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| STATE OF NEVADA |) |
|-----------------|------|
| |) ss |
| COUNTY OF CLARK |) |

- 1. I am the Chief Executive Officer of LTD Broadband LLC (LTD); and, I am authorized to submit this Affidavit on behalf of LTD. This Affidavit is provided to support LTD's Request for Certification to the Iowa Utilities Board as contemplated in 47 C.F.R. § 54.314.
- 2. As an authorized representative of LTD, I hereby affirm familiarity with and an understanding of the requirements of the Federal Communications Act of 1934, as amended by the Telecommunications Act of 1996 and the USF/ICC Transformation Order of 2011, with respect to the receipt of any federal universal service funds received as interstate access support, interstate common line support, support provided to competitive eligible telecommunications carriers, Connect America Fund support, and/or high-cost loop support.
- 3. During 2019 and 2020, LTD received federal universal service support and had investment and expenses relating to the provision, maintenance and upgrading of facilities and services for which such support was intended. During 2020, LTD used the federal universal service support it received only for the provision, maintenance and upgrading of facilities and services in SAC 359149 for which the support was intended consistent with 47 U.S.C. § 254(e).
- 4. LTD certifies that it will use the federal universal service support it receives during 2021 only for the provision, maintenance and upgrading of facilities and services for which such support is intended consistent with 47 U.S.C. § 254(e).
- 5. LTD also certifies that to the best of our knowledge it is compliant with applicable rules on service quality and consumer protection rules. LTD also certifies that it is in compliance with 47 CFR 54.202(a) (2) that the carrier be able to function in emergency operations. Specifically, the reporting carrier has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities and is capable of managing traffic spikes resulting from emergency situations.

/s/ Corey Hauer CEO

Subscribed and sworn before my by Corey Hauer on July 1, 2020





| on energ | Data Collection Form | | | | | | | | NO Harr | OMB Control No. 3060- July 2018 | OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018 | io. 3060-0819 |
|----------|-----------------------------|---|-------------------------------------|-------------------|-------------------|---------------------------------|-----------------|----------------------------|--------------------------------------|--|--|---------------|
| <010> | Study Area Code | ode . | | | | 359149 | | | | | | |
| <015> | Study Area Name | ame | | | | LTD Broadband LLC | nd LLC | | 100 A11 | | | |
| <020> | Program Year | | | | | 2021 | | | | | | |
| <030> | | Contact Name - Person USAC should contact regarding this data | : should contac | t regarding thi | s data | Corey Hauer | | | | 1000 000 000 000 000 000 000 000 000 00 | | |
| <032> | | Contact Telephone Number - Number of person identified in data line <030> | Number of pe | rson identified | in data line <0 | | ext, | | | | | |
| <039> | | Contact Email Address - Email Address of person identified in data line <030> | il Address of pe | erson identified | I in data line <(| 330> coreyhauer@gmail.com | gmail.com | | | | | |
| <210> | | For the prior calendar year, were there any reportable voice service outages? | ır, were there | any reportal | ble voice serv | rice outages? | | | | | | |
| <220> | ÷ | 401> | < | < p 3> | < 0 4> | <c1></c1> | <c2></c2> | ⇔ | \$ | ÷ | \$ | ş |
| | NORS Reference Number | Outage Start Date | Outage Start Outage Start Date Time | Š | 8 | Number of Customers Affected | Total Number of | 911 Facilities Affected | Service Outage Description (Check | Did This Outage Affect Multiple Study Areas | Service Outage | Preventative |
| | | (A) | | | 0 | | | (Yes / No) | all that apply) | (Yes / No) | Resolution | Procedures |
| | | | | | J) SECURE | | | | | | | |
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| | | | | | 1000 | | | | | Control of the Contro | | |

| 400) Numbe Data Collecti | er of Complaints per 1,000 customers ion Form | WAR TO THE TOTAL | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018 |
|-----------------------------|--|--|--|
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | |
| <020> | Program Year | 2021 | |
| <030> | Contact Name - Person USAC | should contact regarding this data | |
| <035> | Contact Telephone Number - <030> | Number of person identified in data line | 100 |
| <039> | Contact Email Address - Email <030> | Address of person identified in data line ooxeyhatar@gmail.com | A THE STATE OF THE |
| <400> | voice complaints (zero or great | to indicate how you would like to report ter) for voice telephony service in the prior area in which you are designated an ETC for , lease, or otherwise utilize. | |
| <410> | Complaints per 1000 custome | rs for fixed voice | |
| | | | |

<420> Complaints per 1000 customers for mobile voice

| | npliance With Service Quality Standards and Consumer Protection Rules action Form | | FCC Form 481. ONIB Control No. 3060-0986/ONIB Control No. 3060-0815 |
|-------|--|----------------------|---|
| | | | July 2018 |
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | 5.00 |
| <020> | Program Year | 202: | ************************************** |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073160143 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@qmail.com | 570,000 A |

<515> Certify compliance with applicable minimum service star

| Charles well an | unctionality in Emergency Situations ollection Form | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018 |
|-----------------|---|-------------------------|--|
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | |
| <020> | Program Year | 2021 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreybauer@qzail.com | |
| <600> | Certify compliance regarding ability to function in emergency situations | Yes | |
| <610> | Descriptive document for Functionality in Emergency Situations | FCC Form 481 - Function | nality in Emergency Situations.pdf |

| do (008) | (800) Operating Companies | | | | FCC Form 481 |
|---------------|---------------------------|--|----------------------|---|--|
| Darta Col | Data Collection Form | | | | OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018 |
| <010> | <010> Study Area Code | | 359149 | | |
| <015> | Study Area Name | | LID Broadband LLC | Tric | |
| <070> | Program Year | | 2021 | | |
| <030> | | Contact Name - Person USAC should contact regarding this data | Corey Hauer | | |
| <032> | ıı | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | t. | |
| <039> | | Contact Email Address - Email Address of person identified in data line < 030> | coreyhauer@gmail.com | nail.com | |
| Š | | Title Broadband Tit | | | |
| 49104 | | | | | |
| %11 | - 1 | Not Applicable | | | |
| <812> | Operating Company | LTD Broadband LLC | | E. | |
| <813> | | <a1></a1> | 2 | <92> | <a3></a3> |
| | | Affiliates | G. | SAC | Doing Business As Company or Brand Designation |
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| T (006) | (900) Tribel Lands Reporting | | FCC Form 481 |
|--|---|------------------------------------|--|
| Data C | Data Collection Form | | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
| 010 | Study Area Code | 359149 | |
| <015> | | LTD Broadband LLC | |
| <020> | | 2021 | The same of the sa |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | | coreyhauer@gmail.com | |
| <006> | Does the filing entity offer tribal land services? (Y/N) | No | |
| <910> | Tribal Land(s) on which ETC Serves | | |
| | _ | | |
| <920> | Tribal Government Engagement Obligation | | |
| | | Name of At | Name of Attached Document |
| ff your confile demons § 54.31. <92.1> <92.2> <92.4> <92.6> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5> <92.5 | f your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(5) includes: c921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions. c922> Feasibility and sustainability planning; Amarketing services in a culturally sensitive manner; c924> Compliance with Rights of way processes c925> Compliance with Facilities Siting rules compliance with Environmental Review processes c926> Compliance with Cultural Preservation review processes c928> Compliance with Tribal Business and Licensing requirements. | Select Yes or No or Not Applicable | |
| | | | |

| 1000l | (1000) Voice and Broadband Service Rate Comparability | Total Towns Abs | rageo |
|---------|---|--|-----------|
| Data Co | Data Collection Form | ONAB Control No. 2060-0886/OMB Control No. 2060-0819 | 3060.0910 |
| | | July 2018 | |
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | |
| <020> | Program Year | 2021 | fg) |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com | |
| <1000> | Voice services rate comparability certification | | |
| <1010> | Attach detailed description for voice services rate comparability compliance | | |
| <1020> | Broadband comparability certification | Name of Attached Document | |
| <1030> | Attach detailed description for broadband comparability compliance | | |
| | | Name of Attached Document | |

| (1200) Te Lifeline | (1200) Terms and Condition for Lifeline Customers Lifeline | FCC Form 481 | e, 11 |
|--|--|------------------------------|--------|
| ata Col | Data Collection Form | July 2018 | |
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LAD Broadband LLC | |
| <020> | Program Year | 2021 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | 8 |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@qmail.com | |
| <1210> | Terms & Conditions of Voice Telephony Lifeline Plans | | T-10. |
| | | Name of Attached Pociment | \neg |
| <1220> | Link to Public Website | אמווב סי אונפרובת הסרמוובוור | 1 |
| "Please check th or the website li: § 54.422(a)(2) a annually report: | "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. | | |
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| (2005) Price (| (2905) Price Cap Carrier Additional Documentation | 938 | ECC Form 481 |
|--|--|---|--|
| Data Collection Form Including Rate-of-Reti | Data Collection Form. Including Rate-of-Return Carriers offillated with Price Cap Local Exchange Carriers | OMB Cont | OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018 |
| | | 350140 | WE-2111-4-3000-201-201-201-201-201-201-201-201-201- |
| <010> Stu | Study Area Lode | LWD Broadband LLC | |
| | Program Year | 2021 | |
| | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> Cor | Contact Telephone Number - Number of person identified in data line <030> | מייינים באריי | |
| <039> Co | <039> Contact Email Address - Email Address of person identified in data line <030> তি কাল্যালণ্ডিয়া ক্রম্ভিলালন্ত্র প্রেপ্ত প্রকারণাজ্যালন্ত্র প্রাপ্ত প্র প্রাপ্ত প্রাপ্ত প্র | (33) coreyhanerigmail.com | termovalishing side of the company of the first of the fi |
| Select the to offset form and | Select the appropriate responses below (Yes, No, Not Apploto offset access charge reductions, and Connect America P form and in the documents attached below is accurate. | Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of 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(c),(d),(e). The information reported on this form and in the documents attached below is accurate. | n Cost support, High Cost support The information reported on this |
| <2015> | 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4) | R § 54.313(c)(4) | |
| Price Cap | Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} | 54.313(d)} | |
| <2016> | . Certification support used to build broadband | | |
| Connect | Connect America Phase II Reporting {47 CFR § 54.313(e)} | | |
| <2017A> | Connect America Fund Phase II recipient? | | |
| <2017C> | <2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2018. | carrier used for | |
| <2018> | Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A) | inity anchor Name of Attached Document Listing ng access to Required Information 4.313(e)(1)(ii)(A) | isting |
| <2019> | Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C) | Imunications and to postings seeking ts for the schools and e schools and e schools and ere the carrier is the bids were at rates thools and libraries in (C) | |

| 100000000000000000000000000000000000000 | | |
|---|---|---|
| <010> | Study Area Code | 359149 |
| <015> | Study Area Name | LTD Broadband LLC |
| <020> | Program Year | 2021 |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com |
| | | |
| (3007) | Does this filing retain a Cost Consultant and/or Firm, or other Third Party to prepare financial and operations data disclosures submitted to the National Exchange Carrier Association (NECA), USAC, or the Administrator? | prepare financial and iciation (NECA), USAC, |
| | (3007a) | (3007b) |
| | Name of Consultant | Name of Consultant Firm/Third Party |
| | | |
| | | |
| | | |
| | | |
| | CAF BLS Reporting | |
| (3008A) | Please indicate whether new locations were deployed during the prior calendar year. | lar year. (Yes/No) |
| (3008B) | Please enter the number of newly deployed locations in the prior calendar year associated with each of the following speed tiers. | sar |
| (3008B1) | Number of newly deployed locations with access to broadband speeds of at least 10/1 Mbps but less than 25/3 Mbps. | east 10/1 |
| (3008B2) | Number of newly deployed locations with access to broadband speeds of 25/3 Mbps or higher. | 3 Mbps or |
| (3008C) | Please provide the percentage of deployment across the entire study area. | |

| (3005) Rate O Deta Collectio | DF Return Carrier Additional Documentation log Form | 6 8 8 | | | FCC Form 481 ONRE Control No. 3060-0986/Oslis Control No. 3060-0819 July 2018 |
|---------------------------------|---|-------------------------------|-----------------|------------------|--|
| -010 | Carrier, Assan Anada | | | | |
| <010> | Study Area Code | | 359149 | | |
| <015> | Study Area Name | | | adband L | .LC |
| <020> | Program Year | 2.1 | 2021 | | |
| <030> | Contact Name - Person USAC should contact regarding this da | ata | Corey H | lauer | |
| <035> | Contact Telephone Number - Number of person identified in | data line <030> | 50731801 | 43 ext. | |
| <039> | Contact Email Address - Email Address of person identified in | n data line <030> | coreyha | uer@gmai | l.com |
| | | | | | The control of the co |
| elect fron | m the drop down menu or check the boxes below to eporting requirements set forth in 47 CFR 54.313(f)(2 pelow is accurate. | note compliance | ce with 54.313(| f)(1). Privately | held carriers must ensure compliance with the |
| 3009) | Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii) | | | | |
| 3010A) | Certification of Public Interest Obligations (47 CFR § 54.313(f)(1)(i)) | f Astroph | | - Inad | |
| 3010B) 3012A) | Please Provide Attachment Community Anchor Institutions (47 CFR § | Name of Attach | hed Document Li | sting Required | |
| 3012B) | 54.313(f)(1)(ii)) Please Provide Attachment | | hed Document Li | sting Required | |
| 3013) | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)} | Information (Yes/No) | 0 | 0 | |
| 3014) | If yes, does your company file the RUS annual report | (Yes/No) | O | O | |
| (3015) | Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) Document(s) with Balance Sheet, Income Statement | |] | | |
| (3017) | and Statement of Cash Flows If the response is yes on line 3014, attach your company's RUS annual report and all required | Name of Attach Information | hed Document Li | sting Required | |
| (3018) | documentation If the response is no on line 3014, is your company audited? 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: | (Yes/N | (o) O | 0 | |
| (3019) | Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement | | | | |
| (3020) | and Statement of Cash Flows | | | | |
| (3021) | Management letter and/or audit opinion 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) with Balance Sheet, Income Statement and Statement of Cash Flows | | | | |
| (3026) | Attach the worksheet listing required information | Name of Attach | hed Document Li | isting Required | 9 |

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| (3005) Rate Of Return Carrier Additional Documentation (Continued) | 8 | FCC Form 481 |
|---|----------------------|---|
| Data Coffection Form | 5 | OMB Centrol No. 3060-0886/OMB Centrol No. 3050-0819 |
| | | hdy 2018 |
| collo Study Area Code | 941975 | |
| <015> Study Area Name | LTD Broadband LLC | |
| <020> Program Year | 2021 | |
| <030> Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@dmail.com | |
| Financial Data Summary | | |
| | | |
| (3027) Revenue | | |
| (3028) Operating Expenses | | |
| (3029) Net Income | | |
| (3030) Telephone Plant In Service(TPIS) | | |
| (3031) Total Assets | | |
| (3032) Total Debt | | |
| (3033) Total Equity | | |
| (3034) Dividends | | |
| | | |

| (4005) Rural Broadband Experiment Additional Documentation | 24 | | FCC Form 481 |
|--|-----|------|---|
| Data Collection Form | 5 A | e, a | OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
| | 2 2 | *** | July 2018 |

| Study Area Code | 359149 |
|--|---------------------------------|
| Study Area Name | LTD Broadband Lic |
| Program Year | 2021 |
| Contact Name - Person USAC should contact regarding this data | Corey Hauer |
| Contact Telephone Number - Number of person identified in data | ine <030> 5073180143 ext. |
| Contact Email Address - Email Address of person identified in data | ine <030> cormyhauer@gmail.com |
| | Study Area Name Program Year |

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations and provide a list of newly served community anchor institutions.

Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas.

Community Anchor Institutions - FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

4003b. Provide the number, names and addresses Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

| (5005) Aleska Plan Participants Additional Documentation | | 9 - 1 | FCC Form 481 | |
|--|----------|----------|---|----|
| Data Collection Form | a e a | A No. 11 | OMB Control No. 3060-0966/OMB Control No. 3060-0819 | 15 |
| | <u> </u> | 8 5 4 | July 2018 | |

| <010> | Study Area Code | 359149 |
|-------|---|----------------------|
| <015> | Study Area Name | LTD Broadband LLC |
| <020> | Program Year | 2021 |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hazer |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 axt. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreybauer@gmail.com |
| | 7000 | |

5005 Alaska Plan

| | Please indicate whether any terrestrial backhaul or other satellite backhaul became |
|--------|---|
| (5011) | commercially available in the previous calendar year in areas previously served |
| | exclusively by performance-limiting satellite backhaul. |

(Yes/No)

(5012) If the filing carrier identified in its approved perfomance plans that it relies exclusively on satellite backhaul for a certain poriton of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previoius calendar year in areas that were previoiusly served exclusively by satellite backhaul.

(Yes/No)

| 5013> | <a>> | | <♡ |
|------------|--|-------------------------|--------------------------------------|
| | Description Of Backhaul Technology | Date Backhaut Available | Newly Served Locations or Population |
| - | 1 de la companya de l | | |
| | | | |
| ********** | | | |
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| - | | | |

| (8003) | (6005) Phase II Auction Reporting | FC om 681 | |
|--------|--|--|---|
| | Date Collection | OMB Control No. 3060-0986/ April 2020 | OMB Control No. 3060-0986/OMB Control No. 3060-0819 April 2020 |
| 916 | <010> Study Area Code | 359149 | |
| <015> | <015> Study Area Name | LID Broadband LLC | |
| <020> | <020> Program Year | 2021 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com | |
| <6010> | Total amount of Phase II auction support, if any, the phase II Auction recipient carrier used for capital expenditures in the previous calendar year | | |
| <6011> | > Phase II Auction recipient performance requirements certification | on (Yes/No) Yes | |
| | | | |

| (7005) P Darta Co | (7005) Phase-Down Support Reporting Data Collection | FCC Fo OMB (April 2 | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 April 2020 |
|----------------------|---|----------------------------|--|
| <010> | <010> Study Area Code | 359149 | |
| <015> | <015> Study Area Name | LTD Broadband LLC | |
| <020> | <020> Program Year | 2021 | |
| <030> | <030> Contact Name - Person USAC should contact regarding this data | Corey Hauer | The state of the s |
| <035> | <035> Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | <039> Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com | . 44 |

<7010> Price Cap Carrier and Fixed Competitive Eligible Telecommunications Carrier Phase-Down support requirement certification

(Yes/No)

| Certification - Reporting Carrier Data Collection Form | | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3 July 2018 | |
|--|---|--|--|
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | |
| <020> | Program Year | 2021 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com | |

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

| 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: LTD Broadband LLC | | | | | |
| Signature of Authorized Officer: | Date | | | | |
| Printed name of Authorized Officer: Corey Hauer | | | | | |
| Title or position of Authorized Officer: CEO | | | | | |
| Telephone number of Authorized Officer: 5073180143 ext. | | | | | |
| Study Area Code of Reporting Carrier: 359149 | Filing Due Date for this form: 07/01/2020 | | | | |

| Certification - Agent / Carrier Data Collection Form | | | FCC Form 481 OM6 Control No. 3060-0985/OM6 Control No. 3050-081 July 2018 |
|---|---|----------------------|---|
| <010> | Study Area Code | 359149 | |
| <015> | Study Area Name | LTD Broadband LLC | |
| <020> | Program Year | 2021 | |
| <030> | Contact Name - Person USAC should contact regarding this data | Corey Hauer | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 5073180143 ext. | V 0 V 0 |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | coreyhauer@gmail.com | |

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

| certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier 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: | | | | | |

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 Firm: | | | | | | |
| Signature of Authorized Agent or Employee of Agent: | | Date: | | | | |
| Name of Authorized Agent Employee: | | | | | | |
| Title or position of Authorized Agent or Employee of Agent | | | | | | |
| Felephone number of Authorized Agent or Employee of Age | ent: | 27 30107 300 3011 | | | | |
| Study Area Code of Reporting Carrier: | Filing Due Date for this form: | | | | | |



Emergency Operations, LTD Broadband LLC has:

- Established reasonable provisions to meet emergencies resulting from failures of lighting
 or power service, sudden and prolonged increases in traffic, illness of operators or from
 fire, storm, or acts of God including provisions for emergency power that meet or exceed
 the rule requirement to provide:
- A minimum of eight hours of battery service in at each customer premise.
- A permanently installed power unit in exchanges exceeding 5000 lines.
- Mobile power units that can be delivered on short notice and which can be readily connected in offices without installed emergency power facilities.
- Has informed employees as to the procedures to be followed, including reasonable rerouting of traffic around damaged facilities and the deployment of emergency power, in the event of emergency in order to prevent or mitigate interruption or impairment of telecommunications service.

CERTIFICATE OF SERVICE

I, Corey Hauer, hereby certify that I have this day served a true and correct copy of the following document to all persons at the addresses indicated on the office service list on file with the Iowa Utilities Board by electronic filing, electronic mail, or by depositing the same envelope with postage paid in the United States Mail at Las Vegas, Nevada:

Annual Certification Related to Eligible Telecommunications Carriers' Use of the Federal Universal Service Support Reporting Requirements – Form 481

filed this 1st day of July, 2020.

/s/ Corey Hauer, CEO LTD Broadband LLC