



Your business
is our business.

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June 17, 2013

VIA ELECTRONIC FILING

Secretary
South Dakota Public Utilities Commission
Capitol Building, 1st Floor
500 E. Capitol Ave.
Pierre, SD 57501-5070

On behalf of Knology Community Telephone Company, Inc., please find attached:

Certification of Officer for Rate of Return Carrier Eligibility for CAF/ICC Recovery
Certification of Officer as to the Accuracy of the CAF/ICC Data Reported
Certification of an Officer to Authorize an Agent to File Data on Behalf of Reporting Carrier
Certification of Officer for Rate of Return Carrier Not Seeking Duplicative Recovery
Certification of an Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier
Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Study Area Exchange Level Data for Local Rate Floor
CAF ICC Support Page
Access Recovery Charge Output Report
Interstate Test Period Lines Report

This filing is being made in compliance with the Federal Communications Commission's ("FCC") 47 C.F.R 54.304(d)(1).

Knology Community Telephone Company, Inc. is requesting confidential treatment of the CAF ICC Support Page, Access Recovery Charge Output Report, and Interstate Test Period Lines Report.

Should you have any questions, please do not hesitate to call me at 301-459-7590.

Respectfully submitted,

John Kuykendall
Vice President

Enclosures

Headquarters: 7852 Walker Drive, Suite 200
Greenbelt, MD 20770
phone: 301-459-7590, fax: 301-577-5575

Eagandale Corporate Center, Suite 310
1380 Corporate Center Curve, Eagan, MN 55121
phone: 651-452-2660, fax: 651-452-1909

Echelon Building II, Suite 200
9430 Research Blvd., Austin, TX 78759
phone: 512-338-0473, fax: 512-346-0822

547 South Oakview Lane
Bountiful, UT 84010
phone: 801-294-4576, fax: 801-294-5124

TO BE COMPLETED BY THE REPORTING CARRIER,

Certification of Officer as to the Accuracy of the CAF ICC Data Reported

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual data reported; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier				Knology Community Telephone Company, Inc.	
Signature of Authorized Officer			Date		
Printed name of Authorized Officer			Bruce Schoonover		
Title or position of Authorized Officer				Vice-President, Regulatory Compliance	
Telephone number of Authorized Officer: (706) 645-8116, ext.					
Study Area Code of Reporting Carrier		391652	Filing Due Date for this form (mm/dd/yyyy)	6/17/2013	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

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

Certification of Officer to Authorize an Agent to File Data Reported on Behalf of Reporting Carrier

I certify that (Name of Agent) National Exchange Carrier Association, Inc. (NECA) is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the data provided to the Authorized Agent; and, to the best of my knowledge, the actual data provided to the Authorized Agent are accurate.

Name of Authorized Agent National Exchange Carrier Association, Inc. (NECA)

Name of Reporting Carrier Knology Community Telephone, Inc.

Signature of Authorized Officer

Date 5/22/12

Printed name of Authorized Officer Bruce Schoonover

Title or position of Authorized Officer Vice-President, Regulatory Compliance

Telephone number of Authorized Officer: (706) 645 - 8116 ext.

Study Area Code of Reporting Carrier

391652

Filing Due Date for this form
(mm/dd/yyyy)

6/17/2013

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Eligibility for CAF/ICC Recovery

I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, the reporting carrier on this form certifies that it has complied with Eligible Recovery §51.917(d) and Access Recovery Charge §51.917(e) and is eligible to receive the CAF ICC support requested pursuant to §51.917(f).

Name of Reporting Carrier				Knology Community Telephone, Inc.	
Signature of authorized officer			Date		5/22/13
Printed name of authorized officer			Bruce Schoonover		
Title or position of authorized officer			Vice-President, Regulatory Compliance		
Telephone number of authorized officer: (706) 645-8116 ext.					
Study Area Code of Reporting Carrier		391652	Filing Due Date for this form (mm/dd/yyyy)	6/17/2013	
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.					

TO BE COMPLETED BY AN OFFICER OF THE REPORTING CARRIER

Certification of Officer for Rate-of-Return Carrier Not Seeking Duplicative Recovery

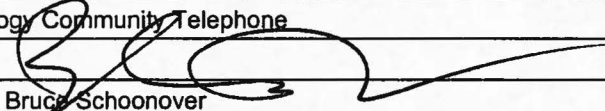
I certify that I am an officer of the reporting carrier and that, to the best of my knowledge, this reporting carrier is not seeking duplicative recovery in the state jurisdiction for any Eligible Recovery subject to the recovery mechanism as per 51.917(d)(vii).

Name of Reporting Carrier				Knology Community Telephone, Inc.	
Signature of authorized officer			Date	5/22/13	
Printed name of authorized officer				Bruce Schoonover	
Title or position of authorized officer				Vice-President, Regulatory Compliance	
Telephone number of authorized officer: (708) 645-8116 , ext.					
Study Area Code of Reporting Carrier		391652	Filing Due Date for this form (mm/dd/yyyy)	6/17/2013	
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.					

Rate Floor Template

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier				Knology Community Telephone					
Signature of authorized officer						Date		6/13/2013	
Printed name of authorized officer				Bruce Schoonover					
Title or position of authorized officer				Vice President - Regulatory Compliance					
Telephone number of authorized officer: (706) 645-8116 ext.									
Study Area Code of Reporting Carrier		391652		Filing Due Date for this form (mm/dd/yyyy)		7/1/2013			
<input checked="" type="checkbox"/>	I certify that our company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2013 and has no monthly residential rates (plus charges as defined) less than \$14.								

Rate Floor Template

Certification of Officer as to the Accuracy of the Data Reported for the Rate Floor Data

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the actual rate floor data reported ; and, to the best of my knowledge, the information reported on this form is accurate.

Name of Reporting Carrier				Knology Community Telephone	
Signature of authorized officer			Date		
Printed name of authorized officer			Bruce Schoonover		
Title or position of authorized officer				Vice President - Regulatory Compliance	
Telephone number of authorized officer:				(706) 645-8116 ext	
Study Area Code of Reporting Carrier		391652	Filing Due Date for this form (mm/dd/yyyy)	7/1/2013	

Rate Floor Data

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

<p>Certification of Officer to Authorize an Agent to File Rate Floor Data on Behalf of Reporting Carrier</p> <p>I certify that <u>National Exchange Carrier Association (NECA)</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 actual rate floor data provided to the authorized agent; and, to the best of my knowledge, the actual rate floor data provided to the authorized agent is accurate.</p> <p>I certify that I am authorized to submit the information reported on this form on behalf of the reporting carrier; that I have provided the information 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 Authorized Agent <u>National Exchange Carrier Association (NECA)</u>			
Name of Reporting Carrier <u>Knology Community Telephone</u>			
Signature of authorized officer 			Date <u>6/11/2013</u>
Printed name of authorized officer <u>Bruce Schoonover</u>			
Title or position of authorized officer <u>Vice President - Regulatory Compliance</u>			
Telephone number of authorized officer: <u>(706) 645-8116</u> ext.			
Study Area Code of Reporting Carrier	<u>391652</u>	Filing Due Date for this form (mm/dd/yyyy)	<u>7/1/2013</u>



Local Rate Floor Data Collection

Logged in User: Patricia Hoyt



Study Area: KNOLOGY COMM TEL (ID: 391652)

[Study Area List](#)

Study Area - Exchange Level Data for Local Rate Floor

Data Entry History

[Instructions](#)

[Agent HC RF Cert Form](#)

[Carrier HC RF Cert Form \(No Rates Less Than \\$14\)](#)

[Carrier HC RF Cert Form \(With Rates Less Than \\$14\)](#)

[Print Submitted Data in PDF format](#)

[Print Submitted Data in Excel format](#)

Data Collection Period:

Name:

[First Middle Last]

Phone: [999-999-9999]

Email:

Enter all exchange/rate zone level rates and their corresponding lines below, where the sum of columns C-F is less than \$14.
 This data will be used to calculate the impact of the local rate floor on your company's High Cost Support.

(A) Exchange Name/Zone Name	(B) Class Of Service	(C) Residential Local Service Charge	(D) State Subscriber Line Charge	(E) State Universal Service Fee	(F) Mandatory Extended Area Service Charge	(G) Rate Total Subject to Floor (Sum of C-F)	(H) Residential Lines excluding Lifelines	
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="button" value="+"/>

[To enter additional rows of data, click on the + button.]

If the data form is left blank, select one of the boxes below:

- Check here if your company receives or is projected to receive High Cost Loop Support or High Cost Model Support in 2013, but has no monthly residential rates (plus charges listed above) less than \$14 (**certification required**)
- Check here if your company is not projected to receive High Cost Loop Support or High Cost Model Support in 2013
- Check here if you plan to submit local rate floor data directly to USAC

[Study Area List](#) [Submit Response](#)



2013 CAF ICC Data Collection Update

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Logged in User: Patricia Hoyt



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Study Area: KNOLOGY COMM TEL (ID: 391652)
Holding Company: KNOLOGY, INC. (ID: 200000314)

[View Printer-friendly report]

CONNECT AMERICA FUND

Data to be Provided to USAC/FCC for CAF ICC Purposes - Will Be Provided Concurrent with 2013 Annual Tariff Filing

Settlement Type: Cost

7/02/13-6/30/14 Test Period

Rate-of-Return (ROR) Carrier Revenue Requirement		
1	2011 Interstate Switched Access Revenue Requirement	\$1,079,983
2	FY 2011 Intrastate Terminating Switched Access Revenues	\$376,560
3	FY 2011 Net Reciprocal Compensation Revenues	\$7,128
4	2011 ROR Carrier Base Period Revenue (Line 1 + Line 2 + Line 3)	\$1,463,671
5	ROR Carrier Baseline Adjustment Factor (0.95 * 0.95)	0.9025
6	ROR Carrier Revenue Requirement (Line 4 * Line 5)	\$1,320,963
7	Pool Administration Expenses	\$28,583
8	Total ROR Carrier Revenue Requirement (Line 6 + Line 7)	\$1,349,546
Revenues from Reformed Inter-carrier Compensation (ICC) Rates		
9	Interstate Switched Access Revenues	\$422,879
10	Interstate Allocated Switched Access Revenues#	\$605,465
11	Transitional Intrastate Access Service Revenues	\$140,811
12	Net Transitional Reciprocal Compensation Revenues	\$0
13	Total ICC Revenue (Line 10 + Line 11 + Line 12)	\$746,276
Eligible Recovery		
14	TRS Increment	\$1,104
15	Regulatory Fees Increment	\$32
16	NANPA Increment	\$0
17	Interstate Local Switching Support for Price Cap Affiliates	\$0
18	Eligible Recovery (Line 8 - Line 13) + (Line 14 + Line 15 + Line 16) - (Line 17)	\$604,406
Revenues from Access Recovery Charges (ARC)		
19	Residential ARC Revenues	\$29,124
20	Single Line Business ARC Revenues	\$2,868
21	Multi-Line Business ARC Revenues	\$14,976
22	Total ARC Revenues (Line 19 + Line 20 + Line 21)	\$46,968
Connect America Fund (CAF) ICC Support**		
23	Connect America Fund (CAF) ICC Support (Line 18 - Line 22)	\$557,438

NOTES:

#Per FCC Designation Order, calculated as (Sum of Line 9 for all TS pool participants) * (Line 1/ Sum of Line 1 for all TS pool participants)

**NECA estimate provided for informational purposes only - actual to be calculated by USAC.



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2013 CAF ICC Data Collection Update

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Logged in User: Steven Meltzer

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Study Area: KNOLOGY COMM TEL (ID: 391652)
 Holding Company: KNOLOGY, INC. (ID: 20000314)

Access Recovery Charge - Output

Recalculate ARC Rates & CAF Support revenues

Study Area ID	Exchange/Zone Name	Residential Lines excluding Lifelines	Residential ARC	Residential ARC Revenue	SLB ARC	SLB ARC Revenue	MLB ARC	M F
220324	Valley	1195	1.00	14340.00				
220324	Study Area Summary	1195		14340.00	1.00	1284.00	2.00	
250295	Ashford	1170	1.00	14040.00				
250295	Cottonwood	648	1.00	7776.00				
250295	Gordon	419	1.00	5028.00				
250295	Study Area Summary	2237		26844.00	1.00	900.00	2.00	
391652	Alsen	107	1.00	1284.00				
391652	Bersford	159	1.00	1908.00				
391652	Flyger	96	1.00	1152.00				
391652	Hurley	195	1.00	2340.00				
391652	Irene	280	1.00	3360.00				
391652	Lennox	665	1.00	7980.00				
391652	Parker	374	1.00	4488.00				
391652	Wakonda	351	1.00	4212.00				
391652	Worthing	200	1.00	2400.00				
391652	Study Area Summary	2427		29124.00	1.00	2868.00	2.00	



2013 CAF ICC Data Collection Update

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Logged in User: Patricia Hoyt



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Study Area: KNOLOGY COMM TEL (ID: 391652)
Holding Company: KNOLOGY, INC. (ID: 200000314)

Test Period 2013/2014

Study Area Lines for Test Period 2013/2014 - (July 1, 2013 - June 30, 2014)

Study Area ID	Test Year 2013-14 Residential Lines Excluding Life Lines	Test Year 2013-14 Single Line Business Lines	Test Year 2013-14 Multi-Line Business Lines
391652	<input type="text" value="2427"/>	<input type="text" value="239"/>	<input type="text" value="624"/>

[Records response entered/updated on the above part of the screen]