## Filing Type and Contact Info

## Filing Type

This information has been preselected based on High Cost and Lifeline program support paid out in the previous calendar year. If you think the filing type is incorrect, please contact USAC.

High Cost (Section 54.313)

Lifeline (Section 54.422)

#### **Contact Information**

Include contact information for the person best able to answer questions about this form.

| Contact Name (030)                 |                 |  |
|------------------------------------|-----------------|--|
| Stephanie Cassioppi                |                 |  |
| Phone # (035)                      | Ext. (optional) |  |
| (773)399-7940                      |                 |  |
| (xxx) xxx-xxxx                     |                 |  |
| Contact Email Address (039)        |                 |  |
| Stephanie.Cassioppi@UScellular.com |                 |  |

# Functionality in Emergency Situations (600)

### Certify

Functionality in Emergency Situations Certification (600)

Is the carrier able to function in emergency situations?



( ) No

Descriptive Document for Functionality in Emergency Situations (610)



PDF only

## **Operating Companies (800)**

#### **Carrier Names**

Reporting Carrier (810)

United States Cellular Corporation

Holding Company (811) (j)

Telephone and Data Systems, Inc.

Validate the information listed above (811) by selecting one of the following:



Holding Company/Affiliate name listed above is correct. (811A)

) Holding Company/Affiliate name listed above is NOT correct. (811B)

) This study area does not have a Holding Company/Affiliate name. (811D)

## **Operating Company**

**Operating Company (812)** 

United States Cellular Corporation

Upload Operating Company Data (813A, 813B, 813C) (Optional)

Operating Company Data Template

csv 800\_OpCo\_UScellular.csv (2 KB)

CSV only

#### UNITED STATES CELLULAR CORPORATION

State: WA

Sac: 529001

498 ID: 143000667

## Privileged and Contains Confidential Information FCC Form 481 OMB Control #: 3060-0986 (High Cost) & 3060-0819 (Low Income), December 2020 Program Year: 2025

#### UNITED STATES CELLULAR CORPORATION

State: WA

Sac: 529001

498 ID: 143000667

## Privileged and Contains Confidential Information FCC Form 481 OMB Control #: 3060-0986 (High Cost) & 3060-0819 (Low Income), December 2020

Program Year: 2025

# Voice and Broadband Service Rate Comparability (1000)

### **Certify Voice**

#### Voice Services Rate Comparability Certification (1000)

Is the carrier's pricing of fixed voice services no more than two standard deviations above the applicable national average urban rate for voice service? If you answer No to line 1000, please provide an explanation for non-compliance.



# **Terrestrial Backhaul Reporting (1100)**

## Certify

**Terrestrial Backhaul Certification (1100)** 

No

Do terrestrial backhaul options exist?



# Lifeline Terms and Conditions (1200)

### **Upload Document or Link Website**

Upload a descriptive document(s) AND/OR reference a specific link to your company's website.

#### Terms & Conditions of Voice Telephony Lifeline Plans (1210)

PDF only

#### AND/OR

#### Link to Public Website(1220)

https://www.uscellular.com/plans/specialty-plans/lifeline

## **Confirm Information**

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



Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers (1221)



Details on the number of minutes provided as part of the plan (1222)



Additional charges for toll calls, and rates for each such plan (1223)

## Certifications

# **Supply Chain Certifications**

### Section 54.9: Prohibition on the Use of Funds

I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.

If No is selected, a waiver is required for each SAC which is not certified.



## Section 54.10: Prohibition on the Use of Certain Federal Subsidies

I certify that no federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, otherwise obtained, as required by 47 C.F.R. Section 54.10.

If No is selected, a waiver is required for each SAC which is not certified.



#### Section 54.11: Requirements to Remove and Replace

## UNITED STATES CELLULAR CORPORATION State: WA Sac: 529001 498 ID: 143000667

Prior to answering, review section 54.11 of the Commission's rules (47 CFR Section 54.11). Answer Yes if either (1) you comply with section 54.11(a), meaning you do not use covered communications equipment or services, or (2) section 54.11(d) applies to you, meaning you are not yet subject to section 54.11(a) because you are a Reimbursement Program recipient with an unexpired removal, replacement, and disposal term per section 1.50004(h) of the Commission's rules (47 CFR Section 1.50004(h)). Answer No if you do not comply with section 54.11(a), meaning you do use covered communications equipment or services.



# **Accuracy Certifications**

#### Certify

- 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.

I understand that making willful false statements in any part of this report and/or in these certifications is punishable by fine or imprisonment pursuant to 47 U.S.C. Sections 416(c), 503(b)(1)(B), and 18 U.S.C. Section 1001.

#### Signature

#### Officer Name

#### Title

Rebecca Thompson

VP Government Affairs



I understand this is a digital signature, and is the same as if I signed my name with a pen.