Mobility Fund
Phase 1 - §54.1009 Annual Reporting
Data Collection Form

FCC Form
Approved by OMB
OMB 3060-1185
Avg. Burden Estimate per Respondent: 18 Hours

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com

Accepted / Filed

JUN 24 2016

Federal Communications Commission
Office of the Secretary

<040> **Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N)** <040> ○ ◉

<041> Attach a description of the documents filed with the Form 481 reporting <041>

<042> Cite the Study Area Code (SAC) for the Form 481 reporting <042>

<080> **Tribal Lands Reporting (y/n?)** *(Does this study area cover tribal lands? Yes or No)* ◉ ○

Notice to Individuals Required by the Paperwork Reduction Act of 1995
OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)
Notice to Individuals Required by the Paperwork Reduction Act of 1995
Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.
THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	2154706
<111>	Filing Carrier Name	Smith Bagley, Inc.
<112>	Winning Bidder Carrier Name	Smith Bagley, Inc.
<113>	Street Address (or PO Box)	1500 South White Mountain Road
<114>	City	Show Low
<115>	State	AZ
<116>	Zip-Code	85901
<117>	Telephone Number	9285370690 ext.
<118>	Fax Number	9285379199
<119>	Email Address	jhinkle@cellularoneaz.com

Contact Information

if same as above, indicate in this box ☐

<120>	Name (First, MI, Last, Suffix)	Justin E. Hinkle
<121>	Filing Carrier Name	Smith Bagley, Inc.
<122>	Street Address (or PO Box)	1500 South White Mountain Road
<123>	City	Show Low
<124>	State	AZ
<125>	Zip-Code	85901
<126>	Telephone Number	9285370690 ext.
<127>	Fax Number	9285379199
<128>	Email Address	jhinkle@cellularoneaz.com

Authorized Agent Information

if no agent, indicate in this box ☐

<130>	Name (First, MI, Last, Suffix)	Todd Slamowitz
<131>	Company	Lukas, Nace, Gutierrez & Sachs, LLP
<132>	Street Address (or PO Box)	8300 Greensboro Drive, Suite 1200
<133>	City	McLean
<134>	State	VA
<135>	Zip-Code	22102
<136>	Telephone Number	7035848673 ext.
<137>	Fax Number	7035848696
<138>	Email Address	tslamowitz@fcclaw.com

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<140> Coverage and Performance Report Year 01/2015 - 12/2015

Coverage and Performace attachments: 060 Coverage and Performance Report.zip, Coverage Files.zip

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performance data is uploaded (Yes/no)
			-- See attached worksheet						
			--						

Percentage of Total Population Reached by Service: 78

Percentage of Total Road Miles covered by Service: 0

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/24/2016

Printed name of Authorized Officer: Justin Hinkle

Title or position of Authorized Officer: CEO

Telephone number of Authorized Officer: 9282053508 ext.

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.**

Name of Authorized Agent: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Smith Bagley, Inc.

Signature of Authorized Officer or Employee: Date:

Printed name of Authorized Officer or Employee:

Title or position of Authorized Officer or Employee:

Telephone number of Authorized Officer or Employee:

Study Area Code of Reporting Carrier: 498028 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.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier: Smith Bagley, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/24/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 498028 Filing Due Date for this form: 07/01/2016

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<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<142> State: NM

McKinley

<143> County

The Navajo Nation

<144> Tribal Land(s) on which ETC Serves

<145> Tribal Government Engagement Obligation: Tribal Engagement-Navajo.pdf

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	Yes
<147>	Feasibility and sustainability planning;	Yes
<148>	Marketing services in a culturally sensitive manner;	Yes
<149>	Compliance with Rights of way processes	Yes
<150>	Compliance with Land Use permitting requirements	Yes
<151>	Compliance with Facilities Siting rules	Yes
<152>	Compliance with Environmental Review processes	Yes
<153>	Compliance with Cultural Preservation review processes	Yes
<154>	Compliance with Tribal Business and Licensing requirements.	Yes

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<200>	Date Authorized to Receive Support	11/20/2014
<201>	Targeted Completion Date	11/21/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	11/17/2015
<211>	Project Status Description (attached)	Project Status Description - Line 211 (constructed SACs).pdf

{Name of PDF attached}

Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.

<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	✓
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	✓
<216>	Project Budget Status	✓
<217>	Project Plan Status	✓

<218> Network will Support 3G/4G Mobile Service ? (●) 3G ( ) 4G

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/24/2016

Printed name of Authorized Officer: Justin Hinkle

Title or position of Authorized Officer: CEO

Telephone number of Authorized Officer: 9282053508 ext.

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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.

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
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<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.**

Name of Authorized Agent: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Smith Bagley, Inc.

Signature of Authorized Officer: Date:

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: 498028 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.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier: Smith Bagley, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/24/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 498028 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

(060) Coverage and Performance Report

FCC Form 690
Approved by OMB
OMB Control No. 3060-1185

<010>	Study Area Code	498028
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performacne data is uploaded (yes/no)
NM	McKinley	350319437001110	11	11	11	0.0	0.0	0.0	Yes
NM	McKinley	350319437001117	8	8	8	0.0	0.0	0.0	Yes
NM	McKinley	350319437001118	9	9	9	0.0	0.0	0.0	Yes
NM	McKinley	350319437003190	13	4	4	0.0	0.0	0.0	Yes

Percentage of Total Population Reached by Service: 78

Percentage of Total Road Miles covered by Service: 0

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Smith Bagley, Inc. completed the coverage/performance testing for this SAC during the reporting period. The drive test data and associated coverage files provided herein were provided in its Payment Request 3 submitted for this SAC. Further, the population per census block set forth in Line 141 herein is the same population per census block reported in its Payment Request 3 submitted for this SAC.

Smith Bagley, Inc.

Project Status Description

Pursuant to Section 54.1009(a)(6) of the Commission's rules,[1] Smith Bagley, Inc., ("SBI") submits that there is no material updates to its project description, included the projected budget, associated with this Study Area Code ("SAC") that was provided by SBI in its long-form application (the "FCC Form 680") filed in conjunction with its FCC Auction 901 winning bids.

To date, SBI has completed construction, and deployed its network in at least 75% of the eligible population associated with this SAC. There are no further material updates with respect to network design, construction, deployment and maintenance associated with this SAC.

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[1] Section 54.1009(a)(6) provides that a winning bidder shall include "Updates to the information provided in § 54.1005(b)(2)(v).

TRIBAL ENGAGEMENT

In accordance with 47 C.F.R. § 54.1004(d)(2) of the Commission's Rules, and as set forth in the attached certification, Smith Bagley, Inc. ("SBI" or "Company") notified the relevant Tribal governments in its winning bid service area within five business days (*i.e.,* no later than March 7, 2014) after being identified as a winning bidder in the Commission's February 28, 2014 Public Notice.[1] Specifically, the following Tribal government has been contacted: The Navajo Nation. In its outreach to this Tribal government, the Company indicated its willingness to engage in meaningful discussions regarding the deployment and improvement of communications on Tribal lands. In particular, SBI expressed its desire to discuss with the Tribal government: (1) a needs assessment and deployment planning with a focus on Tribal community anchor institutions; (2) feasibility and sustainability planning; (3) marketing services in a culturally sensitive manner; (4) rights of way processes, land use permitting, facilities siting, environmental and cultural review processes; and (5) compliance with Tribal business and licensing requirements.

To date, since the Company sent its initial correspondence, it has had numerous discussions with the Navajo Nation regarding how the Company may play a role in the deployment and improvement of communications on Tribal lands.

In accordance the *Winning Bidders Public Notice* and the Commission's Rules, a copy of this Exhibit and the attached Certification had been provided to the Navajo Nation concurrently with the submission of the Company's Long Form Application.[2]

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[1] *See* 47 C.F.R. §54.1004(d)(2). *See also Tribal* Mobility Fund Phase I Auction Closes, Winning Bidders Announced for Auction 902, Public Notice, DA 14-263 at ¶ ¶ 5, 25-27 (rel. Feb. 28, 2014)("*Winning Bidders Public Notice*"); Office of Native Affairs and Policy, Wireless Telecommunications Bureau and Wireline Competition Bureau Issue Further Guidance on Tribal Government Engagement Obligation Provisions of the Connect America Fund, WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, WT Docket No. 10-208, GN Docket No. 09-51, *Public Notice*, DA 12-1165, 27 FCC Rcd 8176 (2012) (*Tribal Engagement Further Guidance Public Notice*), *pet. for recon. pending.*

[2] *See* 47 C.F.R. § 54.1004(d)(3); *Winning Bidders Public Notice* at ¶ 27.

CERTIFICATION

I, Justin E. Hinkle, President of Smith Bagley, Inc. ("SBI" or "Company"), certify under penalty of perjury that I have read the foregoing Tribal Engagement Attachment, and that all such statements made and matters set forth therein are true and correct to the best of my knowledge, information and belief.

I further certify under penalty of perjury that the following is true and correct to the best of my knowledge, information and belief:

1. SBI has contacted the appropriate Tribal government in its winning bid service area, and this contact took place in letters sent March 5, 2014, which is no later than five business days after the Company was identified by the Commission's February 28, 2014 Public Notice that it was a winning bidder in Auction 902.

2. In particular, the following Tribal government has been contacted by the Company: The Navajo Nation.

2. In the Company's March 5, 2014 letters, the Company indicated that it was willing to engage in meaningful discussions regarding the deployment and improvement of communications on Tribal lands. In particular, SBI expressed its desire to engage in a discussion with the Tribal government regarding the issues specified in 47 C.F.R. § 54.1004(d)(1): (1) a needs assessment and deployment planning with a focus on Tribal community anchor institutions; (2) feasibility and sustainability planning; (3) marketing services in a culturally sensitive manner; (4) rights of way processes, land use permitting, facilities siting, environmental and cultural review processes; and (5) compliance with Tribal business and licensing requirements.

3. SBI had not received a formal response to its letters of March 5, 2014. However, since it sent the letters the Company has had numerous discussions with the Navajo Nation regarding how the Company may play a role in the deployment and improvement of communications on Tribal lands.

/s/
Justin E. Hinkle
President
Smith Bagley, Inc.

Mobility Fund
Phase 1 - §54.1009 Annual Reporting
Data Collection Form

FCC Form
Approved by OMB
OMB 3060-1185
Avg. Burden Estimate per Respondent: 18 Hours

Accepted / Filed

JUN 24 2016

Federal Communications Commission
Office of the Secretary

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name: Person USAC should contact with questions about this data	Todd Slamowitz
<035>	Contact Telephone Number: Number of the person identified in data line <030>	7035848678 ext.
<039>	Contact Email: Email of the person identified in data line <030>	tslamowitz@fcclaw.com

<040> **Has the information required pursuant to §54.1009 been provided with a Form 481 filing (Y/N)** <040> ○ ◉

<041> Attach a description of the documents filed with the Form 481 reporting <041>

<042> Cite the Study Area Code (SAC) for the Form 481 reporting <042>

<080> **Tribal Lands Reporting (y/n?)** *(Does this study area cover tribal lands? Yes or No)* ◉ ○

Notice to Individuals Required by the Paperwork Reduction Act of 1995

OMB Control Number 3060-1185 (Annual Report for Mobility Fund Phase I Support, FCC Form 690 and Record Retention Requirements)

Notice to Individuals Required by the Paperwork Reduction Act of 1995

Public reporting burden for this collection of information is estimated to average 18 hours per response. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, Office of Managing Director, AMD-PERM, Washington, DC 20554, Paperwork Reduction Act Project (3060-1185). Please DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection, unless it displays a currently valid OMB control number and/or we fail to provide you with this notice. This collection has been assigned an OMB control number of 3060-1185.

THIS NOTICE IS REQUIRED BY THE PAPERWORK REDUCTION ACT OF 1995, PUBLIC LAW 104-13, OCTOBER 1, 1995, 44 U.S.C. SECTION 3507.

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

Reporting Carrier / Mobility Fund Phase 1 Winning Bidder

<110>	FCC Registration Number	2154706
<111>	Filing Carrier Name	Smith Bagley, Inc.
<112>	Winning Bidder Carrier Name	Smith Bagley, Inc.
<113>	Street Address (or PO Box)	1500 South White Mountain Road
<114>	City	Show Low
<115>	State	AZ
<116>	Zip-Code	85901
<117>	Telephone Number	9285370690 ext.
<118>	Fax Number	9285379199
<119>	Email Address	jhinkle@cellularoneaz.com

Contact Information

if same as above, indicate in this box ☐

<120>	Name (First, MI, Last, Suffix)	Justin E. Hinkle
<121>	Filing Carrier Name	Smith Bagley, Inc.
<122>	Street Address (or PO Box)	1500 South White Mountain Road
<123>	City	Show Low
<124>	State	AZ
<125>	Zip-Code	85901
<126>	Telephone Number	9285370690 ext.
<127>	Fax Number	9285379199
<128>	Email Address	jhinkle@cellularoneaz.com

Authorized Agent Information

if no agent, indicate in this box ☐

<130>	Name (First, MI, Last, Suffix)	Todd Slamowitz
<131>	Company	Lukas, Nace, Gutierrez & Sachs, LLP
<132>	Street Address (or PO Box)	8300 Greensboro Drive, Suite 1200
<133>	City	McLean
<134>	State	VA
<135>	Zip-Code	22102
<136>	Telephone Number	7035848673 ext.
<137>	Fax Number	7035848696
<138>	Email Address	tslamowitz@fcclaw.com

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<140> Coverage and Performance Report Year 01/2015 - 12/2015

Coverage and Performace attachments: 060 Coverage and Performance Report.zip

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performance data is uploaded (Yes/no)
			-- See attached worksheet						
			--						

Percentage of Total Population Reached by Service: 79

Percentage of Total Road Miles covered by Service: 0

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING CERTIFICATION DATA ON ITS OWN BEHALF:

Certification of Officer or Employee as to Compliance with 47 CFR §54.1009(a)(4)

I certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4), the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:			
Signature of Authorized Officer:	CERTIFIED ONLINE	Date	06/24/2016
Printed name of Authorized Officer:	Justin Hinkle		
Title or position of Authorized Officer:	CEO		
Telephone number of Authorized Officer:	9282053508 ext.		
Study Area Code of Reporting Carrier:		Filing Due Date for this form:	

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.

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING CERTIFICATION DATA ON THE CARRIER'S BEHALF:

Certification of Officer or Employee to authorize an Agent to file Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer or employee of the reporting carrier; my responsibilities include ensuring compliance with 47 CFR §54.1009(a)(4) reported to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.**

Name of Authorized Agent:	Lukas, Nace, Gutierrez & Sachs, LLP		
Name of Reporting Carrier:	Smith Bagley, Inc.		
Signature of Authorized Officer or Employee:		Date:	
Printed name of Authorized Officer or Employee:			
Title or position of Authorized Officer or Employee:			
Telephone number of Authorized Officer or Employee:			
Study Area Code of Reporting Carrier: 508001		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.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Compliance with 47 CFR §54.1009(a)(4) on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the certification on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier:	Smith Bagley, Inc.		
Name of Authorized Agent Firm:	Lukas, Nace, Gutierrez & Sachs, LLP		
Signature of Authorized Agent or Employee of Agent:		Date:	06/24/2016
Name of Authorized Agent Employee:	Todd Slamowitz		
Title or position of Authorized Agent or Employee of Agent	FCC Legal Counsel		
Telephone number of Authorized Agent or Employee of Agent:	7035848678 ext.		
Study Area Code of Reporting Carrier: 508001		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.

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<142> State: UT

San Juan

<143> County

The Navajo Nation

<144> Tribal Land(s) on which ETC Serves

<145> Tribal Government Engagement Obligation: Tribal Engagement-Navajo.pdf

Name of Attached Document (.pdf)

If your company serves Tribal lands, please select (Yes, No, Not Applicable) for each of these boxes to confirm the status described on the attached PDF, on line 145, demonstrates coordination with the Tribal government pursuant to § 54.1004 includes:

		Select (Yes, No, Not Applicable)
<146>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions;	Yes
<147>	Feasibility and sustainability planning;	Yes
<148>	Marketing services in a culturally sensitive manner;	Yes
<149>	Compliance with Rights of way processes	Yes
<150>	Compliance with Land Use permitting requirements	Yes
<151>	Compliance with Facilities Siting rules	Yes
<152>	Compliance with Environmental Review processes	Yes
<153>	Compliance with Cultural Preservation review processes	Yes
<154>	Compliance with Tribal Business and Licensing requirements.	Yes

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

<200>	Date Authorized to Receive Support	11/20/2014
<201>	Targeted Completion Date	11/21/2016
<202>	Total Mobility Fund Support Awarded	
<203>	Total Mobility Fund Support Disbursed	
<210>	Actual Completion Date	10/28/2015
<211>	Project Status Description (attached)	Project Status Description - Line 211 (constructed SACs).pdf

{Name of PDF attached}

Please check these boxes below to confirm that the attached PDF, on line 211, contains a project status pursuant to §54.1005(b)(2)(v). The information shall be submitted as appropriate.

<212>	Status of Network Deployment - Network Design	✓
<213>	Status of Network Deployment - Construction	✓
<214>	Status of Network Deployment - Deployment	✓
<215>	Status of Network Deployment - Maintenance	✓
<216>	Project Budget Status	✓
<217>	Project Plan Status	✓

<218> Network will Support 3G/4G Mobile Service ? (●) 3G ( ) 4G

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for Mobility Fund Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the reporting requirements for Mobility Fund recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier:

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/24/2016

Printed name of Authorized Officer: Justin Hinkle

Title or position of Authorized Officer: CEO

Telephone number of Authorized Officer: 9282053508 ext.

Study Area Code of Reporting Carrier: Filing Due Date for this form:

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.

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I certify that (Name of Agent) Lukas, Nace, Gutierrez & Sachs, LLP **is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.**

Name of Authorized Agent: Lukas, Nace, Gutierrez & Sachs, LLP

Name of Reporting Carrier: Smith Bagley, Inc.

Signature of Authorized Officer: Date:

Printed name of Authorized Officer:

Title or position of Authorized Officer:

Telephone number of Authorized Officer:

Study Area Code of Reporting Carrier: 508001 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.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File for Mobility Fund Recipients on Behalf of Reporting Carrier

I, as agent for the reporting carrier, certify that I am authorized to submit the reports for Mobility Fund recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.

Name of Reporting Carrier: Smith Bagley, Inc.

Name of Authorized Agent Firm: Lukas, Nace, Gutierrez & Sachs, LLP

Signature of Authorized Agent or Employee of Agent: Date: 06/24/2016

Name of Authorized Agent Employee: Todd Slamowitz

Title or position of Authorized Agent or Employee of Agent FCC Legal Counsel

Telephone number of Authorized Agent or Employee of Agent: 7035848678 ext.

Study Area Code of Reporting Carrier: 508001 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

(060) Coverage and Performance Report	FCC Form 690 Approved by OMB OMB Control No. 3060-1185

<010>	Study Area Code	508001
<015>	Study Area Name	Smith Bagley, Inc.
<020>	Program Year	2016
<030>	Contact Name - Person USAC should contact regarding this data	Todd Slamowitz
<035>	Contact Telephone Number - Number of person identified in data line <030>	7035848678 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tslamowitz@fcclaw.com
<140>	Coverage and Performance Report Year	01/2015 - 12/2015

<141>

<a1> State	<a2> County	<a3> Census Block	<b1> Resident Population per Census Block	<b2> Resident Population Newly Reached by Service	<b3> Total Resident Population Reached by Service	<c1> Road Miles per Census Block	<c2> Road Miles per Census Block Newly Reached	<c3> Total Road Miles covered per Census Block	<d> Certify that Coverage and Performacne data is uploaded (yes/no)
UT	San Juan	490379421001030	2	0	0	0.0	0.0	0.0	Yes
UT	San Juan	490379421001263	6	6	6	0.0	0.0	0.0	Yes
UT	San Juan	490379421001265	15	15	15	0.0	0.0	0.0	Yes
UT	San Juan	490379421001268	18	7	7	0.0	0.0	0.0	Yes
UT	San Juan	490379421001270	11	11	11	0.0	0.0	0.0	Yes
UT	San Juan	490379421001278	1	1	1	0.0	0.0	0.0	Yes
UT	San Juan	490379421001279	27	27	27	0.0	0.0	0.0	Yes
UT	San Juan	490379421001300	1	1	1	0.0	0.0	0.0	Yes
UT	San Juan	490379421001305	1	1	1	0.0	0.0	0.0	Yes
UT	San Juan	490379421001306	6	6	6	0.0	0.0	0.0	Yes
UT	San Juan	490379421001333	6	0	0	0.0	0.0	0.0	Yes
UT	San Juan	490379421002103	12	12	12	0.0	0.0	0.0	Yes
UT	San Juan	490379421002104	13	4	4	0.0	0.0	0.0	Yes
UT	San Juan	490379421002106	13	13	13	0.0	0.0	0.0	Yes

Percentage of Total Population Reached by Service	79	Percentage of Total Road Miles covered by Service	0

FCC FORM 690

(060) COVERAGE AND PERFORMANCE REPORT

Smith Bagley, Inc. completed the coverage/performance testing for this SAC during the reporting period. The drive test data and associated coverage files provided herein were provided in its Payment Request 3 submitted for this SAC. Further, the population per census block set forth in Line 141 herein is the same population per census block reported in its Payment Request 3 submitted for this SAC.