

DOCKET NO. UM 1768

**Cover Sheet for Submission of
2016 Annual ETC Certification Reports**

Name of Eligible Telecommunications Carrier: Trans-Cascades Telephone Co.

Filing date: _____ July 1, 2016 _____

Is this: Original submission? _____
OR
Revised submission? _____

Person to contact for questions:

Name Summer McPherson

Phone number 503-630-8977

E-mail address mcpersons@cuaccess.net

Documents included in this filing (please check applicable items):

_____ CAF/ICC Support (47 CFR § 54.304)

Rate Floor Data (47 CFR § 54.313(h)) – if separate from Form 481

Form 481 (High-cost per 47 CFR § 54.313, Low-income per 54.422)¹

_____ Form 690 (Mobility Fund per 47 CFR § 54.1009)

Affidavit for High-Cost Support

Filing deadlines: The deadlines for filing items required by 47 CFR § 54 are the same as the deadlines for filing with the FCC. The notarized affidavit for high-cost support must be filed no later than the due date for the FCC Form 481. Based on current information, it appears that all items other than CAF/ICC support data are due by July 1, 2016. The CAF/ICC support data are due the same day as the ETC's interstate access tariff filing.

If revisions to an original submission are filed with the FCC or USAC, a copy of the revisions must be filed with the Oregon Commission no later than five business days following submission to the FCC or USAC.

¹ Lifeline-only ETCs must provide all information specified in 47 CFR § 54.422(b) even if the ETC does not submit this information to the FCC.

AFFIDAVIT CERTIFYING USE OF UNIVERSAL SERVICE FUNDS

I, *Brenda Crosby*, being of lawful age and duly sworn, on my oath, state that I am the *President* of *Trans-Cascades Telephone* and that I am authorized to execute this Affidavit on behalf of the Company, and the facts set forth in this Affidavit are true to the best of my knowledge, information and belief.

Pursuant to the requirements of the Federal Communications Commission, 47 C.F.R. § 54.314, *Trans-Cascades Telephone* hereby certifies to the Public Utility Commission of Oregon that it is eligible to receive federal high-cost support for the program years cited.

I attest that all federal high-cost support provided to *Trans-Cascades Telephone* in Oregon was used in the preceding calendar year (2015) and will be used in the coming calendar year (2017) only for the provision, maintenance and upgrading of facilities and services for which the support is intended.

DATED this 19th day of May, 2016.

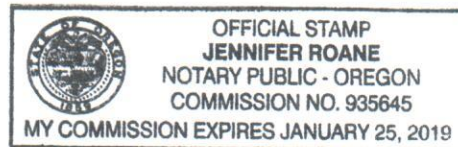
By: *Brenda Crosby* (Officer's Name)
Its: *President* (Officer's Title)

SUBSCRIBED AND SWORN to before me this 19th day of May, 2016.

Jennifer Roane

Notary public in and for the State of *Oregon*

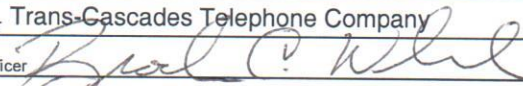
My Commission Expires: *January 25, 2019*



Rate Floor Template

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier				Trans-Cascades Telephone Company	
Signature of authorized officer					
Printed name of authorized officer			Brooke Wheeler		
Title or position of authorized officer			CFO		
Telephone number of authorized officer: (503) 630-8952 ext.					
Study Area Code of Reporting Carrier		532378		Filing Due Date for this form (mm/dd/yyyy)	
				07/01/2016	
<input checked="" type="checkbox"/> I certify that our company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2016 and has no monthly residential rates (plus charges as defined) less than \$21.93.					

**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	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2017
<030> Contact Name: Person USAC should contact with questions about this data	Summer McPherson
<035> Contact Telephone Number: Number of the person identified in data line <030>	5036308977 ext.
<039> Contact Email Address: Email of the person identified in data line <030>	mcpersons@cuaccess.net
Form Type	54.313 and 54.422

(100) Service Quality Improvement Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<110> Has your company received its ETC certification from the FCC? (yes / no)

If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? (yes / no)

If your answer to Line <111> is yes, please file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service.

<112> Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your company is a CETC which only receives frozen support, your progress report is only required to address voice telephony service.

532378or112.pdf

Name of Attached Document

Please select the appropriate responses below (Yes, No, Not Applicable) to confirm that the attached document(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to §54.202(a). The information shall be submitted at the wire center level or census block as appropriate

<113> Maps detailing progress towards meeting plan targets

<114> Report how much universal service (USF) support was received

<115> How much (USF) was used to improve service quality and how support was used to improve service quality

<116> How much (USF) was used to improve service coverage and how support was used to improve service coverage

<117> How much (USF) was used to improve service capacity and how support was used to improve service capacity

<118> Provide an explanation of network improvement targets not met in the prior calendar year.

Yes
Yes
Yes
Yes
Yes
Not Applicable

**(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	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035> Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<300> Unfulfilled service request (voice)

<310> Detail on attempts (voice)

Name of Attached Document

<320> Unfulfilled service request (broadband)

<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	532378	
<015>	Study Area Name	TRANS-CASCADES TEL	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson	
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net	
<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		

**(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	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net
<500>	Certify compliance with applicable service quality standards and consumer protection rules	Yes

532378or510.pdf

<510> Descriptive document for Service Quality Standards & Consumer Protection Rules Compliance

**(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	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	532378or610.pdf

(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	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Summer McPherson
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<039> Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<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 --

**(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	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2017
<030> Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035> Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<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 document(s), on line 920, demonstrates coordination with the Tribal government pursuant to 54.313(a)(9) includes

- <921> Needs assessment and deployment planning with a focus on Tribal
- <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.

Select Yes or No or Not Applicable

**(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	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<1000> Voice services rate comparability certification Yes

<1010> Attach detailed description for voice services rate comparability compliance

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

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	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<1100> Certify whether terrestrial backhaul options exist (Y/N)

<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
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<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
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<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

532378or1210.pdf

Name of Attached Document

<1220> Link to Public Website

HTTP

“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.

(2000) Price Cap Carrier Additional Documentation Data Collection Form <i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010>	Study Area Code	532378
<015>	Study Area Name	TRANS-CASCADES TEL
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Summer McPherson
<035>	Contact Telephone Number - Number of person identified in data line <030>	5036308977 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

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

<2010> 2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the July 1 2016 certification, this applies to Round 2 recipients of Incremental Support	<input style="width: 100%; height: 20px;" type="text"/>	
<2011> 3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1 2016 certification, this applies to Round 1 recipients of Incremental Support	<input style="width: 100%; height: 20px;" type="text"/>	
<2022> Recipient certifies, representing year two 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.	<input style="width: 100%; height: 20px;" type="text"/>	
<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 two - 54.313(b)(2)(ii). Round 2 recipients only.	<input style="width: 100%; height: 20px;" type="text"/>	
<2024A> Round 2 Recipient of Incremental Support?	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<2024B> Attach list of census blocks indicating where funding was spent in year two - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	<input style="width: 100%; height: 20px;" type="text"/>
<2025A> Round 1 or Round 2 Recipient of Incremental Support?	<input style="width: 100%; height: 20px;" type="text"/>	
<2025B> Attach geocoded Information for Phase I milestone reports (Round 1 for year three and Round 2 for year two) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-	Name of Attached Document Listing Required Information	<input style="width: 100%; height: 20px;" type="text"/>
<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		<input style="width: 100%; height: 20px;" type="text"/>

(2000) Price Cap Carrier Additional Documentation (Continued)

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?

<2017B> Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price

Name of Attached Document Listing
Required Information

cap carrier used for capital expenditures in 2015.

<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)(2)(ii)

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)(2)(v)

<2020> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)

<2021> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)

<2026> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)

<2027> Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)

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<039>	Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring 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.

(3009) Progress Report on 5 Year Plan
Carrier certifies to 54.313(f)(1)(iii)

(3010A) Milestone Certification {47 CFR § 54.313(f)(1)(i)} Yes - Attach Certification

(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

(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) for 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)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010> Study Area Code	532378
<015> Study Area Name	TRANS-CASCADES TEL
<020> Program Year	2017
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<039> Contact Email Address - Email Address of person identified in data line <030>	mcpersons@cuaccess.net

Financial Data Summary

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

Redacted
for Public
View

<010>	Study Area Code	532378
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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

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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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:	TRANS-CASCADES TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date 06/24/2016
Printed name of Authorized Officer:	Brooke Wheeler
Title or position of Authorized Officer:	CFO
Telephone number of Authorized Officer:	5036308952 ext.
Study Area Code of Reporting Carrier:	532378 Filing Due Date for this form: 07/01/2016
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

Trans-Cascades Telephone Company 2015

PROGRESS REPORT ON SERVICE QUALITY IMPROVEMENT PLAN

PREAMBLE

This document is an integral part of the Company's 2015 Annual Report, as attached to Form 481. It is in compliance with §54.313(a)(1) adopted in the FCC's USF/ICC Transformation Order (11-161) and incorporates all further clarifications identified in subsequent Reconsideration Orders, as applicable, that were in effect at the time the Annual Report was due by Rule, to the requisite regulatory authorities.

Trans-Cascades Telephone Company advises that the environment in which the Company operates is dynamic, not static. As a result, certain network targets identified in its initial 5 Year Network Improvement Plan filed in 2014, may be modified in response to regulatory decisions that have been subsequently adopted, and as their implication upon the Company's financial viability in providing the required services and service level quality became known.

Modifications to the network plan may also have been taken due to changes in technology (vendor)-driven support, weather, or other emergency related contingencies.

Targets not met or changed since the initial 5 Year Plan filing are identified and reasons provided for those changes.

UNIVERSAL SERVICE SUPPORT RECEIVED IN 2015

Redacted for Public View

Universal Service Support funds are used to: 1) maintain, upgrade, and improve the Company's network and, 2) cover operating expenses and debt commitments as necessary to permit it to offer a high level of service for both voice and broadband within the authorized serving area.

USF support will continue to be included in the Company's current revenue accounts and forward-looking projections. Revenues, in the aggregate, are used for both capital expenditures as well as to cover operating expenses and fixed costs incurred to obtain capital from lenders. The Company does not segregate USF separately for purposes of capital and operating expenditures; USF is expended in the same proportion as its contribution is to the Company's aggregated revenue amount.

In the accompanying 2015 project detail, expenditures for network improvements sometimes involve service quality, coverage and capacity as an integrated improvement project and are not mutually exclusive from one another. In terms of cost, projects involving multiple qualifiers are of equal dollar equivalence. Where a project involves a single qualifier, it is so noted.

PROGRESS REPORT

2015

Clarno FttP: This project was expected to begin in 2015. We are waiting for the contractor to break ground on three new homes; however this did not happen in 2015.

**Redacted for Public
View**

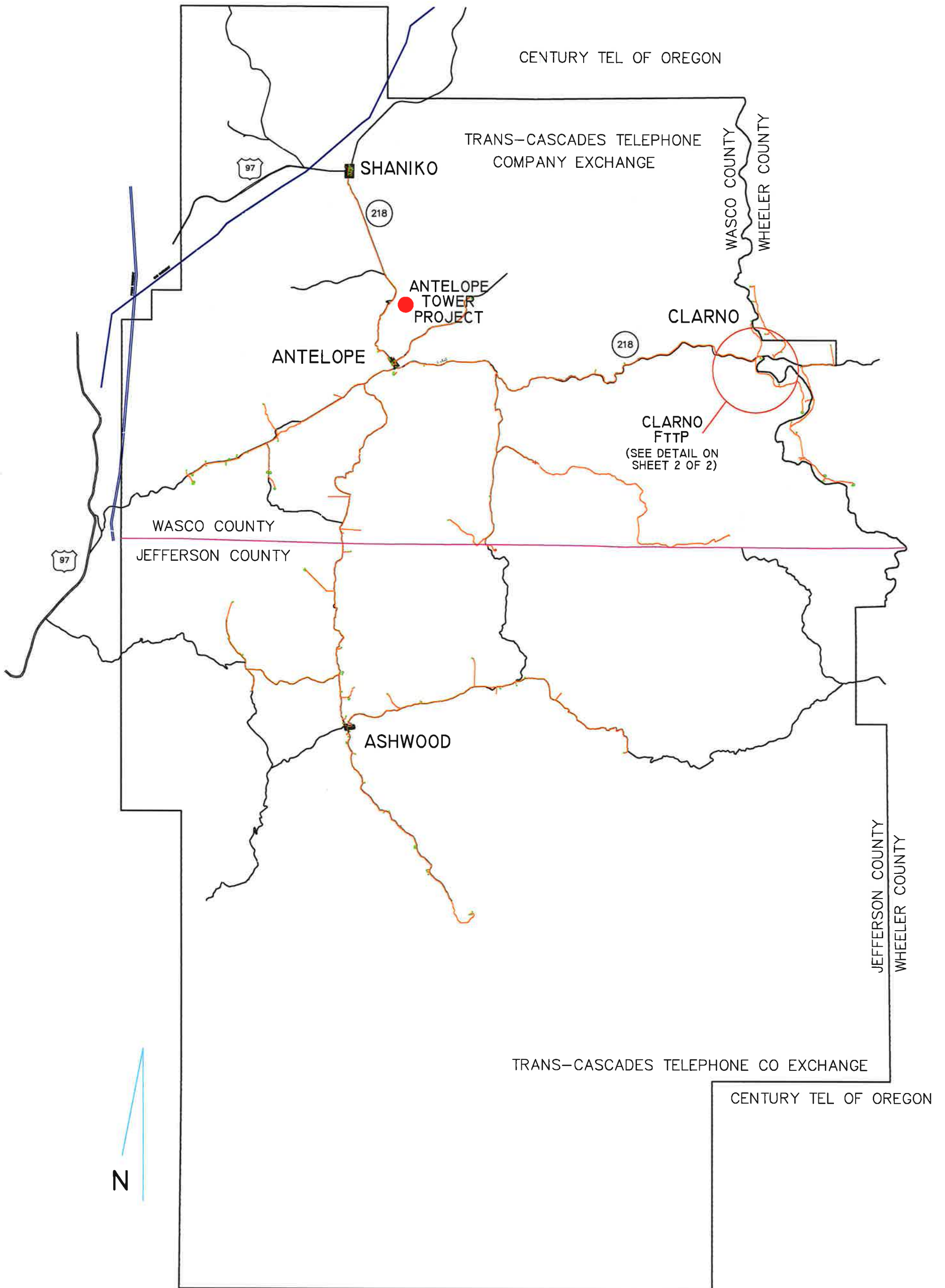
**NETWORK IMPROVEMENT PROJECTS-PROGRESS REPORT
AS OF 2015 ANNUAL REPORT SUBMISSION - JULY 1, 2016**

Z:\Trans-Cascades\Outside Reports\2016\Form 481 2016\2016 TC NETWORK UPGRADE DETAILS.xlsx\2015

MAP REF.	WIRE CENTER NAME & CLLI	DESCRIPTION of IMPROVEMENT	PURPOSE	COST ESTIMATE	ACTUAL COST	REGULATED % ALLOCATION	AMOUNT IN USF SUPPORT AREA	% VOICE	% BROADBAND	AREA IMPACTED	POPULATION IMPACTED	TARGET COMPLETION DATE	ACTUAL COMPLETION DATE	Notes
	A	B		C	D	E	F=CxE	***	***	***	***	***	***	
	2015 Antelope Exchange	Antelope Tower Project Replace failing service drop	Service Quality and Capacity Service Quality						50% 50%	893 sq miles .250 sq mile	179 1	4/1/2015 12/31/2015	6/23/2015 12/31/2015	

Redacted
for Public
View

NOTES 2015 TOTAL PROJECTS





Trans Cascades Telephone Company

PO Box 189 Estacada, Oregon. 97023

Fax (503) 630-8934

Phone (503) 630-4202

Consumer Protection

Trans Cascades Telephone Company complies with the requirements of 47 CFR Part 64 Subpart U, Customer Proprietary Network Information and the Federal Trade Commission Red Flag rules to prevent identity theft. A manual for each of those programs is in place and is part of the employees' handbook. Employee training is conducted annually and new hires are instructed on the programs as required by their job functions.

Service Quality Standards

Voice

Trans Cascades Telephone Company complies with the service standards of the State of Oregon as promulgated in the Oregon Administrative Rules **860-034-0390**, Retail Telecommunications Service Standards for Small Telecommunications Utilities.

Broadband

Trans Cascades Telephone Company complies with the service standards as noted in NECA Tariff #5 and is committed to provide the highest quality service to its broadband customers..



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Trans-Cascades Telephone Company is able to remain functional in an emergency situation. Please see the specific information below in regard to back-up power, ability to reroute traffic around damaged facilities, and the capability to manage traffic spikes resulting from emergency situations.

Back-up Poweer

Trans-Cascades Telephone Company has the following back-up power capabilities:

Switches – stand alone and/or host

Switch (Antelope) Onan 15KW, propane, 250 gallon tank, 3.5 days at max load.

Subscriber carrier (AdTran.)

Carrier Loc. Many remote Carrier locations which we use 5000 Watt portable generators, Gasoline, 5 gallon tank, 8 hours/tank

Ability to reroute traffic around damaged facilities:

Trans-Cascades Telephone Company currently does not have redundant facilities to its connecting company toll tandem. There is redundancy built into the same route but do to how remote the Antelope area is, there are currently no other options for creating a redundant route. This is something we discuss annually and we will continue to look at future options. This facility interconnects to the Public Switched Telephone Network through its affiliate **Cascade Utilities, Inc.** This network will also handle broadband services to the assigned internet Service Provider.

Capability to manage traffic spikes resulting from emergency situations

Trans-Cascades Telephone Company has 180 customers, switching capacity and transport capacity well exceed the total customers count. **Trans-Cascades Telephone Company** also serves 103 broadband customers for one ISP. **Trans-Cascades Telephone Company** takes no responsibility for the capabilities of interconnected networks to manage traffic spikes resulting from emergency situations, but will continue its best efforts for its networks during such events.

54.313 Lifeline customers MOU and additional toll charges

Lifeline subscribers receive the same residential service as a regular subscriber, but at a reduced monthly recurring rate. Thus, lifeline subscribers have an unlimited number of local calling minutes. As for toll, lifeline subscribers, similar to every Trans Cascades subscriber, are free to choose their own toll usage plans through IXCs that serve Trans Cascades.

Oregon Telephone Assistance Program (OTAP)/Lifeline Application

Oregon Public Utility Commission
PO Box 2148, Salem OR 97308
1-800-848-4442 or 503-373-7171
1-800-648-3458 (TTY)
971-239-5845 (Videophone)
Fax: 1-877-567-1977 or 503-378-6047
puc.rspf@state.or.us

You may qualify if you participate in one of the following programs:

Supplemental Nutrition Assistance Program; Food Stamps (SNAP)
Supplemental Security Income (SSI)
Temporary Assistance for Needy Families (TANF)
National School Lunch Program; *Free Lunch Program Only* (NSLP)
Certain State Medical Programs or Certain Medicaid Programs
at or below 135% of the federal poverty guidelines

How to apply: To apply for this program or obtain more information, please contact the OTAP staff at 1-800-848-444. Or you may complete an application online at: www.rspf.org

Oregon Telephone Assistance Program (OTAP)/Lifeline Application

You may complete an OTAP/Lifeline application online at: www.rspf.org

Oregon Public Utility Commission
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Please **PRINT** clearly and **SIGN** on page 2.

If you have a situation that prevents you from providing certain information, please contact us for assistance.

Applicant's Legal Name (Last, First, M.I.) (Applicant's legal name MUST be on phone bill)		Applicant's Social Security No.		Applicant's Birth Date	
		- -		/ /	
Applicant's Home Address	Is this a temporary address? <input type="checkbox"/> Yes <input type="checkbox"/> No	Apt. #	City	State OR	ZIP
Applicant's Mailing Address (if different from your home address)		Apt. #	City	State OR	ZIP
Applicant's Phone Company (As listed on page 3)	Applicant's Phone Number () -		Applicant's E-mail Address		

I participate in the following qualifying programs (Check any that apply):

- SNAP** (Supplemental Nutrition Assistance Program; Food Stamps)
- SSI** (Supplemental Security Income)
- TANF** (Temporary Assistance for Needy Families)
- Certain State Medical Programs or Certain Medicaid Programs** at or below 135% of the federal poverty guidelines

Supporting documentation is required for the following program:

- NSLP*** (National School Lunch Program; *Free Lunch Program Only*)
 *Please provide a copy of the official letter from your school district indicating your current participation.

Please continue to page 2 

Please completely READ and SIGN this form that indicates you understand and agree to comply with the following Oregon Telephone Assistance Program (OTAP)/Lifeline rules:

- I understand that completing this application does not immediately approve me for the OTAP/Lifeline benefit. I will be notified in writing of my application status.
- I understand it may take 30-90 days for the phone company to apply the OTAP/Lifeline benefit to my phone bill.
- I give the Oregon Public Utility Commission (PUC) authority to obtain or review any required records needed to confirm my statements and to confirm that I qualify for the OTAP/Lifeline. I also authorize the phone company to release any required records for my OTAP/Lifeline benefit.
- I am head of household and no one else in my household receives landline or wireless OTAP/Lifeline service.
- I understand that the OTAP/Lifeline credit is only allowed for **ONE PHONE LINE PER HOUSEHOLD**
 - A household is defined as any persons who live together at the same address and share income and expenses.
- I understand that if I break or violate the one-per-household rule I will no longer qualify for the OTAP/Lifeline program.
- I agree to let the PUC know within 30 days if:
 - I no longer qualify for the OTAP/Lifeline benefit
 - I no longer take part in a qualifying program
 - I receive more than one OTAP/Lifeline benefit
 - Another member of my household is also receiving the OTAP/Lifeline benefit
- I understand that I have 30 days to notify the PUC if I no longer qualify for the OTAP/Lifeline benefit or I may be removed from the program.
- I agree to notify the PUC of address changes within 30 days of moving.
- I understand that my OTAP/Lifeline benefit may not be transferred or given to any other person.
- I understand that I may be required to confirm that I still qualify for the OTAP/Lifeline benefit at any time and that, if I do not comply, my OTAP/Lifeline benefits will stop.
- I understand that OTAP/Lifeline is a state and federal benefit and willfully making false statements or providing false or fraudulent documents to obtain the benefit is punishable by law and can result in fines, imprisonment, disqualification or being permanently removed from the program.

By signing this application I certify under penalty of perjury that the information contained in this application is true and correct and that I meet the eligibility criteria for the OTAP/Lifeline benefit.

Applicant Signature _____

Print Name _____ Date _____

**Please Mail Application to: PUC, PO Box 2148, Salem OR 97308
or Fax to: 1-877-567-1977 or 503-378-6047**

Do you have questions? Call us at 1-800-848-4442 or 503-373-7171

Oregon Telephone Assistance Program (OTAP)/Lifeline Application

You may complete an OTAP/Lifeline application online at: www.rspf.org

Oregon Public Utility Commission
 PO Box 2148, Salem OR 97308
 1-800-848-4442 or 503-373-7171
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 Fax: 1-877-567-1977 or 503-378-6047
puc.rspf@state.or.us

The Oregon Public Utility Commission (PUC) manages the Oregon Telephone Assistance Program (OTAP), also known as Lifeline. If you qualify, this federal and state government assistance program reduces your monthly phone bill by \$12.75.

You may qualify if you participate in one of the following programs:

- Supplemental Nutrition Assistance Program; Food Stamps (SNAP)
- Supplemental Security Income (SSI)
- Temporary Assistance for Needy Families (TANF)
- National School Lunch Program; *Free Lunch Program Only* (NSLP)
- Certain State Medical Programs or Certain Medicaid Programs at or below 135% of the federal poverty guidelines

Landline phone companies that provide the OTAP/Lifeline benefit:

Asotin	Frontier	Nehalem	Roome Tel Com
Beaver Creek	Gervais	North State	Scio Mutual
Canby Co-Op	Helix	Oregon Tel. Corp.	St. Paul
CenturyLink	Home/TDS	Oregon/Idaho	Stayton Co.
Clear Creek	Molalla	People's	Warm Springs
Colton	Monitor	Pine Phone Co.	
ComSpan	Monroe	Pioneer	
Eagle	Mt. Angel	Reliance Connects	

Wireless phone companies that provide the OTAP/Lifeline benefit:

AT&T Mobility* -in select areas	Cricket	Snake River PCS	US Cellular
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The OTAP/Lifeline benefit cannot be applied to Pay-As-You-Go Plans.

*AT&T Mobility only offers the OTAP/Lifeline benefit in select areas.
 Call 1-800-377-9450 to determine if the OTAP/Lifeline benefit is offered in your coverage area.



Attachment for Line 3010

Attachment for Line 3010A

Date: June 22, 2016

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
9300 East Hampton Drive
Capitol Heights, MD 20743

**Re: WC Docket No. 14-58, 2016 Annual Report for Program Year 2017,
Form 481 for High-Cost Recipient - 54.313(f)(1) "Milestone Certification"**

Dear Ms Dortch:

In compliance with the filing requirements associated with, and attached to Form 481, we wish to advise the Commission that Trans Cascades Telephone Company d/b/a Reliance Connects provided in 2015 High Speed Internet service to its customers and:

- Has taken reasonable steps to provide upon reasonable request broadband service at actual speeds of 10 Mbps downstream/1 Mbps upstream;
- Provides latency suitable for real-time applications including VoIP and usage capacity which is reasonably comparable to those in urban areas and;
- That reasonable requests for service are met within a reasonable timeframe.

If there are questions, I may be contacted at 503-630-8940.

Sincerely,

Brenda Crosby
President

PO Box 189
Estacada, OR 97023

Phone: 503.630.4202
Fax: 503.630.8934

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is xxx. The time required to complete this information collection is estimated to average x hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

USDA-RUS FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS	This data will be used by RUS to review your financial situation. 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.	
	BORROWER NAME TRANS-CASCADES TELEPHONE COMPANY	
	ADDRESS ESTACADA, Oregon	
INSTRUCTIONS-Submit report to RUS within 15 days after close of the period.	PERIOD ENDING December, 2015	BORROWER DESIGNATION OR1109

CERTIFICATION	
We hereby certify that: 1. the entries in this report are in accordance with the accounts and other records of the system and reflect the status of the system to the best of our knowledge and belief; and 2. we have fulfilled our obligations under the Loan Documents throughout the year in all material respects ALL INSURANCE REQUIRED BY 7 CFR PART 1788, CHAPTER XVII, RUS, WAS IN FORCE DURING THE REPORTING PERIOD AND RENEWALS HAVE BEEN OBTAINED FOR ALL POLICIES.	
<input checked="" type="checkbox"/> All of the obligations under the RUS loan documents have been fulfilled in all material respects.	<input type="checkbox"/> There has been a default in the fulfillment of the obligations under the RUS loan documents. Said default(s) is/are specifically described in the notes section of this report.
_____ Brenda Crosby	_____ 04/28/2016 DATE

PART A. BALANCE SHEET

ASSETS	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	BALANCE END OF PERIOD
CURRENT ASSETS		CURRENT LIABILITIES	Redacted for Public View
1. Cash and Equivalents	Redacted for Public View	16. Accounts Payable	
2. Cash-RUS Construction Fund		17. Notes Payable	
3. Accounts Receivable		18. Current Mat. L/T Debt - RLIS	
4. Notes Receivable		19. Current Mat. UT Debt-Other	
5. Materials and Inventory		20. Current Mat.-Capital Leases	
6. Other Current Assets		21. Other Current Liabilities	
Total Current		Total Current	
7. Assets (1 thru 6)		22. Liabilities (16 thru 21)	
NONCURRENT ASSETS		LONG-TERM DEBT	
8. Investment in Affiliated Companies		23. Funded Debt-RUS Notes	
9. Other Noncurrent Assets		24. Funded Debt-RTB Notes	
PLANT, PROPERTY, AND EQUIPMENT		25. Funded Debt-FFB Notes	
10. Telecom. Plant-in-Service		26. Funded Debt-Other	
		Total Long-Term	
11. Plant Under Construction		27. Debt (23 thru 26)	
12. Plant Adj., Nonop. Plant, & Goodwill		OTHER LIAB. & DEF. CREDITS	
13. Less Accumulated Depreciation		28. Other Long-Term Liabilities	
Net Plant		EQUITY	
14. (10 thru 12 less 13)		29. Cap. Stock Outstand. & Subscribed	
		30. Additional Paid-in-Capital	
		31. Membership and Cap. Certificates	
		32. Patronage Capital Credits	
		33. Retained Earnings or Margins	
		34. Total Equity (29 thru 34)	
TOTAL ASSETS		TOTAL LIABILITIES AND EQUITY (22+27+28+34)	
15. (7+8+9+14)			
		% of Total Assets	

USDA-RUS	BORROWER DESIGNATION
FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS	OR1109
	PERIOD ENDING
	December, 2015

PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS

ITEM	YEAR-TO-DATE
1. Local Network Services Revenues	
a. Voice	
b. Video	
c. Internet	
i. Broadband	
ii. Other	
2. Network Access Services and Long Distance Revenues	
3. Miscellaneous Revenues	
4. Other Operating Income	
5. Uncollectible Revenues	
6. Net Operating Revenues (11 thru 4 less 5)	
7. Plant Specific Operations Expense	
8. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)	
9. Customer Operations Expense	
10. Corporate Operations Expense	
11. Other Operating Expenses	
12. Total Operating Expenses (7 thru 11)	
13. Operating Income or Margins (6 less 12)	
14. Nonoperating/Nonregulated Net Income	
15. EBITDA (13 + 14)	
16. Depreciation Expense	
17. Amortization Expense	
18. EBIT (15 - 16 - 17)	
19. Interest on Funded Debt	
20. Other Interest Expense	
21. Taxes	
a. Property	
b. Income	
22. Total Net Income or Margins (18-19-20-21)	
23 Dividends Declared (Common)	
24 Dividends Paid	
25 Transfers to Patronage Capital	
26 Principal Payments on Long Term Debt and Capital Leases	
27 TIER (19 + 20 + 22) / (19 + 20)	

Redacted for Public View

USDA-RUS FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS	BORROWER DESIGNATION OR1109 <hr/> PERIOD ENDING December, 2015
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PART C. SERVICES

No.	SERVICE OFFERINGS	1. RATES		2. SUBSCRIBERS		Total (c)
		Residential (a)	Business (b)	Residential (a)	Business (b)	
			Broadband Data Packages			
1		<h1>Redacted for Public View</h1>				
	Double Play - Voice/Broadband Data					
2	6m/1m					
3	1m/384k					
4	9m/1m					
5	12m/1m					

USDA-RUS FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS				BORROWER DESIGNATION OR1109	
				PERIOD ENDING December, 2015	
PART C. COMMUNITIES					
No.	Community	County	State	No. Broadband Data Customers	Broadband Application
1	Antelope city	Wasco	OR	95	

USDA-RUS

**FINANCIAL AND STATISTICAL REPORT
FOR BROADBAND BORROWERS**

BORROWER DESIGNATION

OR1109

PERIOD ENDING

December, 2015

PART D. STATEMENT OF CASH FLOWS

1.	Beginning Cash	Redacted for Public View
CASH FLOWS FROM OPERATING ACTIVITIES:		
2.	Net Income	
<i>Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities</i>		
3.	Add: Depreciation	
4.	Add: Amortization	
5.	Other (Explain)	
<i>Changes in Operating Assets and Liabilities:</i>		
6.	Decrease/(Increase) in Accounts Receivable	
7.	Decrease/(Increase) in Materials and Inventory	
8.	Decrease/(Increase) in Other Current Assets	
9.	Increase/(Decrease) in Accounts Payable	
10.	Increase/(Decrease) in Other Current Liabilities	
11.	Net Cash Provided/(Used) by Operations	
CASH FLOWS FROM FINANCING ACTIVITIES:		
12.	Decrease/(Increase) in Notes Receivable	
13.	Increase/(Decrease) in Notes Payable	
14.	Plus/(Less) Net Increase/(Decrease) in Long Term Debt (including current maturities)	
15.	Plus: Increase/(Less: Decrease) in Capital Stock, Paid-in Capital or Membership and Capital Certificates	
16.	Less: Payment of Dividends	
17.	Other (Explain)	
18.	Net Cash Provided/ (Used) by Financing Activities	
CASH FLOWS FROM INVESTING ACTIVITIES:		
19.	Net Capital Expenditures	
20.	Long-Term Investments	
21.	Other (Explain)	
22.	Net Cash Provided (Used) by Investing Activities	
23.	Net Increase/ (Decrease) in Cash	
24.	Ending Cash	

<p style="text-align: center;">USDA-RUS</p> <p style="text-align: center;">FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</p>	<p>BORROWER DESIGNATION</p> <p>OR1109</p>	
	<p>PERIOD ENDING</p> <p>December, 2015</p>	
<p>PART 9. 6-D'D9F: CFA5B79'A95GI F9G</p>		
	<p>New Broadband Service</p>	<p>Improved Broadband Service</p>
<p>1. Number of households subscribing to</p>	<p>4</p>	<p>79</p>
<p>2. Number of businesses subscribing to</p>	<p>14</p>	<p>0</p>
<p>3. Number of educational providers receiving</p>	<p>0</p>	<p>2</p>
<p>4. Number of libraries receiving</p>	<p>0</p>	<p>0</p>
<p>5. Number of health care providers receiving</p>	<p>0</p>	<p>0</p>
<p>6. Number of public safety providers receiving</p>	<p>0</p>	<p>0</p>

<p style="text-align: center;"><i>USDA-RUS</i></p> <p style="text-align: center;">FINANCIAL AND STATISTICAL REPORT FOR BROADBAND BORROWERS</p>	<p>BORROWER DESIGNATION OR1109</p> <hr/> <p>PERIOD ENDING December, 2015</p>
<p style="text-align: center;">Notes to Operating Report - Broadband</p>	