

By signing below, I certify under penalty of perjury the information contained within this certification form is true and correct to the best of my knowledge:

- ◆ I have read the information on this certification form and understand that I must meet the qualifications listed on this form to receive assistance from this program.
- ◆ I understand that I must be a part of the household in which Lifeline-supported service is provided.
- ◆ I understand that willfully providing false or fraudulent information to receive a Lifeline benefit is punishable by law.
- ◆ I understand that Lifeline is a government benefit program and willfully making false statements in order to obtain that benefit can be punished by fine or imprisonment, or that I can be barred from the program.
- ◆ I agree to provide documentation of my eligibility, when required to do so.
- ◆ By participating in this government program, I agree to provide my personal information to the national database. I understand that failure to comply will deny me the Lifeline benefit.
- ◆ I understand that I must be a part of the household in which Lifeline supported service is provided
- ◆ I certify that my household is receiving no more than one Lifeline-supported service and understand that violation of this requirement will result in de-enrollment from the program and could result in criminal prosecution.
- ◆ I understand that I may not transfer my service to any other individual.
- ◆ I acknowledge that I may be required to re-certify my eligibility for Lifeline at any time and failure to re-certify my continued eligibility will result in de-enrollment and termination of Lifeline benefits.
- ◆ I understand that I must notify my telecommunications provider within 30 days if I no longer qualify for Lifeline service and may be subject to penalties if I fail to do so.
- ◆ If I move to a new address, I agree to provide my new address to my telephone provider within 30 days.
- ◆ I understand completion of this certification form does not constitute immediate acceptance into this program.

Applicant's Signature _____ **Date** _____

I am an "Authorized Representative" for this applicant and am submitting this form on behalf of this customer. I am willing to assist this applicant in seeking telephone service discounts.

Print "Authorized Representative" Name _____ Daytime Phone Number _____ Date _____

Mail this form and required documents to: Ace Communications Group, 207 East Cedar, PO Box 360, Houston, MN 55943-0360

Prompt return of this certification form to your local telephone provider is necessary to ensure proper credits to your account. Certified low-income telephone assistance subscribers will receive a re-certification form annually from their local telecommunications provider and must return that form to their telecommunications provider within 30 days to ensure the continuation of assistance benefits.

Note: Any support documentation received with this certification form **will not** be kept or stored by this local telecommunications provider.

SERVICE PROVIDER USE ONLY

Telephone Number Associated with Lifeline service: _____

Initiation Date: _____ De-enrollment Date: _____

Type of Documentation Reviewed: Award Letter Voucher Benefits Card Income Statement Other

Identifying Information of Document Submitted: _____

Documentation Expiration Date (if applicable): _____

Name on Documentation (if different from name of applicant): _____

Method Documentation was provided: In Person Fax Mail Electronically

Reviewed by: _____ Date Reviewed: _____

Eligibility Documentation destroyed by: _____ Date destroyed: _____

SERVICE CHARGES

B. LIFELINE ASSISTANCE

1. The Lifeline Assistance Program is a plan which assists qualified low-income applicants with reductions in their monthly local exchange service rate. The assistance applies for a single telephone line at the applicant's principal place of residence. Qualified applicants shall have their monthly local exchange service rate reduced by the federal Lifeline support amount to reduce the Lifeline customer's residential rate.
2. Eligibility Requirements
To be eligible for assistance, an applicant must participate in one of the following:
 - a. Medicaid (e.g. Title XIX/Medical, state supplemental assistance)
 - b. Food Stamps
 - c. Supplemental Security Income (SSI)
 - d. Federal public housing assistance
 - e. Low-Income Home Energy Assistance Program (LHEAP)
 - f. Persons with income at or below 135% of the Federal Poverty Guidelines
 - g. Temporary Assistance for Needy Family (TANF)
 - h. National School Lunch Program's Free Lunch Program

The Lifeline customer is responsible for notifying the Company if the customer ceases to participate in any of the public assistance programs listed above.

3. Application for Assistance
An applicant shall request telephone assistance through completion of a form provided by the Company.
4. Rates
 - a. The Lifeline customer will receive a monthly credit toward their local exchange service rate. The total monthly credit consists of the federal Lifeline support amount to reduce the Lifeline customer's residential rate.
 - b. Toll blocking shall be included with this service offering without charge. No service deposit would be required if applicant voluntarily elects toll blocking with the initiation of Lifeline Service.

ISSUED: March 20, 2012

EFFECTIVE: April 2, 2012

BY: Todd Roesler

CEO 207 E. Cedar Street, Houston, MN 55943

Study Area Name: Ace Telephone Association

SAC: 351346

State: Iowa

Form 481 Line 1010

Study Area Code	Exchange	Current Residential Flat Rate	Additional Basic Local Rate Charges if applicable	Mandatory Expanded Calling	Fed Subscriber Line Charge	State Subscriber Line Charge	State USF Surcharge	County E-911 Surcharge	State E-911 (e.g. fire & police)	TRS & other hearing impaired Surcharges	Total Fixed Voice Services Pricing
351346	745 Canton IA	17.000			6.500			1.000			24.500
351346	567 Castalia	17.000			6.500			1.000			24.500
351346	423 Clermont	17.000			6.500			1.000			24.500
351346	497 Dorchester	17.000			6.500			1.000			24.500
351346	534 Fort Atkinson	17.000			6.500			1.000			24.500
351346	586 Harpers Ferry	17.000			6.500			1.000			24.500
351346	564 Highlandville	17.000			6.500			1.000			24.500
351346	544 New Albin	17.000			6.500			1.000			24.500
351346	532 Ossian	17.000			6.500			1.000			24.500
351346	535 Waterville	17.000			6.500			1.000			24.500

Carrier must certify that pricing of fixed voice services is no more than two standard deviations above the applicable national average urban rate floor for voice service. For program year 2015, the average urban rate for local service is \$20.46

As shown above, the sum of the local rate and state fees is below \$46.96.

Carrier certifies that the sum of its local rate and state fees is below \$46.96.

PUBLIC DOCUMENT TRADE SECRET DATA HAS BEEN EXCISED

(3005a) Operating Report for Privately-Held Rate of Return Carriers		FCC Form 481
Balance Sheet - Data Collection Form		OMB Control No. 3060-0986
Page 1 of 3		July 2013
<010> Study Area Code	<010>	451246
<015> Study Area Name	<015>	ACCOUNTS RECEIVABLE
<020> Program Year	<020>	2013
<030> Contact Name - Person USAC should contact regarding this data	<030>	CYRIL HANCOCK
<035> Contact Telephone Number - Number of person identified in data line <030>	<035>	504 225 2243
<039> Contact Telephone Email Address - Email Address of person identified in data line <030>	<039>	cyhanco@alcom.com
<input type="checkbox"/> Files as reviewed single company	<input checked="" type="checkbox"/> Filed as audited single company	
<input type="checkbox"/> Filed as reviewed consolidated company	<input type="checkbox"/> Filed as audited consolidated company	
<input type="checkbox"/> Filed as subsidiary of reviewed consolidated company	<input type="checkbox"/> Filed as subsidiary of audited consolidated company	

CERTIFICATION

We hereby certify that 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.

Signature	Date
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PART A. BALANCE SHEET

ASSETS	BALANCE PRIOR YEAR	BALANCE END OF PERIOD	LIABILITIES AND STOCKHOLDERS' EQUITY	BALANCE PRIOR YEAR	BALANCE END OF PERIOD
CURRENT ASSETS			CURRENT LIABILITIES		
1. Cash and Equivalents			25. Accounts Payable		
2. Cash-RUS Construction Fund			26. Notes Payable		
3. Affiliates:			27. Advance Billings and Payments		
a. Telecom, Accounts Receivable			28. Customer Deposits		
b. Other Accounts Receivable			29. Current Mat. L/T Debt		
c. Notes Receivable			30. Current Mat. L/T Debt-Rur. Dev.		
4. Non-Affiliates:			31. Current Mat.-Capital Leases		
a. Telecom, Accounts Receivable			32. Income Taxes Accrued		
b. Other Accounts Receivable			33. Other Taxes Accrued		
c. Notes Receivable			34. Other Current Liabilities		
5. Interest and Dividends Receivable			35. Total Current Liabilities (25 thru 34)		
6. Material-Regulated			LONG-TERM DEBT		
7. Material-Nonregulated			36. Funded Debt-RUS Notes		
8. Prepayments			37. Funded Debt-RTB Notes		
9. Other Current Assets			38. Funded Debt-FFB Notes		
10. Total Current Assets (1 Thru 9)			39. Funded Debt-Other		
			40. Funded Debt-Rural Develop. Loan		
NONCURRENT ASSETS			41. Premium (Discount) on L/T Debt		
11. Investment In Affiliated Companies			42. Reacquired Debt		
a. Rural Development			43. Obligations Under Capital Lease		
b. Nonrural Development			44. Adv. From Affiliated Companies		
12. Other Investments			45. Other Long-Term Debt		
a. Rural Development			46. Total Long-Term Debt (36 thru 45)		
b. Nonrural Development			OTHER LIAB. & DEF. CREDITS		
13. Nonregulated Investments			47. Other Long-Term Liabilities		
14. Other Noncurrent Assets			48. Other Deferred Credits		
15. Deferred Charges			49. Other Jurisdictional Differences		
16. Jurisdictional Differences			50. Total Other Liabilities and Deferred Credits (47 thru 49)		
17. Total Noncurrent Assets (11 thru 16)			EQUITY		
			51. Cap. Stock Outstanding & Subscribed		
PLANT, PROPERTY, AND EQUIPMENT			52. Additional Paid-in-Capital		
18. Telecom, Plant-in-Service			53. Treasury Stock		
19. Property Held for Future Use			54. Membership and Cap. Certificates		
20. Plant Under Construction			55. Other Capital		
21. Plant Adj., Nonop. Plant & Goodwill			56. Patronage Capital Credits		
22. Less Accumulated Depreciation			57. Retained Earnings or Margins		
23. Net Plant (18 thru 21 less 22)			58. Total Equity (51 thru 57)		
24. TOTAL ASSETS (10+17+23)			59. TOTAL LIABILITIES AND EQUITY (35+46+50+58)		

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(3005b) Operating Report for Privately-Held Rate of Return Carriers
 Balance Sheet - Data Collection Form
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<010> Study Area Code
 <015> Study Area Name
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 <030> Contact Name - Person USAC should contact regarding this data
 <035> Contact Telephone Number - Number of person identified in data line <030>
 <039> Contact Telephone Email Address - Email Address of person identified in data line <030>

<010> 351346
 <015> ACE TELEPHONE ASSOCIATION
 <020> 2015
 <030> CYNTHIA SWEET
 <035> 507 896 6211
 <039> csweet@acecomgroup.com

PART B. STATEMENTS OF INCOME AND RETAINED EARNINGS OR MARGINS		
ITEM	PRIOR YEAR	THIS YEAR
1. Local Network Services Revenues		
2. Network Access Services Revenues		
3. Long Distance Network Services Revenues		
4. Carrier Billing and Collection Revenues		
5. Miscellaneous Revenues		
6. Uncollectible Revenues		
7. Net Operating Revenues (1 thru 5 less 6)		
8. Plant Specific Operations Expense		
9. Plant Nonspecific Operations Expense (Excluding Depreciation & Amortization)		
10. Depreciation Expense		
11. Amortization Expense		
12. Customer Operations Expense		
13. Corporate Operations Expense		
14. Total Operating Expenses (8 thru 13)		
15. Operating Income or Margins (7 less 14)		
16. Other Operating Income and Expenses		
17. State and Local Taxes		
18. Federal Income Taxes		
19. Other Taxes		
20. Total Operating Taxes (17+18+19)		
21. Net Operating Income or Margins (15+16-20)		
22. Interest on Funded Debt		
23. Interest Expense - Capital Leases		
24. Other Interest Expense		
25. Allowance for Funds Used During Construction		
26. Total Fixed Charges (22+23+24-25)		
27. Nonoperating Net Income		
28. Extraordinary Items		
29. Jurisdictional Differences		
30. Nonregulated Net Income		
31. Total Net Income or margins (21+27+28+29+30-26)		
32. Total Taxes Based on Income		
33. Retained Earnings or Margins Beginning-of-Year		
34. Miscellaneous Credits Year-to-Date		
35. Dividends Declared (Common)		
36. Dividends Declared (Preferred)		
37. Other Debits Year-to-Date		
38. Transfers to Patronage Capital		
39. Retained Earnings or Margins end-of-Period ((31+33+34)-(35+36+37+38))		
40. Patronage Capital Beginning-of-Year		
41. Transfers to Patronage Capital		
42. Patronage Capital Credits Retired		
43. Patronage Capital End-of-Year (40+41-42)		
44. Annual Debt Service Payments		
45. Cash Ratio ((14+20-10-11)/7)		
46. Operating Accrual Ratio ((14+20+26)/7)		
47. TIER ((31+26)/26)		
48. DSCR ((31+26+10+11)/44)		

PUBLIC DOCUMENT TRADE SECRET DATA HAS BEEN EXCISED

(3005c) Operating Report for Privately-Held Rate of Return Carriers
 Balance Sheet - Data Collection Form
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 July 2013

<010> Study Area Code
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 <035> Contact Telephone Number - Number of person identified in data line <030>
 <039> Contact Telephone Email Address - Email Address of person identified in data line <030>

<010> 351346
 <015> ACE TELEPHONE ASSOCIATION
 <020> 2015
 <030> CYNTHIA SWEET
 <035> 507 896 6211
 <039> csweet@acecomgroup.com

PART C. STATEMENTS OF CASH FLOWS	
1. Beginning Cash (Cash and Equivalents plus RUS Construction Fund)	
CASH FLOWS FROM OPERATING ACTIVITIES	
2. Net Income	
Adjustments to Reconcile Net Income to Net Cash Provided by Operating Activities	
3. Add: Depreciation	
4. Add: Amortization	
5. Other (Explain)	
Changes in Operating Assets and Liabilities	
6. Decrease/(Increase) in Accounts Receivable	
7. Decrease/(Increase) in Materials and Inventory	
8. Decrease/(Increase) in Prepayments and Deferred Charges	
9. Decrease/(Increase) in Other Current Assets	
10. Increase/(Decrease) in Accounts Payable	
11. Increase/(Decrease) in Advance Billings & Payments	
12. Increase/(Decrease) in Other Current Liabilities	
13. Net Cash Provided/(Used) by Operations	
CASH FLOWS FROM FINANCING ACTIVITIES	
14. Decrease/(Increase) in Notes Receivable	
15. Increase/(Decrease) in Notes Payable	
16. Increase/(Decrease) in Customer Deposits	
17. Net Increase/(Decrease) in Long Term Debt (Including Current Maturities)	
18. Increase/(Decrease) in Other Liabilities & Deferred Credits	
19. Increase/(Decrease) in Capital Stock, Paid-in Capital, Membership and Capital Certificates & Other Capital	
20. Less: Payment of Dividends	
21. Less: Patronage Capital Credits Retired	
22. Other (Explain)	
23. Net Cash Provided/(Used) by Financing Activities	
CASH FLOWS FROM INVESTING ACTIVITIES	
24. Net Capital Expenditures (Property, Plant & Equipment)	
25. Other Long-Term Investments	
26. Other Noncurrent Assets & Jurisdictional Differences	
27. Other (Explain)	
28. Net Cash Provided/(Used) by Investing Activities	
29. Net Increase/(Decrease) in Cash	
30. Ending Cash	