

FEDERAL COMMUNICATIONS COMMISSION  
Washington, DC 20554

Approved by OMB

3080-0076

Est. time per response:  
1 hourCOMMON CARRIER ANNUAL EMPLOYMENT REPORT  
[Please read instructions before completing and for Notice regarding public burden.]

## SECTION I - General Information

1. Name and Mailing Address of Respondent  
JBN Telephone Company, Inc.  
418 W. 5th St  
Holton, KS 66436☐ Check here if this  
is a change of  
address.2. Year Report Filed  
20183. Reporting Period (Ending Date of Pay  
Period Covered by Report)  
01/15/20184. Number of Full-Time Employees during Selected  
Reporting Period (check one):  
a. ☐ Fewer than 16 (complete Sections I, IV, and V only)  
b. ☒ 16 or more (complete all sections)

## SECTION II - Full-Time Employees.

Job Categories															Number of Employees (Report employees in only one category)																														
Race/Ethnicity															Not-Hispanic or Latino																														
Hispanic or Latino															Male															Female															Total Columns A - N
															Male																														
															Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races																	
Executive/Senior Level Officials and Managers															1.1																	0													
First/Mid-Level Officials and Managers															1.2		3								1								4												
Professionals															2																	0													
Technicians															3		13																13												
Sales Workers															4			2	1															3											
Administrative Support Workers															5			1							10									11											
Craft Workers															6																			0											
Operatives															7																			0											
Laborers and Helpers															8																			0											
Service Workers															9																			0											
TOTAL															10	0	0	19	1	0	0	0	0	11	0	0	0	0	0	0	0	0	0	31											
PREVIOUS YEAR TOTAL															11			19	1					9										29											

**SECTION III - Part-Time Employees.**

SECTION III - Part: Time Employees

Job Categories	Number of Employees (Report employees in only one category)															
	Race/Ethnicity															
	Hispanic or Latino		Not-Hispanic or Latino													Total Columns A - N
			Male						Female							
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races		
Executive/Senior Level Officials and Managers	1.1														0	
First/Mid-Level Officials and Managers	1.2														0	
Professionals	2														0	
Technicians	3		1												1	
Sales Workers	4														0	
Administrative Support Workers	5														0	
Craft Workers	6														0	
Operatives	7														0	
Laborers and Helpers	8														0	
Service Workers	9														0	
TOTAL	10	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
PREVIOUS YEAR TOTAL	11		1												1	


SECTION IV - Report of Discrimination Complaints Received - 12-01-2024

**SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.**

- ☒ This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.
- ☐ This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, counts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.)

**SECTION V - Certification**

I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date	04/12/2018	Typed or Printed Name of Person Signing	R. Norman Johnson	Signature		Telephone No.	(785) 866-3435
Title of Person Signing		Director of Human Resources		WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).			