

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information

1. Name and Mailing Address of Respondent
 MTPCS, LLC dba Cellular One
 900 West Valley Road, Suite 600
 Wayne, PA 19087

☐ Check here if this
 is a change of
 address.

2. Year Report Filed
 2019

3. Reporting Period (Ending Date of Pay
 Period Covered by Report)
 March 10 - 23, 2019

4. 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.

Number of Employees
 (Report employees in only one category)

Race/Ethnicity

Job Categories	Job														Total Columns A - N	
	Hispanic or Latino		Not-Hispanic or Latino													
			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		
	Male	Female														
Executive/Senior Level Officials and Managers	1.1			5							2					7
First/Mid-Level Officials and Managers	1.2			7							4	1				12
Professionals	2			1				1			1			1		4
Technicians	3			6	2			1	1	2	1					13
Sales Workers	4		2	3	2						5	2				14
Administrative Support Workers	5	1	1								4					6
Craft Workers	6															0
Operatives	7															0
Labors and Helpers	8															0
Service Workers	9															0
TOTAL	10	1	3	22	4	0	2	1	2	17	3	0	1	0	0	56
PREVIOUS YEAR TOTAL	11															0

ECC 30

SECTION III - Part-Time Employees.

Number of Employees
(Report employees in only one category)

Race/Ethnicity

Categories	Job														Total Columns A - N																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
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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, courts 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	05/28/2019	Typed or Printed Name of Person Signing	Jean Murray	Signature		Telephone No.	(406) 590-5779
Title of Person Signing		Director of HR		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)(7) AND/OR FORFEITURE (47 U.S.C. 503).			