

Instructions for Completing the Inmate Calling Services Annual Reporting Form (FCC Form 2301(a))

PURPOSE OF FORM

FCC Form 2301(a) is required to be submitted to the Federal Communications Commission's (FCC or Commission) Wireline Competition Bureau (WCB or Bureau) by April 1st of each year. The form must be completed by each provider of inmate calling services (ICS) to facilitate transparency in rates, terms, and fees and to ensure that providers of ICS comply with the Commission's rules. FCC Form 2301(a) can be found on the FCC's website at <https://www.fcc.gov/general/ics-data-collections>.

Throughout these instructions, the service provider may be referred to as "you." A service provider is any entity that provides inmate calling service, which is defined as a service that allows inmates to make calls to individuals outside of the prison or jail where the inmate is being held, regardless of the technology used. Other terms used in the Annual Reporting Form are defined below.

FILING REQUIREMENTS AND GENERAL INSTRUCTIONS

Who must file the FCC Form 2301(a)?

FCC Form 2301(a) must be completed by each provider of ICS.

When to File

FCC Form 2301(a) should be submitted annually, along with the provider's annual certification, by April 1 of each year.

Where to File

Submit FCC Form 2301(a) by filing and certifying the completed form electronically, using the Internet, by accessing the ECFS: <https://www.fcc.gov/ecfs/>.

Compliance

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

Service providers must provide all of the information requested in FCC Form 2301(a). A valid entry must be submitted on the form for each component of the required information. These instructions set forth the requirements for a valid entry. If you have any questions about completing this form, please contact the Bureau at 202-418-1520, before submitting the form. If the form is not completed properly, the form may be rejected and/or returned to you.

I: Basic Information

Block 1 of FCC Form 2301(a) asks for the provider's basic identification information and contact person data.

Item (1) – Provide the name under which the provider offers service. If the provider offers ICS under more than one name, list all relevant names.

Item (2) – Provide the relevant time period for the information the report covers.

Item (3) – Provide the name and title of the officer completing FCC Form 2301(a). The officer may be the Chief Executive Officer (CEO), Chief Financial Officer (CFO), or another senior executive with first-hand knowledge of the accuracy and completeness of the information provided.

Item (4) – Provide the business telephone number with area code (containing 10 digits) for the officer identified in Item (3).

Item (5) – Provide the business email address of the officer identified in Item (3).

Item (6) – Provide the total number of correctional facilities in which the provider offers inmate calling service. For purposes of this form, a “correctional facility” refers to a prison or jail, as those terms are defined below.

Item (7) – List the number of prisons in which the provider currently offers ICS. For purposes of this form, a “prison” is defined as a facility operated by a territorial, state, or federal agency that is used primarily to confine individuals convicted of felonies and sentenced to terms in excess of one year. The term “prison” also includes public and private facilities that provide outsource housing to other agencies, such as State Departments of Correction and the Federal Bureau of Prisons; and facilities that would otherwise fall under the definition of a jail but in which the majority of inmates are post-conviction or are committed to confinement for sentences of longer than one year.

Item (8) – List the number of jails in which you currently offer ICS that have an average daily population (ADP) of 0-349. For purposes of this form, the “ADP” is defined as the sum of all inmates in a facility for each day of the preceding calendar year, divided by the number of days in the year. For purposes of this form, a “jail” is defined as a facility of a local, state, or federal law enforcement agency that is used primarily to hold individuals who are (1) awaiting adjudication of criminal charges; (2) post-conviction and committed to confinement for sentences of one year or less; or (3) post-conviction and awaiting transfer to another facility. The term “jail” also includes city, county, or regional facilities that have contracted with a private company to manage day-to-day operations; privately-owned and operated facilities primarily engaged in housing city, county, or regional inmates; facilities used to detain individuals pursuant to a contract with U.S. Immigration and Customs Enforcement; and juvenile detention facilities and secure mental health facilities that operate outside of jail or prison institutions.

Item (9) - Provide the number of jails you currently serve that have an average daily population (ADP) of 350-999, using the definitions of “ADP” and “jail” found in the instructions for Item (8).

Item (10) - Provide the number jails you currently serve that have an average daily population (ADP) of 1000 or more, using the definitions of “ADP” and “jail” found in the instructions for Item (8).

II: ICS Rates

Facility Name – In this column, provide the names of all prisons or jails in which you offer ICS.

Facility Type – In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails) – In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark “N/A.”

Intrastate Rate – In this column, provide the per-minute rate you charge for intrastate ICS calls at each correctional facility you serve. Intrastate calls are defined as any communication that originates and terminates in the same state or territory.

Intrastate Rates Different from Listed Rate – In this column, please enter “Yes” if you charge a per-minute rate different from the Intrastate Rate (listed in the preceding column) for any minute of an ICS communication. For example, if you charge a rate that is greater than the Intrastate Rate for the first minute of a call, you should enter “Yes” in this column. Please enter “No” in this column if you charge the Intrastate Rate for every minute of an ICS communication.

Interstate Rate – In this column, provide the per-minute interstate rate you charge for interstate calls at each correctional facility you serve. Pursuant to 47 U.S.C. §153(22), interstate communication is defined as any communication or transmission from any state, territory, or possession of the United States (other than the Canal Zone), or the District of Columbia, to any other state, territory, or possession of the United States (other than the Canal Zone), or the District of Columbia.

Interstate Rates Different from Listed Rate – In this column, please enter “Yes” if you charge a per-minute rate different from the Interstate Rate (listed in the preceding column) for any minute of an ICS communication. For example, if you charge a rate that is greater than the Interstate Rate for the first minute of a call, you should enter “Yes” in this column. Please enter “No” in this column if you charge the Interstate Rate for every minute of an ICS communication.

International Rate – If you offer a single unitary rate for international calls, you should list that rate in this column. If your international rates vary depending on the country in which the call terminates, you should list all of the relevant rates in an appendix. For purposes of this form, international ICS calls are communications that originate in a prison or jail, as those terms are defined above, in the United States and terminate in a foreign country.

II(a): Narrative Description of ICS Rates

Intrastate Rates Different from Listed Rate – In this space, provide all rates for any minutes of an ICS call where you charge a rate different from the Intrastate Rate provided in Section II. For example, if you charge a rate that is greater than the Intrastate Rate for the first minute and fifth minute of an ICS call, you should report an answer that identifies the per-minute rates for the first and fifth minute, and indicates which minutes of a call are subject to the Intrastate Rate (e.g.: “For the first minute of an ICS call, the per-minute rate is \$[x]. For the fifth minute of an ICS call, the per-minute rate is \$[y]. For all other minutes of an ICS call, the per-minute rate equals the Intrastate Rate.”).

Interstate Rates Different from Listed Rate – In this space, provide all rates for any minutes of an ICS call where you charge a rate different from the Interstate Rate provided in Section II. For example, if you charge a rate that is greater than the Interstate Rate for the first minute and fifth minute of an ICS call, you should report an answer that identifies the per-minute rates for the first and fifth minute, and indicates which minutes of a call are subject to the Interstate Rate (e.g.: “For the first minute of an ICS call, the per-minute rate is \$[x]. For the fifth minute of an ICS call, the per-minute rate is \$[y]. For all other minutes of an ICS call, the per-minute rate equals the Interstate Rate.”).

III: Ancillary Service Charges

Facility Name: In this column, provide the names of all prisons or jails in which you offer ICS.

Facility Type: In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails): In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as those terms are defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark "N/A."

List of Ancillary Fees (types): In this column, please list each type of permitted ancillary service charge that the provider charges at the relevant facility. An ancillary service charge is defined as any charge that a consumer, defined as the party paying an ICS provider, may be assessed for the use of inmate calling services that are not included in the per-minute charges assessed for individual calls. Ancillary service charges that may be charged include the following five fees:

- **Automated Payment Fees:** credit card payment, debit card payment, and bill processing fees, including fees for payments made by interactive voice response (IVR), web, or kiosk.
- **Fees for Single-Call and Related Services:** billing arrangements whereby an inmate's collect calls are billed through a third party on a per-call basis, where the called party does not have an account with the provider of inmate calling services or does not want to establish an account.
- **Live Agent Fee:** a fee associated with the optional use of a live operator to complete inmate calling service transactions.
- **Paper Bill/Statement Fees:** fees associated with providing customers of inmate calling services an optional paper billing statement.
- **Third-Party Financial Transaction Fees:** the exact fees, with no markup, that providers of inmate calling services are charged by third parties to transfer money or process financial transactions to facilitate a consumer's ability to make account payments via a third party.

Charge for Each Ancillary Fee: In this column, please list the amount billed to consumers for each type of ancillary service fee that the provider charges.

Number of Times Each Fee Has Been Charged: In this column, please list the number of times the provider has assessed each type of each ancillary service fee to customers over the previous calendar year.

IV. Variable Site Commission Payments

Facility Name: In this column, provide the names of all prisons or jails in which you offer ICS.

Facility Type: In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails): In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as those terms are defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark "N/A."

Monthly Amount of Variable Site Commission Payments: In this column, enter the average monthly dollar amount paid in variable site commissions. For the purposes of this form, variable site commissions are commissions based on minutes of use or a percentage of a provider's ICS revenues. The monthly

average should be calculated by dividing the total amount of variable site commissions payments paid over the reporting period by 12 months. For the purposes of this form, site commissions are defined as any form of monetary payment, exchange of services or goods, fee, technology allowance, or product that a provider of inmate calling services may pay, give, donate, or otherwise provide to an entity with which the provider of inmate calling services enters into an agreement to provide ICS, a governmental agency that oversees a correctional facility, the city, county, or state where a facility is located, or an agent of any such facility.

V. Fixed Site Commission Payments

Contracting Party: In this column, list all of the contracts for the provision of ICS that the provider currently holds. The provider should identify the specific party with which the provider negotiated the contract (e.g., “Contract with [State’s] Department of Corrections”).

Contract Identifier: In this column, list a unique identifier for each contract for the provision of ICS that the provider currently holds.

Fixed Site Commissions Required by Contract: In this column, enter the dollar amount paid, pursuant to the contract, in fixed site commissions over the relevant reporting period. For the purposes of this form, fixed site commissions are commissions that are assessed or paid without regard to the amount of ICS revenue generated by the provider. Fixed site commissions include, but are not limited to minimum annual guarantee payments or other lump-sum payments providers agree to make pursuant to ICS contracts. For the purposes of this form, site commissions are defined as any form of monetary payment, exchange of services or goods, fee, technology allowance, or product that a provider of inmate calling services may pay, give, donate, or otherwise provide to an entity with which the provider of inmate calling services enters into an agreement to provide ICS, a governmental agency that oversees a correctional facility, the city, county, or state where a facility is located, or an agent of any such facility.

Facilities Covered by Contract: In this column, enter all correctional facilities, as defined in the instructions for Section I, Item (6), above, that are covered by each contract that the provider currently holds.

Facility Type: In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails): In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as those terms are defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark “N/A.”

VI. Video Calling Services

Facility Name: In this column, provide the names of all correctional facilities in which you offer ICS.

Facility Type: In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails): In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as those terms are defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark “N/A.”

Total Video Calling Minutes of Use: In this column, please report the total minutes of use (MOU) for which the provider charged its customers for video calls to or from a jail or prison during the prior calendar year. For purposes of this form, “video calling” means any service that allows inmates to communicate with other parties via video, whether the other party is physically present at the correctional facility or is calling from another location. “Video calling” includes, but is not limited to, video visitation

Per-Minute Rate for Video Calling: In this column, provide the per-minute rate the provider charges for video calling at each facility the provider serves. If you charge different rates for different video calling services, please list each video calling service separately, along with the applicable per-minute rate for that service.

List of Ancillary Fees (types): In this column, please list each type of permitted ancillary service charge that the provider charges at the relevant facility, as defined in Section III, above.

Charge for Each Ancillary Fee: In this column, please list the amount billed to consumers for each type of ancillary service fee that the provider charges.

Number of Times Each Fee Has Been Charged: In this column, please list the number times the provider has assessed each type of each ancillary service fee to customers over the relevant reporting period.

VII. Disability Access

Facility Name: In this column, provide the names of all prisons or jails in which you offer ICS.

Facility Type: In this column, indicate whether the relevant facility is a prison, as defined in the instructions for Section I, Item (7), or a jail, as defined in the instructions for Section I, Item (8), above.

ADP (for jails): In this column, provide the average daily population (ADP) that corresponds to each jail the provider serves, as defined in the instructions for Section I, Item (8), above. For prisons, leave blank, or mark “N/A.”

Number of Disability-Related Calls: In this column, list the number of ICS calls made in that facility using TTY-based services.

Number of Problems Experienced with Disability-Related Calls: In this column, provide the number of problems the provider is aware of related to the provision of TTY-based calls over the relevant reporting period. These problems could include, for example, dropped calls, and calls with poor quality connections.

List of Ancillary Fees (types): In this column, please list each type of permitted ancillary service charge that the provider charges at the relevant facility, as defined in Section III, above.

Charge for Each Ancillary Fee: In this column, please list the amount billed to consumers for each type of ancillary service fee that the provider charges.

Number of Times Each Fee Has Been Charged: In this column, please list the number times the provider has assessed each type of each ancillary service fee to customers over the relevant reporting period.