FCC Form 499-Q Telecommunications Reporting Worksheet Approval by OMB						
Quarterly Filing for Universal Service Contributors > Please r	ead instru			3060	-0855	
Block 1: Contributor Identification Information		101	Filer 499 ID			
102 Legal name of reporting entity						
103 Filer's IRS employer identification number						
104 Name telecommunications provider is doing business as 105 Affiliated Filers Name						
[All affiliated companies should show same name here. In most cases, the			as no affiliates:			
Affiliated Filers Name will be the holding company name	ses, me					
105.1 Affiliate Filers Name IRS employer identification number		[Enter 9 digit n	umberl			
106 Filer's FCC Registration Number (FRN)		[Enter 10 digit number]				
107 Complete mailing address of reporting entity's corporate headquarters		[Enter 10 digit number]				
Block 2: Contact Information						
108 Person who completed this worksheet First		MI Last				
109 Telephone number of this person		() -				
110 Fax number of this person		() -				
111 Email of this person						
112 Billing address and billing contact person:						
[Bills for Universal Service contributions						
will be sent to this address.]						
Block 3: Contributor Historical and Projected Revenue Information 113 Indicate which Filing due Historical revenues (lines 115-118) for Projected revenues (lines 119-120) for						
113 Indicate which Filing due Historical revenues (I	ines 115-	<u> 118) for</u> <u>Pro</u>	jected revenues (lin	<u>es 119-120) for</u>		
quarterly filing this represents November 1, 2016 July 1 – September 30,	July 1 – September 30, 2016 January 1 – March 31, 2017					
uns represents						
	•					
☐ May 1, 2017 January 1 – March 31,	January 1 – March 31, 2017 July 1 – September 30, 2017					
☐ August 1, 2017 April 1 – June 30, 2017 October 1 – December 31, 2017						
114 Check if using safe harbor to allocate interstate/intrastate revenues for each of the following (as applicable):						
Cellular & broadband PCS: ☐ Paging: ☐ Analog SMR: ☐ Interconnected VoIP: ☐						
Historical billed revenues with no allowance or deductions for Total Revenues Interstate Revenues International Revenue				onal Revenues		
uncollectibles. See Instructions.		(a)	(b)		(c)	
Telecommunications provided to other universal service						
contributors for resale as telecommunications or as						
interconnected VoIP						
116 End-user telecommunications revenues including any pass-						
through charges for universal service contributions, but excluding international-to-international revenues						
117 All other goods and services Column (b) and (c) not requeste				roate d		
		for Lines 117 and 118				
Projected gross-billed end-user interstate and international telecommunications revenues						
including any pass-through charges for universal service contributions, but excluding international-to-international revenues						
International-to-international revenues						
including any pass-through charges for universal service contributions, but excluding						
international-to-international revenues						
Block 4: CERTIFICATION: to be signed by an officer of the reporting entity						
101 7 70 4 74 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
I certify that the revenue data contained herein are privileged and confidential and that public disclosure of such information would likely cause substantial harm to the competitive position of the company. I request nondisclosure of the revenue						
information contained herein pursuant to sections 0.459, 52.17, 54.711 and 64.604 of the Commission's Rules.						
I certify that I am an officer of the above-named reporting entity, that I have examined the foregoing report and to the best of my knowledge, information and						
belief, all statements of fact contained in this Worksheet are true, that said Worksheet is an accurate statement of the affairs of the above-named company for						
the quarter and that the projections of gross-billed and collected revenues represent a good-faith estimate based on company procedures and policies.						
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122 Signature						
123 Printed name of officer First		MI	Last			
124 Position with reporting entity						
125 Email of officer (Required if available)						
126 Date						
AAR DIL DIL						
To the state of th						
Do not mail checks with this form. File this form online: http://www.usac.org/about/tools/e-file.aspxFor additional information regarding this worksheet contact: Telecommunications Reporting Worksheet Info: (888)641-8722 or via email: Form 499@usac.org						
PERSONS WILLFULLY MAKING FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. §1001						
Save time, avoid problems – file electronically at http://forms.universalservice.org FCC Form 499-Q /January 2017						