

October 9, 2013



VIA ELECTRONIC FILING

Ms. Jean Jewell, Commission Secretary
Idaho Public Utilities Commission
472 W. Washington Street
Boise, Idaho 83720-0074

Re: Farmers Mutual Telephone Company FCC Form 481 – Carrier Annual Reporting Data Collection Form, in Compliance with 47 C.F.R. §§ 54.313 and 54.422

Dear Ms. Jewell:

On behalf of Farmers Mutual Telephone Company (the Company), attached is a copy of the Company's FCC Form 481 – Carrier Annual Reporting Data Collection Form, in compliance with 47 C.F.R. §§ 54.313 and 54.422.

The attached report is provided to the Idaho Public Utilities Commission (PUC) in accordance with 47 C.F.R. §§ 54.313(i) and 54.422(c).

Redacted financial information is included as an attachment to the FCC Form 481. A hard copy of the non-redacted confidential financial information that has been filed with the Federal Communications Commission (FCC) subject to a Protective Order, issued by the FCC on November 16, 2012, and the FCC's confidentiality rules, is also being submitted to the PUC, via overnight delivery, as confidential information that is exempt from disclosure under the Idaho Public Utilities Commission Rules of Procedure, Rule 67. The information is proprietary in nature and is not generally available to the public through regulatory disclosure or other means, and would give an advantage to a competitor if made public.

The Affidavit of Business or Corporate Officer is also attached.

If you have any questions or need additional information, please contact me at 209-955-6116 or via e-mail at Eric.Votaw@mossadams.com.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Eric N. Votaw', with a long horizontal line extending to the right.

Eric N. Votaw, Senior Manager
For Moss Adams

Enclosures

cc: Daniel Greig – General Manager Farmers Mutual Telephone Company

MOSS ADAMS LLP
Certified Public Accountants | Business Consultants

Acumen. Agility. Answers.

REDACTED- FOR PUBLIC INSPECTION



October 9, 2013

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:

Farmers Mutual Telephone Company ("FMTC"), 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,

A handwritten signature in black ink that reads 'Eric N. Votaw'.

Eric N. Votaw, Senior Manager
For Moss Adams LLP

Enclosures

.cc Mr. Charles Tyler, FCC Telecommunications Access Policy Division
Daniel Greig – General Manager Farmers Mutual Telephone Company
Idaho Public Utilities Commission

FCC Form 481 - Carrier Annual Reporting Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	472221
<015> Study Area Name	FARMERS MUTUAL TEL
<020> Program Year	2014
<030> Contact Name: Person USAC should contact with questions about this data	Eric Votaw
<035> Contact Telephone Number: Number of the person identified in data line <030>	209-955-6116
<039> Contact Email Address: Email of the person identified in data line <030>	eric.votaw@mossadams.com

ANNUAL REPORTING FOR ALL CARRIERS	54.313 Completion Required	54.422 Completion Required
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<i>(check box when complete)</i>						
<100> Service Quality Improvement Reporting	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>						
<200> Outage Reporting (voice)	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<210> <input checked="" type="checkbox"/> <-- check box if no outages to report						
<300> Unfulfilled Service Requests (voice)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">0</td> <td style="width: 50%;"></td> </tr> </table>	0		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>	
0						
<input checked="" type="checkbox"/>						
<310> Detail on Attempts (voice)	<i>(attach descriptive document)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<320> Unfulfilled Service Requests (broadband)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>		
<330> Detail on Attempts (broadband)	<i>(attach descriptive document)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<400> Number of Complaints per 1,000 customers (voice)		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<410> Fixed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">0.0</td> <td style="width: 50%;"></td> </tr> </table>	0.0				
0.0						
<420> Mobile	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>					
<430> Number of Complaints per 1,000 customers (broadband)		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<440> Fixed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>					
<450> Mobile	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%;"></td> </tr> </table>					
<500> Service Quality Standards & Consumer Protection Rules Compliance	<i>(check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<510> <input type="text" value="47221ID510"/>	<i>(attached descriptive document)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<600> Functionality in Emergency Situations	<i>(check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<610> <input type="text" value="472221ID610"/>	<i>(attached descriptive document)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<700> Company Price Offerings (voice)	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<710> Company Price Offerings (broadband)	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<800> Operating Companies and Affiliates	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					
<900> Tribal Land Offerings (Y/N)? <input type="radio"/> <input checked="" type="radio"/>	<i>(if yes, complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>						
<1000> Voice Services Rate Comparability	<i>(check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<1010> <input type="text" value=""/>	<i>(attach descriptive document)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>				
<1100> Terrestrial Backhaul (Y/N)? <input checked="" type="radio"/> <input type="radio"/>	<i>(if not, check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>						
<1110>	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>			
<input checked="" type="checkbox"/>						
<1200> Terms and Condition for Lifeline Customers	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; background-color: #cccccc;"></td> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> </tr> </table>		<input checked="" type="checkbox"/>		
	<input checked="" type="checkbox"/>					

Price Cap Carriers, Proceed to Price Cap Additional Documentation Worksheet

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

<2000>	<i>(check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>		
<2005>	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>		

Rate of Return Carriers, Proceed to ROR Additional Documentation Worksheet

<3000>	<i>(check to indicate certification)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>	
<input checked="" type="checkbox"/>				
<3005>	<i>(complete attached worksheet)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 50%; background-color: #cccccc;"></td> </tr> </table>	<input checked="" type="checkbox"/>	
<input checked="" 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
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<010> Study Area Code	472221
<015> Study Area Name	FARMERS MUTUAL TEL
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035> Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039> Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.com

<110> Has your company received its ETC certification from the FCC?	(yes / no)	<input type="radio"/>	<input checked="" type="radio"/>	
If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC?	(yes / no)	<input type="radio"/>	<input type="radio"/>	

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.

Name of Attached Document (.pdf)

Please check these boxes below to confirm that the attached PDF, 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"/>

<input type="checkbox"/>	<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
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<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.com

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

<920> Tribal Government Engagement Obligation

Name of Attached Document (.pdf)

If 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)(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)

**(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	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.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
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<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.com

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

 Name of attached document (.pdf)

<1220> Link to Public Website

HTTP <http://online.fmtc.com/corporate/index.php?display=detail&sp=0&id=4651d70dc19a5b509663feb639af5767>

“Please check these boxes below to confirm that the attached PDF, 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

FCC Form 481

Data Collection Form

OMB Control No. 3060-0986/OMB Control No. 3060-0819

Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers

July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.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)}	<input type="checkbox"/>
<2011>	3rd Year Certification {47 CFR § 54.313(b)(2)}	<input type="checkbox"/>

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

<2012>	2013 Frozen Support Certification	<input type="checkbox"/>
<2013>	2014 Frozen Support Certification	<input type="checkbox"/>
<2014>	2015 Frozen Support Certification	<input type="checkbox"/>
<2015>	2016 and future Frozen Support Certification	<input type="checkbox"/>

Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016>	Certification Support Used to Build Broadband	<input type="checkbox"/>
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Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017>	3rd year Broadband Service Certification	<input type="checkbox"/>
<2018>	5th year Broadband Service Certification	<input type="checkbox"/>
<2019>	Interim Progress Certification	<input type="checkbox"/>
<2020>	Please check the box to confirm that the attached PDF , 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.	<input type="checkbox"/>

<2021>	Interim Progress Community Anchor Institutions	Name of Attached Document Listing Required Information	<input type="checkbox"/>
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(3000) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
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<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.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.

Progress Report on 5 Year Plan

<p>(3010) Milestone Certification {47 CFR § 54.313(f)(1)(i)} Please check this box to confirm that the attached PDF , on line 3012,</p>	<p>Name of Attached Document Listing Required Information</p>	<p><input type="checkbox"/></p>
<p>(3011) contains the required information pursuant to § 54.313 (f)(1)(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.</p>		
<p>(3012) Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}</p>	<p>Name of Attached Document Listing Required Information</p>	<p><input checked="" type="checkbox"/> (Yes/No)</p>
<p>(3013) Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}</p>		<p><input checked="" type="checkbox"/> (Yes/No)</p>
<p>(3014) If yes, does your company file the RUS annual report 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:</p>		<p><input type="checkbox"/></p>
<p>(3015) Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)</p>		<p><input type="checkbox"/></p>
<p>(3016) PDF of Balance Sheet, Income Statement and Statement of Cash Flows</p>		<p><input type="checkbox"/></p>
<p>(3017) If the response is yes on line 3014, attach your company's RUS annual report and all required documentation</p>	<p>Name of Attached Document Listing Required Information</p>	<p><input checked="" type="checkbox"/> (Yes/No)</p>
<p>(3018) 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 :</p>		<p><input type="checkbox"/></p>
<p>(3019) Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications</p>		<p><input checked="" type="checkbox"/></p>
<p>(3020) PDF of Balance Sheet, Income Statement and Statement of Cash Flows</p>		<p><input checked="" type="checkbox"/></p>
<p>(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:</p>		<p><input type="checkbox"/></p>
<p>(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,</p>		<p><input type="checkbox"/></p>
<p>(3023) Underlying information subjected to a review by an independent certified public accountant</p>		<p><input type="checkbox"/></p>
<p>(3024) Underlying information subjected to an officer certification.</p>		<p><input type="checkbox"/></p>
<p>(3025) PDF of Balance Sheet, Income Statement and Statement of Cash Flows</p>		<p><input type="checkbox"/></p>
<p>(3026) Attach the worksheet listing required information</p>	<p>Name of Attached Document Listing Required Information</p>	<p>47221ID3026</p>

Certification - Reporting Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<010> Study Area Code	472221
<015> Study Area Name	FARMERS MUTUAL TEL
<020> Program Year	2014
<030> Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035> Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039> Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.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:	
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:
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
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<010>	Study Area Code	472221
<015>	Study Area Name	FARMERS MUTUAL TEL
<020>	Program Year	2014
<030>	Contact Name - Person USAC should contact regarding this data	Eric Votaw
<035>	Contact Telephone Number - Number of person identified in data line <030>	209-955-6116
<039>	Contact Email Address - Email Address of person identified in data line <030>	eric.votaw@mossadams.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	
<p>I certify that (Name of Agent) <u>Eric N Votaw</u> 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.</p>	
Name of Authorized Agent:	Eric N Votaw
Name of Reporting Carrier:	FARMERS MUTUAL TEL
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 10/08/2013
Printed name of Authorized Officer:	Daniel Greig
Title or position of Authorized Officer:	General Manager
Telephone number of Authorized Officer:	208 452 2000
Study Area Code of Reporting Carrier:	472221 Filing Due Date for this form: 10/15/2013
<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	
<p>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.</p>	
Name of Reporting Carrier:	FARMERS MUTUAL TEL
Name of Authorized Agent or Employee of Agent:	Moss Adams LLP
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 10/08/2013
Printed name of Authorized Agent or Employee of Agent:	Eric N. Votaw
Title or position of Authorized Agent or Employee of Agent:	Senior Manager
Telephone number of Authorized Agent or Employee of Agent:	209-955-6116
Study Area Code of Reporting Carrier:	472221 Filing Due Date for this form: 10/15/2013
<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

Response Line 510
Farmers Mutual Telephone Company
Study Area 472221

Pursuant to 47 C.F.R. § 54.313(a)(5) and or 47 C.F.R. § 54.422(b)(3) Farmers Mutual Telephone Company (“FMTC”) is in compliance with the Idaho Public Utilities Commission’s Telephone Customer Relations Rules, IDAPA 31.41.01 as well as the applicable FCC Service Quality Standards and Consumer Protection Rules. FMTC provides CPNI training to all of its new employees and in addition trains all of its existing employees on an annual basis. SMTA also conducts subscriber outreach regarding CPNI by periodically placing CPNI explanation messages into subscriber’s bills. In addition FMTC 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.

Response Line 610
Farmers Mutual Telephone Company
Study Area 472221

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) Farmers Mutual Telephone Company ("FMTC") meets the requirements to remain functional in emergency situations and has the following capabilities; Back-up power is provided to FMTC's central by use of a fixed generator and batteries that provide it with 8 hours of emergency power. In addition, FMTC's field electronics have 8 hours of back-up power by use of generators and batteries. FMTC also has SONET technology deployed in its core fiber optic network that is self-healing and will automatically reroute traffic should a fiber cut occur. FMTC also has diverse routing to adjacent telecommunication providers and telephone exchanges that provide FMTC the ability to reroute traffic in emergency situations. Lastly, FMTC is capable of managing traffic spikes resulting from emergency situations.

III. LIFELINE

A. GENERAL

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

B. RATES

1. Baseline 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:

Residential Access Lines	Monthly Credit or Discount
Federal Baseline Lifeline Reduction Federally funded reduction in local rate	Subscriber line charge \$9.25
State Matching Local Rate Reduction	\$2.50

These reductions or credits are from the normal residential one-party service subscribed to by the consumer. The Federal baseline lifeline reduction shall be used to waive the consumer's Federal End-User Common Line Charge or Subscriber Line Charge.

In addition to the above Federal Service Discount, the State may provide an additional discount for eligible consumers, pursuant to Idaho code Title 56, Chapter 9. The State Discount is only provided if it is funded through the States Universal Service Fund or a surcharge upon customers.

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

IV. LIFELINE, CONTINUED

B. RATES, CONTINUED

1. The following services are included:
 - a. Single party, voice grade access to the Public Switched Network
 - b. Access to emergency services
 - c. Access to operator services
 - d. Access to interexchange services, unless toll blocking is chosen
 - e. Access to directory assistance
 - f. Toll Blocking

C. ELIGIBILITY REQUIREMENTS

1. An applicant must meet all of the following criteria in order to qualify for Lifeline Service:

- a. The consumer must meet eligibility requirements established in Idaho Code, Title 56, Chapter 9.
- b. To qualify for Lifeline Service, the consumer must be a head of household and whose gross income is at or below one hundred and thirty-five percent (135%) of the Federal Poverty Limit.
- 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 principle 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.

IV. LIFELINE, CONTINUED

C. ELIGIBILITY REQUIREMENTS, CONTINUED

2. Lifeline will not be furnished on a Foreign Exchange (FX) basis.
3. Lifeline service shall not be disconnected for non-payment of toll charges.
4. If the consumer chooses "toll blocking, the company will not charge a service deposit. No toll blocking charges will be assessed to Lifeline subscribers.

D. FUNDING

The total cost of providing the State Lifeline program shall be funded from a monthly surcharge to each business and residential access line.

Residences receiving Lifeline assistance are exempt from the uniform monthly surcharge.

E. REGULATIONS

1. The Telephone Assistance Program credit will begin with the next billing cycle following the date the Company receives notification of customer qualification.
2. 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.

III. LIFELINE, CONTINUED

E.REGULATIONS, CONTINUED

3. The lifeline credit will be subject to the following restrictions:
 - a. Applicant must be head of household or person whose name the property or rental agreement resides.
 - b. Lifeline credit will only be provided to the applicant's principle residence.
 - c. The credit will only be applicable for one single residential access line.
4. 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.

V. IDAHO TELECOMMUNICATIONS SERVICE ASSISTANCE PROGRAM (ITSAP) SURCHARGE

A. RATES

The monthly surcharge is set at the amount ordered by the Idaho Public Utilities Commission.

B.CONDITIONS

- 1.A surcharge assessed on all access lines to contribute toward funding for the Idaho Telecommunications Service Assistance Program (ITSAP) or the State-matching portion of the Lifeline program.
2. The surcharge rate will remain in effect until otherwise modified canceled, or changed by the Commission.



INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Farmers Mutual Telephone Company
Fruitland, Idaho

Report on the Financial Statements

We have audited the accompanying balance sheets of Farmers Mutual Telephone Company (an Idaho corporation) as of December 31, 2012 and 2011, and the related statements of operations, members' equity and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment; including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant estimates made by management as well as evaluating the overall financial statement presentation.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Farmers Mutual Telephone Company as of December 31, 2012 and 2011, and the results of its operations and its cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Kiesling Associates LLP

Madison, Wisconsin
April 16, 2013

**FARMERS MUTUAL TELEPHONE COMPANY
FRUITLAND, IDAHO**

**BALANCE SHEETS
December 31, 2012 and 2011**

	2012	2011
<u>ASSETS</u>		
CURRENT ASSETS		
Cash and cash equivalents	\$	
Accounts receivable:		
Due from customers		
Interexchange carriers		
Other		
Current portion of notes receivable		
Materials and supplies at average cost		
Inventories at average cost		
Prepaid income taxes		
Other prepayments		
 OTHER NONCURRENT ASSETS		
Investments		
Notes receivable, less current portion		
Deferred income taxes		
Deferred charges		
Intangibles		
 PROPERTY, PLANT AND EQUIPMENT		
Telephone plant in service		
Wireless plant in service		
Other property		
Less accumulated depreciation		
Plant under construction		
 TOTAL ASSETS	\$	

Redacted - For Public Inspection

The accompanying notes are an integral part of these financial statements.

**FARMERS MUTUAL TELEPHONE COMPANY
FRUITLAND, IDAHO**

**BALANCE SHEETS
December 31, 2012 and 2011**

	2012	2011
<u>LIABILITIES AND MEMBERS' EQUITY</u>		
CURRENT LIABILITIES		
Current portion of long-term debt	\$	
Accounts payable:		
Interexchange carriers		
Other		
Advance billing		
Accrued taxes		
Other current liabilities		
LONG-TERM DEBT, LESS CURRENT PORTION		
OTHER NONCURRENT LIABILITIES AND DEFERRED CREDITS		
Deferred income taxes		
Deferred investment tax credit		
MEMBERS' EQUITY		
Memberships		
Patronage capital assignable		
Unallocated margins		
Patronage capital assigned		
Unclaimed capital credit refunds		
Accumulated patronage deficit		
TOTAL LIABILITIES AND MEMBERS' EQUITY	\$	



Redacted - For Public Inspection

The accompanying notes are an integral part of these financial statements.

FARMERS MUTUAL TELEPHONE COMPANY
FRUITLAND, IDAHO

STATEMENTS OF OPERATIONS
Years ended December 31, 2012 and 2011

	2012	2011
OPERATING REVENUES		
Local network services	\$	
Network access services		
Long distance services		
Internet services		
Wireless services		
Other nonregulated services		
Miscellaneous		
OPERATING EXPENSES		
Cost of long distance services		
Cost of internet services		
Cost of wireless services		
Cost of other nonregulated services		
Plant specific operations		
Plant nonspecific operations		
Depreciation		
Customer operations		
Corporate operations		
General taxes		
OPERATING MARGINS		
OTHER INCOME (EXPENSE)		
Interest and dividend income		
Interest during construction		
Interest expense		
Gain on sale of investment		
MARGINS BEFORE INCOME TAXES		
INCOME TAXES		
NET MARGINS		

Redacted - For Public Inspection

The accompanying notes are an integral part of these financial statements.

**FARMERS MUTUAL TELEPHONE COMPANY
FRUITLAND, IDAHO**

**STATEMENTS OF MEMBERS' EQUITY
Years ended December 31, 2012 and 2011**

	<u>Memberships</u>	<u>Capital Credits Assignable</u>	<u>Capital Credits Assigned</u>	<u>Unclaimed Capital Credit Refunds</u>
Balance at December 31, 2010	\$	[REDACTED]		
Net margins				
Unrealized loss on securities -				
Net memberships issued				
Refunds of capital credits				
Unclaimed capital credit refunds				
Allocation of margins				
Balance at December 31, 2011				
Net margins				
Net memberships issued				
Refunds of capital credits				
Unclaimed capital credit refunds				
Allocation of margins				
Balance at December 31, 2012	\$			

Redacted - For Public Inspection

The accompanying notes are an integral part of these financial statements.

FARMERS MUTUAL TELEPHONE COMPANY
FRUITLAND, IDAHO

STATEMENTS OF CASH FLOWS
Years ended December 31, 2012 and 2011

	2012	2011
CASH FLOWS FROM OPERATING ACTIVITIES		
Net margins	\$	
Adjustments to reconcile net margins to net cash provided by operating activities:		
Depreciation		
Deferred income taxes		
Deferral/amortization of investment tax credits		
Patronage in business conducted with cooperatives		
Patronage distributions received from business conducted with cooperatives		
Interest during construction		
Changes in assets and liabilities:		
(Increase) Decrease in:		
Accounts receivable		
Materials and supplies and inventory		
Prepayments		
Deferred charges		
Increase (Decrease) in:		
Accounts payable		
Accrued taxes		
Advance billings		
Other current liabilities		
Net cash provided by operating activities		
CASH FLOWS FROM INVESTING ACTIVITIES		
Capital expenditures		
Purchase of intangibles		
Issuance of notes receivable		
Collections of notes receivable		
Cost of removing plant, net of salvage		
Net cash used in investing activities		
CASH FLOWS FROM FINANCING ACTIVITIES		
Proceeds from long-term borrowing		
Repayment of long-term debt		
Patronage capital retired		
Memberships, net		
Net cash provided by financing activities		
Net Increase in Cash and Cash Equivalents		
Cash and Cash Equivalents at Beginning of Year		
Cash and Cash Equivalents at End of Year	\$	

The accompanying notes are an integral part of these financial statements.

State of Idaho)
) ss
County of Payette)

CERTIFICATION BY ELIGIBLE TELECOMMUNICATIONS CARRIER
OF COMPLIANCE WITH SERVICE QUALITY AND CUSTOMER
PROTECTION, ABILITY TO REMAIN FUNCTIONAL IN EMERGENCIES,
AND USE OF FEDERAL HIGH-COST SUPPORT.

AFFIDAVIT OF BUSINESS OR CORPORATE OFFICER

The Idaho Public Utilities Commission Order No. 29841 requires that Eligible Telecommunications Carriers certify that it is compliant with applicable service quality standards and consumer protection rules; and ETCs must demonstrate the ability to remain functional in emergencies. In addition, the Commission must file an annual certification with the USAC and the FCC that all federal high-cost support provided to ETCs within the State of Idaho will be used only for the provision, maintenance, and upgrading of facilities and services for which the support is intended. Accordingly, the undersigned states and verifies under oath the following:

1. I am an officer of Farmers Mutual Telephone Company an eligible telecommunications carrier for receiving federal universal service support under section 214(e) of the Telecommunications Act of 1996 in the state of Idaho.
2. I am familiar with the Company's day-to-day operations in the state of Idaho and with the State's service quality standards and consumer protection rules as set forth in Commission Order No. 29841.
3. Farmers Mutual Telephone Company is complying with applicable service quality standards and consumer protection rules of the Federal Communications Commission and the Idaho Public Utilities Commission.
4. I certify to the Commission that the Company is able to remain functional in emergencies as set forth in Commission Order No. 29841 and in 47 C.F.R. § 54.201(a)(2).
5. I also certify that all federal universal service support funds received by Farmers Mutual Telephone Company during the current calendar year will be used in a manner consistent with section 254(e); that is, for the provision, maintenance, and upgrading of facilities and services for which the support is intended. The company will continue to comply for the period of January 1, 2014, through December 31, 2014, to be eligible for federal universal service fund support.
6. This verification and affidavit is provided to be the Idaho Public Utilities Commission to enable the IPUC to certify to the FCC that federal universal service support received by the eligible carriers in the state will be used in a manner consistent with Section 254(e) of the Telecommunications Act.

Danilo Loig General Manager
Name/Title

10/8/2013
Date

SUBSCRIBED AND SWORN to before me this 8th day of August October, 2013

Jackie Jerman
Notary Public for Idaho, residing at Fruitland, ID
My Commission expires 10-25-2016

JACKIE JERMAN
NOTARY PUBLIC
STATE OF IDAHO