Mobility	Fund - §54.1009 Annual Reporting		FCC Form Approved by OMB OMB 3060-1185
	lection Form	Avg. B	urden Estimate per Respondent: 18 Hours
<010>	Study Area Code	528005	
<015>	Study Area Name	United States Cellular Corporation	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Stephanie Cassioppi	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7733997940 ext.	
<039>	Contact Email: Email of the person identified in data line <030>	Stephanie.Cassioppi@USCellular.com	
<040> Has the information required pursuant to §54.1009 been provided with a Form 481 filling (Y/N) <040> <041> Attach a description of the documents filed with the Form 481 reporting <041> 528005WA0412018.pdf			
	<042> Cite the Study Area Code (SAC) for the Fo		9001

<080> <u>Tribal Lands Reporting (y/n?)</u> (Does this study area cover tribal lands? Yes or No)

\supset \odot

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements) Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

(050) Carr	rier Contact Form			FCC Form 690 Approved by OMB OMB Control No. 3060-1185
				Page 2 of 8
<010>	Study Area Code		528005	
<015> <020>	Study Area Name Program Year		United States Cellular Corporation 2018	
<030>	Contact Name - Person USAC should contact regarding	this data	Stephanie Cassioppi	
<035>	Contact Telephone Number - Number of person identif		7733997940 ext.	
<039>	Contact Email Address - Email Address of person identif	fied in data line <030>	Stephanie.Cassioppi@USCellular.com	
Reporting	Carrier / Mobility Fund Phase 1 Winning Bidder			
<110>	FCC Registration Number	4372322		
<111>	Filing Carrier Name	United States Cellu	llar Corporation	
<112>	Winning Bidder Carrier Name	United States Cellu	llar Corporation	
<113>	Street Address (or PO Box)	8410 West Bryn Mawr		
<114>	City	Chicago		
<115>	State	IL		
<116>	Zip-Code			
<117>	Telephone Number	60631		
<118>	Fax Number	7733997940 ext.		
<119>	Email Address	7733998959		
11137	Lindii / Ida ess	Stephanie.Cassioppi	@USCellular.com	
Contact In	nformation			
	if same as above, indicate in this box			
<120>	Name (First, MI, Last, Suffix)	Stephanie Cassioppi		
<121>	Filing Carrier Name	United States Cellu	lar Corporation	
<122>	Street Address (or PO Box)	8410 West Bryn Mawr		
<123>	City	Chicago		
<124>	State	IL		
<125>	Zip-Code			
<126>	Telephone Number	60631		
<127>	Fax Number	7733997940 ext.		
		7733998959		
<128>	Email Address	Stephanie.Cassioppi	@USCellular.com	
Authorize	d Agent Information			
	if no agent, indicate in this box			
<130>	Name (First, MI, Last, Suffix)			
<131>	Company			
<132>	Street Address (or PO Box)			
<133>	City			
<134>	State			
<135>	Zip-Code			
	· · ·			
<136>	Telephone Number			
<137>	Fax Number			
<138>	Email Address			

(060) Cove	erage and Performance Report	FCC Form 690 Ap proved by OMB OMB Control No. 3060 Page 3 of 8	-1185
<010>	Study Area Code	528005	
<015>	Study Area Name	United States Cellular Corporation	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com	
<140>	Coverage and Performance Report Year 01/2017 - 12/2017		
	Form690_Ln_1 Coverage and Performace attachments	40.zip	

<141> <a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Total Road Road Certify that Road Miles per Miles Coverage and Resident **Total Resident** Miles Performance data Census covered Resident Population Population per Block per is uploaded **Newly Reached** Reached by (Yes/no) Population per Census Newly Census State County Census Block Census Block by Service Service Block Reached Block -- See attached worksheet

Percentage of Total

Road Miles covered

by Service

06/18/2018

Percentage of Total

Population Reached by

Service

(070) Urban Rate Comparability Certification Compliance	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185
	Page 4 of 8

<010>	Study Area Code	528005
<015>	Study Area Name	United States Cellular Corporation
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi
<035>	Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com

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

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4) certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate. United States Cellular Corporation Name of Reporting Carrier: CERTIFIED ONLINE Date 06/22/2018 Signature of Authorized Officer: John Gockley Printed name of Authorized Officer: VP-Legal and Regulatory Affairs Title or position of Authorized Officer: 7738643167 ext. Telephone number of Authorized Officer: 528005 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 REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier			
I certify that (Name of Agent)	is authorized to submit the information reported on behalf of the reporting		
	arrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the		
authorized agent; and, to the best of my knowledge, the reports and da	ta provided to the authorized agent is accurate.		
Name of Authorized Agent:			
Name of Reporting Carrier:			
Signature of Authorized Officer or Employee:	Date:		
Printed name of Authorized Officer or Employee:			
Title or position of Authorized Officer or Employee:			
Telephone number of Authorized Officer or Employee:			
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 Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier					
, as agent for the reporting carrier, certify that I am authoriz lata provided by the reporting carrier; and, to the best of m	d to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based or knowledge, the information reported herein is accurate.				
lame of Reporting Carrier:					
lame of Authorized Agent Firm:					
ignature of Authorized Agent or Employee of Agent:	Date:				
lame of Authorized Agent Employee:					
itle or position of Authorized Agent or Employee of Agent					
elephone number of Authorized Agent or Employee of Agent					
tudy Area Code of Reporting Carrier:	Filing Due Date for this form:				

(080) Triba	l Lands Reporting			FCC Form 690
				Approved by OMB OMB Control No. 3060-1185
				Page 5 of 8
<010>	Study Area Code		E2900E	
<015>	Study Area Code Study Area Name		528005 United States Cellular C	orporation
<020>	Program Year		2018	-
<030>	Contact Name - Person USAC should contact regarding t		Stephanie Cassioppi	
<035> <039>	Contact Telephone Number - Number of person identifie		.020.	
<0392	Contact Email Address - Email Address of person identifi	eu iii uata iiile •	<pre>Stephanie.Cassioppi@USCe</pre>	llular.com
<142>	State			
		,		
×1.42×	County			
<143>	County _			
<144>	Tribal Land(s) on which ETC Serves			
	-			_
<145>	Tribal Government Engagement Obligation			
12.0	a. Government 2.1848cment Gangation	Name of Attache	d Document (.pdf)	
	If your company serves Tribal lands, please select (Yes, N		ole) for	
	each of these boxes to confirm the status described on t PDF, on line 145, demonstrates coordination with the T			
	government pursuant to § 54.1004 includes:	ilbui		
			Select	
~1.1 <i>C</i> >			(Yes, No, Not Applicable)	
<146>	Needs assessment and deployment planning with a foc- community anchor institutions;	us on Tribal		
<147>	•			
<148>	Feasibility and sustainability planning; Marketing services in a culturally sensitive manner;			
	•			
<149>	Compliance with Rights of way processes			
<150>	Compliance with Land Use permitting requirements			
<151>	Compliance with Facilities Siting rules			
<152>	Compliance with Environmental Review processes			
<153>	Compliance with Cultural Preservation review processes			
<154>	Compliance with Tribal Business and Licensing requirem	ents		

(090) Project	Update Information	FCC Form 690
		Approved by OMB
		OMB Control No. 3060-1185
		Page 6 of 8
<010>	Study Area Code	528005
<015>	Study Area Name	United States Cellular Corporation
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi
<035>	Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com
<200>	Date Authorized to Receive Support	06/24/2013
<201>	Targeted Completion Date	09/15/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	
<211>	Project Status Description (attached)	528005WA2112018.pdf
\211>	Project Status Description (attached)	
		{Name of PDF attached}
	Please check these boxes below to confirm that the attached PDF, on line	
	211, contains a project status pursuant to §54.1005(b)(2)(v). The information	
	shall be submitted as appropriate.	
<212>	Status of Network Deployment - Network Design	V
<213>	Status of Network Deployment - Construction	<i>V</i>
<214>	Status of Network Deployment - Deployment	V
<215>	Status of Network Deployment - Maintenance	V
<216>	Project Budget Status	·
<217>	Project Plan Status	V
<218>	Network will Support 3G/4G Mobile Service ?) 3G (•) 4G
\210/	The third is appoint 30,40 third in Service :) 3G 🕑 4G

(101) Cert	ification - Reporting Carrier		FCC Form 690 Approved by OMB OMB Control No. 3060-1185
			Page 7 of 8
<010>	Study Area Code	528005	
<015>	Study Area Name	United States Cellular Corporation	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi	
<035>	Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com	

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

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. United States Cellular Corporation Name of Reporting Carrier: 06/22/2018 CERTIFIED ONLINE Signature of Authorized Officer: Date John Gockley Printed name of Authorized Officer: VP-Legal and Regulatory Affairs Title or position of Authorized Officer: 7738643167 ext. Telephone number of Authorized Officer: 07/02/2018 Study Area Code of Reporting Carrier: 528005 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.

06/18/2018 Page 7

FCC Form 690

		Approved by UMB OMB Control No. 3060-1185 Page 8 of 8
Study Area Code	528005	
Study Area Name	United States Cellular Corporation	
Program Year	2018	
Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi	
Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.	
Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com	
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> Transport of the Number of Person Identified in data line <030> Transport of the Number of Person Identified in data line <030> Transport of Identified in Idea Identified in Idea Identified Id

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

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier				
I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; my response agent; and, to the best of my knowledge, the reports and data p	is authorized to submit the information reported on behalf of the ronsibilities include ensuring the accuracy of the data reporting requirements 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:			
, ,	nished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprison der Title 18 of the United States Code, 18 U.S.C. § 1001.	ment		

TO BE COMPLETED BY THE AUTHORIZED AGENT:

(102) Certification - Agent / Carrier

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier						
I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund 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 Age	ent					
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 for	m can be punished by fine or forfeiture under the Communications Ac 18 of the United States Code, 18 U.S.C. § 1001.	ct of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title				

Attachments

(060) Coverage and Performance Report	FCC Form 690
	Approved by OMB
	OMB Control No. 3060-1185

<010>	Study Area Code	528005
<015>	Study Area Name	United States Cellular Corporation
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Stephanie Cassioppi
<035>	Contact Telephone Number - Number of person identified in data line <030>	7733997940 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	Stephanie.Cassioppi@USCellular.com
<140>	Coverage and Performance Report Year	01/2017 - 12/2017

<141> <a1> <a2> <a3> <b1> <b2> <b3> <c1> <c2> <c3> <d> Certify that **Total Road** Coverage and Road Miles Resident **Total Resident** Miles Performacne Population per Census Resident Population **Road Miles** covered per data is uploaded Population per Newly Reached Reached by per Census **Block Newly** Census Block (yes/no) Census Block by Service Service Block Reached Census Block State County Lewis 53041970100 WA 0 0 Yes 114.28

> Percentage of Total Population Reached by Service



Percentage of Total Road Miles covered by Service

l		

FCC Form 690

Mobility Fund Phase 1 - §54.1009 Annual Reporting

Line 041: Description of documents filed with Form 481 SAC 529001

The documents filed with FCC Form 481 for SAC 529001 in its annual report include:

- 529001WA610 Functionality in Emergency Situations
- 529001WA920 Tribal Government Engagement Obligation

FCC FORM 690 LINE 211: PROJECT STATUS DESCRIPTION

Pending both PAYMENT 2 AND PAYMENT 3

Winning Bid Census Tract No. T53041970100 (Lewis, WA)

SAC 528005

Total Bid Amount: \$1,135,416.50

I. Project Summary

United States Cellular Corporation ("U.S. Cellular") currently provides wireless services in Washington. U.S. Cellular operates a 3G/4G wireless voice and data network incorporating state-of the-art technologies including CDMA and 4G LTE (Long Term Evolution). For this particular winning bid census tract U.S. Cellular constructed cell sites in order to provide coverage to the unserved qualifying roads in the eligible census blocks within the winning bid census tract.

U.S. Cellular uses

4G LTE technology to provide the required service. LTE incorporates Multiple In Multiple Out (MIMO) technology, the Orthogonal Frequency Division Multiple Access (OFDMA) air interface in the downlink and Single Carrier FDMA in the uplink. This combination provides high levels of spectral efficiency and network performance, coupled with high network capacity and low latency.

Installation of new cell sites enables U.S. Cellular to meet its public interest obligations to provide rural citizens with access to advanced telecommunications and information technologies that are reasonably comparable to those available in urban areas.

Construction, installation and testing is complete and the actual date of network deployment was . The information provided in this 690 proves that U.S. Cellular has achieved, and continues to achieve, 75% or greater coverage.