville.com

Position: Regulatory Compliance Accountant

Phone: (812)935-2215 **FAX:** (812)935-2607

1. With regard to your designated service area(s) please provide the following information, using annualized totals of federal support received for the calendar year 2016 in the following categories, if applicable:

High Cost Loop Support (HCL):	$ 9,540,315.00
Local Switching Support (LSS)	$ 0
Interstate Common Line Support (ICLS)	$ 6,820,532.00
Interstate Access Support (IAS)	$ 0
Connect America Fund Model (CACM)	$ 0
Alternative Connect America Model (ACAM))	$ 0

Frozen High Cost Support (FHCS)	$ 0
Rural Broadband Experiments Fund (RBE)	$ 0
Other Form of High Cost Support	$ 460,740.00
Total Federal High Cost Support:	$ 16,821,587.00

2. Does your company offer a stand-alone voice telephony plan throughout its designated service area (ETC study area)? (170 IAC 7-1.2-9).
Smithville Communications Inc. offers unlimited flat rate local calling in all of its service areas.

Note: A listing of voice price offerings (47 C.F.R. § 54.313(a)(7) will satisfy the Indiana rule which requires each ETC to report annually, its current rate for local exchange service.[1]

Please include a public copy of your company's completed FCC Form 481 and any additional voice rate data required under 47 C.F.R. § 54.313(h) with this filing.

Confidential Information

If portions of the Form 481 were filed confidentially with the FCC, The IURC will also need a confidential copy of the Form 481. To file any confidential information or unredacted copies of the Form 481, follow the procedures listed in the attached Order in Section 2.

[1] 170 IAC 7-1.2-4

Smithville COMMUNICATIONS

1600 West Temperance Street • Ellettsville, IN 47429
(800) 742-4084 • smithville.com

June 21, 2017

Ms. Marlene H. Dortch, Secretary

Federal Communications Commission

445 12th Street, S.W.

Washington, D.C. 20554

Re: Connect America Fund, WC Docket No. 14-58, 47 CFR § 54.313 Annual Reporting Requirements for High-Cost Recipients (Form 481)

Dear Ms. Dortch:

Attached please find Smithville Communications Inc.'s high-cost support recipient annual report pursuant to 47 CFR § 54.313 (Form 481).

Smithville Communications Inc. is filing certain financial information, reported pursuant to 47 CFR §54.313(f)(2), as confidential under the November 16, 2012 Protective Order (DA 12-1857). Pursuant to that Order, each page of this filing has been marked "REDACTED - FOR PUBLIC INSPECTION." The non-redacted version of this information has been marked "CONFIDENTIAL INFORMATION - SUBJECT TO PROTECTIVE ORDER IN WC DOCKET NOS. 10-90, 07-135, 05-337, 03-109, 14-58, GN DOCKET NO. 09-51, CC DOCKET NOS. 01-92, 96-45,WT DOCKET NO. 10-208 BEFORE THE FEDERAL COMMUNICATIONS COMMISSION." As such, Smithville Communications, Inc. requests that the non-redacted version of its submission be withheld from public inspection.

If you have any questions about this filing, please contact the undersigned.

Sincerely,

Darby A. McCarty
CEO
Attachment

REDACTED - FOR PUBLIC INSPECTION

FCC Form 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	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name: Person USAC should contact with questions about this data	Stephanie Wall
<035>	Contact Telephone Number: Number of the person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	stephanie.wall@smithville.com
	Form Type	54.313 and 54.422

(200) Service Outage Reporting (Voice)
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<210> For the prior calendar year, were there any reportable voice service outages? No

<220>

<a> NORS Reference Number	<b1> Outage Start Date	<b2> Outage Start Time	<b3> Outage End Date	<b4> Outage End Time	<c1> Number of Customers Affected	<c2> Total Number of Customers	<d> 911 Facilities Affected (Yes / No)	<e> Service Outage Description (Check all that apply)	<f> Did This Outage Affect Multiple Study Areas (Yes / No)	<g> Service Outage Resolution	<h> Preventative Procedures

REDACTED - FOR PUBLIC INSPECTION

(300) Unfulfilled Service Request
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<300> Unfulfilled service request (voice)

NA

<310> Detail on attempts (voice)

Name of Attached Document

<320> Unfulfilled service request (broadband)

69

320818 line 320.pdf

<330> Detail on attempts (broadband)

Name of Attached Document

(400) Number of Complaints per 1,000 customers
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed voice
<410>	Complaints per 1000 customers for fixed voice	0.0
<420>	Complaints per 1000 customers for mobile voice	
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	Offered only fixed broadband
<440>	Complaints per 1000 customers for fixed broadband	0.0
<450>	Complaints per 1000 customers for mobile broadband	

REDACTED - FOR PUBLIC INSPECTION

(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	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes
<510>	Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance	320818 line 510.pdf
<515>	Certify compliance with applicable minimum service standards	

REDACTED - FOR PUBLIC INSPECTION

(600) Functionality in Emergency Situations
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	320818 line 610.pdf

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<701>	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	[redacted]

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
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 Fees**
				-- See attached worksheet --				

(710) Broadbrand Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<711>

<a1>	<a2>	<b1>	<b2>	<c>	<d1>	<d2>	<d3>	<d4>
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*}**
			-- See attached worksheet --					

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<810>	Reporting Carrier	Smithville Communications Inc.
<811>	Holding Company	Smithville Holding Company, Inc.
<812>	Operating Company	Smithville Communications Inc.

<813>

<a1>	<a2>	<a3>
Affiliates	**SAC**	**Doing Business As Company or Brand Designation**

(900) Tribal Lands Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.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 Attached Document

If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:

		Select Yes or No or Not Applicable
<921>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	
<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	
<928>	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

(1000) Voice and Broadband Service Rate Comparability Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<1000>	Voice services rate comparability certification	Yes
<1010>	Attach detailed description for voice services rate comparability compliance	320818 line 1010.pdf Name of Attached Document
<1020>	Broadband comparability certification	Yes - Pricing is no more than the most recent applicable benchmark announced by the Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	320818 line 1030.pdf Name of Attached Document

(1100) No Terrestrial Backhaul Reporting Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.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 kbps upstream within the supported area pursuant to § 54.313(g).	

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP s://www.smithville.com/about/legal/lifeline

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, ☑

<1222> Details on the number of minutes provided as part of the plan, ☑

<1223> Additional charges for toll calls, and rates for each such plan. ☑

(2005) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011> 3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.

<2022> Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.

<2023> The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.

<2024A> Round 2 Recipient of Incremental Support?

<2024B> Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.

Name of Attached Document Listing Required Information

<2025A> Round 2 Recipient of Incremental Support?

<2025B> Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).

Name of Attached Document Listing Required Information

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

(2005) Price Cap Carrier Additional Documentation
Data Collection Form
Including Rate-of-Return 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?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.

<2018> 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)(1)(ii)(A)

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)(1)(ii)(C)

REDACTED - FOR PUBLIC INSPECTION

(3005) Rate Of Return Carrier Additional Documentation Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

Progress Report on 5 Year Plan

(3009)	Carrier certifies to 54.313(f)(1)(iii)	Yes - Attach Certification	
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		320818 line 3010a.pdf
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	No - No New Community Anchors	
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	◉ ○
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	◉ ○
	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		
(3015)	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		✓
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	320818 line 3017.pdf
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	○ ○
	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		☐
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		☐
(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 3026 pursuant to § 54.313(f)(2), contains:		
(3022)	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 Telecommunications Borrowers		☐
(3023)	Underlying information subjected to a review by an independent certified public accountant		☐
(3024)	Underlying information subjected to an officer certification.		☐
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		☐
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

(3005) Rate Of Return Carrier Additional Documentation (Continued)

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

Financial Data Summary

(3027) Revenue	[redacted]
(3028) Operating Expenses	[redacted]
(3029) Net Income	[redacted]
(3030) Telephone Plant In Service(TPIS)	[redacted]
(3031) Total Assets	[redacted]
(3032) Total Debt	[redacted]
(3033) Total Equity	[redacted]
(3034) Dividends	[redacted]

Name of Attached Document Listing Required Information

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

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.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)

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.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year. Name of Attached Document Listing Required Information

Broadband Deployment Locations – FCC 14-98 (paragraph 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 speed and data usage allowances available in the relevant geographic area. Name of Attached Document Listing Required Information

REDACTED - FOR PUBLIC INSPECTION

Certification - Reporting Carrier **Data Collection Form**	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

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

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: SMITHVILLE TEL CO

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/20/2017

Printed name of Authorized Officer: Darby McCarty

Title or position of Authorized Officer: CEO

Telephone number of Authorized Officer: 8128762211 ext.

Study Area Code of Reporting Carrier: 320818 Filing Due Date for this form: 07/03/2017

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

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	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent)_____ is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities 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 data 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:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information 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 Agent

Telephone number of Authorized Agent or Employee of Agent:

Study Area Code of Reporting Carrier: Filing Due Date for this form:

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

Attachments

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<701>	Residential Local Service Charge Effective Date	1/1/2017
<702>	Single State-wide Residential Local Service Charge	[redacted]

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
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 Fees
IN	All		FR	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]

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(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	320818
<015>	Study Area Name	SMITHVILLE TEL CO
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Wall
<035>	Contact Telephone Number - Number of person identified in data line <030>	8129352215 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	stephanie.wall@smithville.com

<711>

<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached {select}
IN	876/Ellettsville	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	935/Ellettsville	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	936/French Lick	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	938/French Lick	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	879/Gosport	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	851/Griffin	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	383/Hymera	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	837/Lake Monroe	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	994/Lizton	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	862/Owensburg	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	863/Owensburg	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	963/Sharpsville	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	823/Smithville	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	824/Smithville	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	825/Stanford	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	826/Stanford	[redacted]	0.0	[redacted]	20.0	4.0	999999.0	Other, Unlimited Usage
IN	876/Ellettsville	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	935/Ellettsville	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	936/French Lick	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	938/French Lick	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	879/Gosport	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage

(710) Broadband Price Offerings
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
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<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached {select}
IN	851/Griffin	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	383/Hymera	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	837/Lake Monroe	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	994/Lizton	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	862/Owensburg	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	863/Owensburg	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	963/Sharpsville	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	823/Smithville	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	824/Smithville	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	825/Stanford	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	826/Stanford	[redacted]	0.0	[redacted]	1000.0	500.0	999999.0	Other, Unlimited Usage
IN	876/Ellettsville	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	935/Ellettsville	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	936/French Lick	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	938/French Lick	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	879/Gosport	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	851/Griffin	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	383/Hymera	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	837/Lake Monroe	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	994/Lizton	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	862/Owensburg	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage

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(710) Broadband Price Offerings
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<711>

<a1> State	<a2> Exchange (ILEC)	<b1> Residential Rate	<b2> State Regulated Fees	<c> Total Rates and Fees	<d1> Broadband Service - Download Speed (Mbps)	<d2> Broadband Service -Upload Speed (Mbps)	<d3> Usage Allowance (GB)	<d4> Usage Allowance Action Taken When Limit Reached {select}
IN	863/Owensburg	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	963/Sharpsville	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	823/Smithville	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	824/Smithville	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	825/Stanford	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	826/Stanford	[redacted]	0.0	[redacted]	10.0	2.0	999999.0	Other, Unlimited Usage
IN	876/Ellettsville	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	935/Ellettsville	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	936/French Lick	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	938/French Lick	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	879/Gosport	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	851/Griffin	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	383/Hymera	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	837/Lake Monroe	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	994/Lizton	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	862/Owensburg	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	863/Owensburg	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	963/Sharpsville	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	823/Smithville	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	824/Smithville	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	825/Stanford	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage

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IN	826/Stanford	[redacted]	0.0	[redacted]	50.0	10.0	999999.0	Other, Unlimited Usage
IN	876/Ellettsville	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	935/Ellettsville	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	936/French Lick	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	938/French Lick	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	879/Gosport	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	851/Griffin	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	383/Hymera	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	837/Lake Monroe	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	994/Lizton	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	862/Owensburg	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	863/Owensburg	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	963/Sharpsville	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	823/Smithville	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	824/Smithville	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	825/Stanford	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	826/Stanford	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage
IN	659/Lyons	[redacted]	0.0	[redacted]	12.0	12.0	999999.0	Other, Unlimited Usage

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United States Department of Agriculture
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Part A: Balance Sheet

Your response is required by 7 U.S.C. 901 et seq. and subject to federal laws and regulations regarding confidential information, will be treated as confidential.
The Balance Prior Year figures have been brought forward from the December 2015 submission and cannot be edited here. If these figures need to be corrected please revise them in that submission and resubmit.

ASSETS	Balance Prior Year	Balance End of Period
CURRENT ASSETS		
1. Cash and Equivalents		
2. Cash-RUS Construction Fund		
3. Affiliates:		
a. Telecom, Accounts Receivable		
b. Other Accounts Receivable		
c. Notes Receivable		
4. Non-Affiliates:		
a. Telecom. Accounts Receivable		
b. Other Accounts Receivable		
c. Notes Receivable		
5. Interest and Dividends Receivable		
6. Material-Regulated		
7. Material-Nonregulated		
8. Prepayments		
9. Other Current Assets		
10. Total Current Assets (1 thru 9)		
NONCURRENT ASSETS		
11. Investment in Affiliated Companies		
a. Rural Development		
b. Nonrural Development		
12. Other Investments		
a. Rural Development		
b. Nonrural Development		
13. Nonregulated Investments		
14. Other Noncurrent Assets		
15. Deferred Charges		
16. Jurisdictional Differences		
17. Total Noncurrent Assets (11 thru 16)		
PLANT, PROPERTY, AND EQUIPMENT		
18. Telecom, Plant-in-Service		
19. Property Held for Future Use		
20. Plant Under Construction		
21. Plant Adj., Nonop. Plant & Goodwill		
22. Less Accumulated Depreciation		
23. Net Plant (18 thru 21 less 22)		
24. Total Assets (10+17+23)		

LIABILITIES AND STOCKHOLDERS' EQUITY	Balance Prior Year	Balance End of Period
CURRENT LIABILITIES		
25. Accounts Payable		
26. Notes Payable		
27. Advance Billings and Payments		
28. Customer Deposits		
29. Current Mat. L/T Debt		
30. Current Mat. L/T Debt-Rur. Dev.		
31. Current Mat.-Capital Leases		
32. Income Taxes Accrued		
33. Other Taxes Accrued		
34. Other Current Liabilities		
35. Total Current Liabilities (25 thru 34)		
LONG-TERM DEBT		
36. Funded Debt-RUS Notes		
37. Funded Debt-RTB Notes		
38. Funded Debt-FFB Notes		
39. Funded Debt-Other		
40. Funded Debt-Rural Develop. Loan		
41. Premium (Discount) on L/T Debt		
42. Reacquired Debt		
43. Obligations Under Capital Lease		
44. Adv. From Affiliated Companies		
45. Other Long-Term Debt		
46. Total Long-Term Debt (36 thru 45)		
OTHER LIABILITIES & DEF. CREDITS		
47. Other Long-Term Liabilities		
48. Other Deferred Credits		
49. Other Jurisdictional Differences		
50. Total Other Liabilities and Deferred Credits (47 thru 49)		
EQUITY		
51. Cap. Stock Outstand. & Subscribed		
52. Additional Paid-in Capital		
53. Treasury Stock		
54. Membership and Cap. Certificates		
55. Other Capital		
56. Patronage Capital Credits		
57. Retained Earnings or Margins		
58. Total Equity (51 thru 57)		
59. Total Liabilities and Equity (35+46+50+58)		

Total Equity = [redacted] **% of Total Assets**

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United States Department of Agriculture
Rural Development Utilities Programs - Data Collection System

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Part B: Statements of Income and Retained Earnings or Margins

Your response is required by 7 U.S.C. 901 et seq. and subject to federal laws and regulations regarding confidential information, will be treated as confidential.
The Prior Year figures have been brought forward from the December 2015 submission and cannot be edited here. If these figures need to be corrected please revise them in that submission and resubmit.

Item	Prior Year	This Year
1. Local Network Services Revenues		
2. Network Access Services Revenues		
3. Long Distance Network Services Revenues		
4. Carrier Billing and Collection Revenues		
5. Miscellaneous Revenues		
6. Uncollectible Revenues		
7. Net Operating Revenues (1 Thru 5 Less 6)		
8. Plant Specific Operations Expense		
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)		
10. Depreciation Expense		
11. Amortization Expense		
12. Customer Operations Expense		
13. Corporate Operations Expense		
14. Total Operating Expenses (8 Thru 13)		
15. Operating Income or Margins (7 less 14)		
16. Other Operating Income and Expense		
17. State and Local Taxes		
18. Federal Income Taxes		
19. Other Taxes		
20. Total Operating Taxes (17+18+19)		
21. Net Operating Income or Margins (15+16-20)		
22. Interest on Funded Debt		
23. Interest Expense - Capital Leases		
24. Other Interest Expense		
25. Allowance for Funds Used During Construction		
26. Total Fixed Charges (22+23+24-25)		
27. Nonoperating Net Income		
28. Extraordinary Items		
29. Jurisdictional Differences		
30. Nonregulated Net Income		
31. Total Net Income or Margins (21+27+28+29+30-26)		
32. Total Taxes Based on Income		
33. Retained Earnings or Margins Beginning-of-Year		
34. Miscellaneous Credits Year-to-Date		
35. Dividends Declared (Common)		
36. Dividends Declared (Preferred)		
37. Other Debits Year-to-Date		
38. Transfers to Patronage Capital		
39. Retained Earnings or Margins End-Of-Period [(31+33+34)-(35+36+37+38)]		
40. Patronage Capital Beginning-of-Year		
41. Transfers to Patronage Capital		
42. Patronage Capital Credits Retired		
43. Patronage Capital End-Of-Year (40+41-42)		
44. Debt Service Payments for the period(principal interest on long term debt)		
45. Cash Ratio [(14+20-10-11) / 7]		

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Part I: Statement of Cash Flows

Your response is required by 7 U.S.C. 901 et seq. and subject to federal laws and regulations regarding confidential information, will be treated as confidential.

1.	Beginning Cash (Cash and Equivalents plus RUS Construction Fund)	[redacted]
CASH FLOWS FROM OPERATING ACTIVITIES		
2.	Net Income	[redacted]
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities		
3.	Add: Depreciation	[redacted]
4.	Add: Amortization	[redacted]
5.	Other *(Explain)* Adjust to conform with audit	[redacted]
Changes in Operating Assets and Liabilities		
6.	Decrease/(Increase) in Accounts Receivable	[redacted]
7.	Decrease/(Increase) in Materials and Inventory	[redacted]
8.	Decrease/(Increase) in Prepayments and Deferred Charges	[redacted]
9.	Decrease/(Increase) in Other Current Assets	[redacted]
10.	Increase/(Decrease) in Accounts Payable	[redacted]
11.	Increase/(Decrease) in Advance Billings & Payments	[redacted]
12.	Increase/(Decrease) in Other Current Liabilities	[redacted]
13.	Net Cash Provided/(Used) by Operations	[redacted]
CASH FLOWS FROM FINANCING ACTIVITIES		
14.	Decrease/(Increase) in Notes Receivable	[redacted]
15.	Increase/(Decrease) in Notes Payable	[redacted]
16.	Increase/(Decrease) in Customer Deposits	[redacted]
17.	Net Increase/(Decrease) in Long Term Debt (including current maturities)	[redacted]
18.	Increase/(Decrease) in Other Liabilities & Deferred Credits	[redacted]
19.	Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital	[redacted]
20.	Less:Payment of Dividends	[redacted]
21.	Less: Patronage Capital Credits Retired	[redacted]
22.	Other *(Explain)* Adjust to conform with audit	[redacted]
23.	Net Cash Provided/(Used) by Financing Activities	[redacted]
CASH FLOWS FROM INVESTING ACTIVITIES		
24.	Net Capital Expenditures (Property, Plant & Equipment)	[redacted]
25.	Other Long-Term Investments	[redacted]
26.	Other Noncurrent Assets & Jurisdictional Differences	[redacted]
27.	Other *(Explain)* Adj conform w/ audit & recl Beg Bal Cushion Credit	[redacted]
28.	Net Cash Provided/(Used) by Investing Activities	[redacted]
29.	Net Increase/(Decrease) in Cash	[redacted]
30.	Ending Cash	[redacted]

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REDACTED - FOR PUBLIC INSPECTION

United States Department of Agriculture
Rural Development Utilities Programs - Data Collection System

NAVIGATION

Reports
Op. Report-Telecom
Certification
Point Of Contact
Part A
Part B
Part C
Part D
Part E
Part F
Part G
Part H
Part I
Notes

Part C: Subscriber (Access Line), Route Mile, & High Speed Data Information

Your response is required by 7 U.S.C. 901 et seq. and subject to federal laws and regulations regarding confidential information, will be treated as confidential.

	Exchange No. Exchanges	Subscribers (Access Lines) Total (c)	No. Access Lines with BB available (a)	No. of Broadband Subscribers (b)	Total (including fiber) (a)
	Ellettsville	[redacted]	[redacted]	[redacted]	[redacted]
	French Lick	[redacted]	[redacted]	[redacted]	[redacted]
	Gosport	[redacted]	[redacted]	[redacted]	[redacted]
	Griffin	[redacted]	[redacted]	[redacted]	[redacted]
	Hymera	[redacted]	[redacted]	[redacted]	[redacted]
	Lake Monroe	[redacted]	[redacted]	[redacted]	[redacted]
	Lizton	[redacted]	[redacted]	[redacted]	[redacted]
	Lyons	[redacted]	[redacted]	[redacted]	[redacted]
	Owensburg	[redacted]	[redacted]	[redacted]	[redacted]
	Sharpsville	[redacted]	[redacted]	[redacted]	[redacted]
	Smithville	[redacted]	[redacted]	[redacted]	[redacted]
	Stanford	[redacted]	[redacted]	[redacted]	[redacted]
	Mobile Wireless				
▶	Outside Exchange Area				

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