

REDACTED- FOR PUBLIC INSPECTION

June 27, 2014

VIA OVERNIGHT DELIVERY

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, S.W.
Washington, DC 20554

RE: **Confidential Financial Information Subject to Protective Order in WC Docket Nos. 10-90, 07-135, 05-337, 03-109, CC Docket Nos. 01-92, 96-45, GN Docket No. 09-51, WT Docket No. 10-208, Before the Federal Communications Commission**

Dear Ms. Dortch:

South Central Utah Telephone ("South Central Utah"), a privately-held rate of return carrier receiving high cost support, has electronically submitted FCC Form 481 to the Commission with redacted financial data, in compliance with 47 C.F.R. §§ 54.313 and 54.422

As specified in the Protective Order issued on November 16, 2012 by the Commission, two copies of the redacted confidential information are being filed simultaneously with the non-redacted confidential information. The redacted information for this filing and each page of the file where confidential information has been omitted is marked "REDACTED - FOR PUBLIC INSPECTION"

Please feel free to contact me with any questions regarding this particular matter.

Sincerely,



Marc McLemore

Enclosures

cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division

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	502286
<015>	Study Area Name	SOUTH CENTRAL UTAH
<020>	Program Year	2015
<030>	Contact Name: Person USAC should contact with questions about this data	Marc McLemore
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4358260225 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	marcm@socen.com

ANNUAL REPORTING FOR ALL CARRIERS	54.313 Completion Required	54.422 Completion Required
--	----------------------------------	----------------------------------

			(check box when complete)	
<100>	Service Quality Improvement Reporting	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<200>	Outage Reporting (voice)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<210>	<input type="checkbox"/> <-- check box if no outages to report		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<300>	Unfulfilled Service Requests (voice) <input type="text" value="0"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<310>	Detail on Attempts (voice) <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	<i>(attach descriptive document)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<320>	Unfulfilled Service Requests (broadband) <input type="text" value="0"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<330>	Detail on Attempts (broadband) <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	<i>(attach descriptive document)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<400>	Number of Complaints per 1,000 customers (voice)		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<410>	Fixed <input type="text" value="0.0"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<420>	Mobile <input type="text" value="0.0"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<430>	Number of Complaints per 1,000 customers (broadband)		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<440>	Fixed <input type="text" value="0.0"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<450>	Mobile <input type="text" value="0.0"/>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
<500>	Service Quality Standards & Consumer Protection Rules Compliance	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<510>	<input type="text" value="502286ut510.pdf"/> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	<i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<600>	Functionality in Emergency Situations	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<610>	<input type="text" value="502286ut610.pdf"/> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	<i>(attached descriptive document)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<700>	Company Price Offerings (voice)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<710>	Company Price Offerings (broadband)	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<800>	Operating Companies and Affiliates	<i>(complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<900>	Tribal Land Offerings (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	<i>(if yes, complete attached worksheet)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1000>	Voice Services Rate Comparability	<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1010>	<input type="text" value="502286UT1010.pdf"/> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	<i>(attach descriptive document)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1100>	Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	<i>(if not, check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<1110>		<i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<1200>	Terms and Condition for Lifeline Customers	<i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

<2000>	<i>Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers</i>	<i>(check to indicate certification)</i>	<input type="checkbox"/>	<input type="checkbox"/>
<2005>		<i>(complete attached worksheet)</i>	<input type="checkbox"/>	<input type="checkbox"/>

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>		<i>(check to indicate certification)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
--------	--	--	-------------------------------------	--------------------------

**(100) Service Quality Improvement Reporting
Data Collection Form**

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	502286
<015> Study Area Name	SOUTH CENTRAL UTAH
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035> Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	marcm@ocen.com

<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
<111> year plan" filed with the FCC? (yes / no)

If your answer to Line <111> is yes, then you are required to 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.

502286UT112.xls

Name of Attached Document

Please check these boxes below 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	<input type="checkbox"/>
<114> Report how much universal service (USF) support was received	<input type="checkbox"/>
<115> How (USF) was used to improve service quality	<input type="checkbox"/>
<116> How (USF) was used to improve service coverage	<input type="checkbox"/>
<117> How (USF) was used to improve service capacity	<input type="checkbox"/>
<118> Provide an explanation of network improvement targets not met in the prior calendar year.	<input type="checkbox"/>

(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	502286
<015> Study Area Name	SOUTH CENTRAL UTAH
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035> Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

<910> Tribal Land(s) on which ETC Serves

Kaibab Band of Paiute Indians
 HC 65 Box 2
 Fredonia, AZ 86022

<920> Tribal Government Engagement Obligation

502286UT920.pdf

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 community anchor institutions.
- <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, No, NA)
Yes
/ / / / /
Yes

**(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	502286
<015>	Study Area Name	SOUTH CENTRAL UTAH
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035>	Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

<1120> Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G)

<1130> Please check this box 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
--	--

<010>	Study Area Code	502286
<015>	Study Area Name	SOUTH CENTRAL UTAH
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Marc McEmore
<035>	Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

502286ut1210.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

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

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

<010>	Study Area Code	502286
<015>	Study Area Name	SOUTH CENTRAL UTAH
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035>	Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

CHECK the boxes below to note compliance as a recipient of Incremental Connect America Phase I support, frozen 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)}
- <2011> 3rd Year Certification {47 CFR § 54.313(b)(2)}

Price Cap Carrier Receiving Frozen Support Certification {47 CFR § 54.312(a)}

- <2012> 2013 Frozen Support Certification
- <2013> 2014 Frozen Support Certification
- <2014> 2015 Frozen Support Certification
- <2015> 2016 and future Frozen Support Certification

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)}

- <2017> 3rd year Broadband Service Certification
- <2018> 5th year Broadband Service Certification
- <2019> Interim Progress Certification
- <2020> Please check the box to confirm that the attached document(s), on line 2021, contains the required information pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II support shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

- <2021> Interim Progress Community Anchor Institutions

Name of Attached Document Listing Required Information

(3000) Rate Of Return Carrier Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010> Study Area Code	502286
<015> Study Area Name	SOUTH CENTRAL UTAH
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035> Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	marcm@socnet.com

CHECK the boxes below to note compliance on its 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.

(3010) Progress Report on 5 Year Plan
 Milestone Certification (47 CFR § 54.313(f)(1)(i))

Name of Attached Document Listing Required Information

(3011) Please check this box to confirm that the attached document(s), on line 3012 contains the required information pursuant to § 54.313 (f)(1)(ii), the carrier shall provide the number, names, and addresses of community anchor institutions to which began providing access to broadband service in the preceding calendar year.

(3012) Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii))

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 document(s), 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) for 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

(3020) Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows

(3021) Management letter 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

502286UT3026.pdf

(3026) Attach the worksheet listing required information

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
---	--

<010> Study Area Code	502286
<015> Study Area Name	SOUTH CENTRAL UTAH
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035> Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

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:	SOUTH CENTRAL UTAH
Signature of Authorized Officer:	CERTIFIED ONLINE Date
Printed name of Authorized Officer:	Marc McLemore
Title or position of Authorized Officer:	Accounting Manager
Telephone number of Authorized Officer:	4358260225 ext.
Study Area Code of Reporting Carrier:	502286 Filing Due Date for this form: 07/01/2014
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.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
---	--

<010>	Study Area Code	502286
<015>	Study Area Name	SOUTH CENTRAL UTAH
<020>	Program Year	2015
<030>	Contact Name - Person USAC should contact regarding this data	Marc McLemore
<035>	Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) _____ 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 annual 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: _____	
Name of Reporting Carrier: _____	
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: _____	Filing Due Date for this form: _____
<small>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.</small>	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support 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: _____	
Name of Authorized Agent or Employee of Agent: _____	
Signature of Authorized Agent or Employee of Agent: _____	Date: _____
Printed name of Authorized Agent or Employee of Agent: _____	
Title or position of Authorized Agent or Employee of Agent: _____	
Telephone number of Authorized Agent or Employee of Agent: _____	
Study Area Code of Reporting Carrier: _____	Filing Due Date for this form: _____
<small>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.</small>	

Attachments

LINE 100 INITIAL FIVE-YEAR SERVICE QUALITY IMPROVEMENT PLAN

REDACTED FOR PUBLIC INSPECTION

LINE 200 SERVICE QUALITY OUTAGE REPORTING

REDACTED FOR PUBLIC INSPECTION

Response Line 510

South Central Utah Telephone Assn, Inc
502286

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) South Central Utah Telephone Assn, Inc, ("South Central") is in compliance with appropriate FCC Service Quality Standards and Consumer Protection Rules. South Central provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis. South Central also conducts subscriber outreach regarding CPNI by periodically placing CPNI explanation messages onto its website informing subscribers on CPNI rules and regulations. In addition South Central trains staff on Red Flag issues on an annual basis. All company employees are required to sign and acknowledge that they have completed CPNI and Red Flag training and understand obligations to adherence of applicable rules.

South Central also outlines its rates, terms, and conditions under which South Central offers service in its Local Exchange Tariff. The tariff explains customer rights and obligations, customer service, dispute resolution, deposits, billing and payment options, disconnection of service as well as cancellation of service options. South Central keeps its tariffs available for public inspection at its business offices.

Response Line 610
COMPANY NAME
Study Area INSERT HERE

Functionality in Emergency Situations:

Pursuant to 47 C.F.R. § 54.313(a)(6) and 47 C.F.R § 54.22(b)(4) as set forth in 47 C.F.R. § 54.202(a)(2) South Central Utah Telephone Assn, Inc. ("South Central") meets the requirements to remain functional in emergency situations and has the following capabilities: Back-up power is provided to all central offices by use of a fixed generator and/or batteries that provide them with a minimum of eight hours of emergency power. In addition, South Central field electronics also have a minimum of eight hours of back-up power by use of fixed or mobile generators and/or batteries. South Central also has DWDM technology deployed in its core fiber optic network that is self-healing and will automatically reroute traffic should a fiber cut occur. In addition South Central has connectivity between all 23 of its exchanges to exchange traffic and also has connectivity to the LATA Tandem which further provides capabilities of handling traffic. Lastly South Central is prepared and capable of managing traffic spikes resulting from emergency situations and has developed procedures for employees to follow during emergency situations.

(700) Price Offerings including Voice Rate Data
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010> Study Area Code	502286
<015> Study Area Name	SOUTH CENTRAL UTAH
<020> Program Year	2015
<030> Contact Name - Person USAC should contact regarding this data	Marc McLeMore
<035> Contact Telephone Number - Number of person identified in data line <030>	4358260225 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	marcm@socen.com

<701> Residential Local Service Charge Effective Date	1/1/2014
<702> Single State-wide Residential Local Service Charge	

<703>

<a1>	<a2>	<a3>	<b1>	<b2>	<b3>	<b4>	<b5>	<c>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fees
UT	Antimony		FR	16.5	0.0	0.17	0.0	16.67
UT	AppleValley		FR	16.5	0.0	0.17	0.0	16.67
UT	Beryl		FR	16.5	0.0	0.17	0.0	16.67
UT	Bicknell		FR	16.5	0.0	0.17	1.8	18.47
UT	Boulder		FR	16.5	0.0	0.17	0.0	16.67
UT	Bryce Canyon City		FR	16.5	0.0	0.17	2.75	19.42
UT	Cannonville		FR	16.5	0.0	0.17	0.0	16.67
UT	Circleville		FR	16.5	0.0	0.17	0.0	16.67
AZ	Colorado City		FR	14.0	0.0	0.0	0.0	14.0
UT	Duck Creek		FR	16.5	0.0	0.17	0.0	16.67
UT	Enterprise		FR	16.5	0.0	0.17	0.0	16.67
UT	Escalante		FR	16.5	0.0	0.17	0.0	16.67
AZ	Fredonia		FR	14.0	0.0	0.0	0.0	14.0
UT	Hatch		FR	16.5	0.0	0.17	0.51	17.18
UT	Hildale		FR	16.5	0.0	0.17	0.0	16.67
UT	Kanab		FR	16.5	0.0	0.17	0.0	16.67
UT	Koosharem		FR	16.5	0.0	0.17	0.0	16.67
UT	Loa		FR	16.5	0.0	0.17	0.0	16.67
UT	Marysvale		FR	16.5	0.0	0.17	0.0	16.67
UT	Milford		FR	16.5	0.0	0.17	0.2	16.87
UT	Minersville		FR	16.5	0.0	0.17	3.15	19.82



South Central COMMUNICATIONS

Advanced technology with a personal touch.

January 7, 2014

To Whom It May Concern:

South Central Communications is the Incumbent Local Exchange Carrier (ILEC) to the Kaibab Band of Paiute Indians, located in Arizona.

Over the years, South Central Communications has built a very strong working relationship with the Kaibab Band of Paiute Indians to ensure that the high-speed internet and voice communications needs of the Kaibab Band of Paiute Indians are being met. Additionally, we frequently work together on right-of-way and land use permitting issues to ensure that their needs are further met.

More specifically, throughout the course of 2013 South Central Communications discussed the following with the Kaibab Band of Paiute Indians:

- Needs assessment and deployment planning with a focus on Tribal community anchor institutions;
- Feasibility and sustainability planning;
- Marketing services in a culturally sensitive manner;
- Compliance with Rights of way processes;
- Compliance with Land Use permitting requirements;
- Compliance with Facilities Siting rules;
- Compliance with Environmental Review processes;
- Compliance with Cultural Preservation review processes;
- Compliance with Tribal Business and Licensing requirements;

In closing, I am pleased to report that South Central Communications and the Kaibab Band of Paiute Indians have a very strong mutually beneficial working relationship with one another.

Sincerely,

Michael R. East
President and Chief Executive Officer
South Central Communications

Response to Line 1010
South Central Utah Telephone Association, Inc.
SAC 502286

Voice Services Comparability Report

Pursuant to 47 C.F.R. § 54.313 (a) (10) South Central Utah Telephone Association, Inc., ("South Central") is in compliance with the requirement that voice services is no more than two standard deviations above the national average urban rate for voice service of \$46.96 as specified in Public Notice DA 14-384 issued on March 20, 2014. South Central's current total local end-user rates¹ as submitted on Line 700 of this 2014 Form 481 submission are not above the standard deviation as specified in the USF/ICC Transformation Order.²

¹ Local End User Rate as defined in USF/ICC Transformation Order 26 FCC Rcd at 17751, Para. 238

² USF/ICC Transformation Order, 26 FCC Rcd at 17694, Para. 84 (footnote included) "The standard deviation is a measure of dispersion. The sample standard deviation is the square root of the sample variance. The sample variance is calculated as the sum of the squared deviations of the individual observations in the sample of data from the sample average divided by the total number of observations in the sample minus one. In a normal distribution, about 68 percent of the observations lie within one standard deviation above and below the average and about 95 percent of the observations lie within two standard deviations above and below the average."

LIFELINE

1. GENERAL

Applicable to qualifying low-income subscribers to single party residential service of the Company.

2. RATES

- A. Lifeline is a reduction or credit in the local service charges normally paid by qualifying low-income consumers. The reduction to the normal residential one-party rates are as follows:

<u>Residential Access Lines</u>	<u>Monthly Credit or Discount</u>
Federal Lifeline Reduction	\$ 9.25
State Local Rate Reduction	\$ 3.50

These reductions or credits are from the normal residential one-party service subscribed to by the consumer. The credit may be used in a bundled service plan combining voice and broadband or in packages including optional calling features.

In addition to the above Federal Lifeline Reduction, the State provides a Local Rate Reduction for eligible consumers, pursuant to Public Service Commission of Utah Rules R746-341. The State Local Rate Reduction is only provided if it is funded through the State's Universal Service Fund.

In no case will the discount exceed the rate charged for the service subscribed to by each individual.

- B. The following services are included:

1. Single party, voice grade access to the Public Switched Network
2. Access to emergency services
3. Access to operator services
4. Access to interexchange services
5. Access to directory assistance
6. Toll Blocking, if requested by the Customer
7. Extended Area Service

(T)

(I)

(T)

(C)

|

(C)

(T)

|

(T)

(C)

(C)

LIFELINE (Cont'd)

3. LIFE LINE ELIGIBILITY REQUIREMENTS

- A. An applicant must meet eligibility requirements established in the Public Service Commission of Utah Rules R746-341.
- B. Customer must complete the approved application for the Utah Telephone Assistance Program (UTAP) and submit the application to UTAP program for eligibility certification.
- C. The customer must be recertified annually by the appropriate state agency
- D. The premises at which the residential service is requested is the applicant's principal place of residence.
- E. There is only one telephone line serving the residential premises eligible for the credit. The residential premises shall consist of that portion of an individual house or building or one flat or apartment occupied by a single family or individuals functioning as one domestic unit.

(T)

(T)

4. FUNDING

- A. The Federal Lifeline Reduction is reimbursed to the company through the Universal Service Administrative Company (USAC).
- B. The State Local Rate Reduction is funded from the Utah Universal Services Fund (USF). The company is reimbursed for the State Local Rate Reduction from the Utah USF.

(T)

(T)

5. REGULATIONS

- A. The Telephone Assistance Program credit will begin with the next billing cycle of the company following the date the Company receives a valid application from the customer or when new service is established for a qualifying customer.
- B. The regular service connection charge, move and change charge, and regulations applicable to the service offerings specified in the tariff will apply. The service connection charge and move and change charge to change to or from this program due to eligibility status will be waived.
- C. The Lifeline credit will be subject to the following restrictions:
 - 1. Applicant must be head of household or person whose name the property or rental agreement resides.
 - 2. Lifeline credit will only be provided to the applicant's principle residence.
 - 3. The credit will only be applicable for one single residential access line.

LIFELINE (Cont'd)

5. REGULATIONS (Cont'd)

- D. Lifeline will not be furnished on a Foreign Exchange (FEX) basis.
- E. Lifeline service shall not be disconnected for non-payment of toll charges.
- F. If the consumer chooses "toll blocking", the company will not charge a service deposit. Deposits will not be required if customers choose the toll blocking option. No toll blocking charges will be assessed to Lifeline subscribers.

6. The Company will offer Lifeline assistance only during such periods as reimbursement of the discount is available to the Company from Federal and/or State revenue sources.

(L)

(L)

LINE 3005 RATE OF RETURN DATA

REDACTED FOR PUBLIC INSPECTION