



200 N. Ozark · Girard, KS 66743 · 620.724.8235 · fax: 620.724.4099

April 6, 2022

Manager of the Data Center Missouri Public Service Commission 200 Madison St., Suite 100 Jefferson City, MO 65102-0360

MO PCS:

Please find enclosed completed 12/31/21 Annual Reports for Craw-Kan Telephone Cooperative, Inc. If you have any questions, please call me at 620-724-8235 or email me at <a href="mailto:eric.schiefelbein@crawkan.net">eric.schiefelbein@crawkan.net</a>.

Sincerely,

Craw-Kan Telephone Cooperative, Inc.

Eric Schiefelbein

Craw-Kan Telephone Cooperative, Inc.

**Accounting Supervisor** 

| Craw-Kan | Telephone | Cooperative, | Inc. |
|----------|-----------|--------------|------|
| 0.0      | . 0.000   |              |      |

### **Company Name**

(Provide the full name of the company as certificated or registered with the Missouri Public Service Commission, including any Commission approved d/b/a, if applicable. Please do not abbreviate.)

# TELECOMMUNICATIONS COMPANY OR IVOIP PROVIDER **ANNUAL REPORT** TO THE MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Vear of

|                  | January 1 - December 31, 2021   |
|------------------|---|
| This filing is   | required pursuant to Commission Rule 20 CSR 4240-28.012 and/or Section 392.210 RSMO.  |
| Please sele      | ect how the company is certificated and/or registered with the Commission (check  |
| ~                | Incumbent Local Telecommunications Company (ILEC)   |
|                  | Competitive Local Exchange Telecommunications Company (CLEC)  |
| V                | Interexchange or Local Non-Switched Telecommunications Company (IXC)  |
|                  | Interconnected Voice over Internet Protocol Service Provider (IVoIP)  |
| the Comm         | in one certificate or registration is held by the company you must file an annual report in ission's Electronic Filing and Information System (EFIS) for each certificate or n. In such situations, we anticipate the annual reports to be identical; however please following: |
|                  | The various annual reports filed in EFIS are identical.   |
|                  | The various annual reports filed in EFIS are different.   |
|                  | Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.)  |
| Please cho       | oose one of the following filing options to indicate the security level of the filing:  |
| V                | Public submission (NOT Confidential)  |
|                  | Non-Public submission (Confidential) (See instructions for special requirements.) For this filing to be considered Confidential, additional submission of materials is required, pursuant to Commission Rule 20 CSR 4240-2.135.   |
|                  |   |
| Excel Issue Date | : 02/14/2022 For use when filing under seal.  |

| 200 N Ozark  |   |  |                              | 24-8235           |             |
|--|---|--|------------------------------|-------------------|-------------|
|  | y Street Address  |  | Telep                        | hone Number       |             |
| PO Box 100   |   |  |                              |                   |             |
| Circuid  | s (if different from stre   |  |                              |                   |             |
| Girard<br>City   | State   | 66762<br>Zip   |                              |                   |             |
| City   | State   | Zip  |                              |                   |             |
| The company's contact inf  | ormation in EFIS has  | s been reviewed  | and updated as applicable    | le).              |             |
| ✓ Yes  | ☐ No  |  |                              |                   |             |
|  | 36. W.  |  |                              |                   |             |
| Annual Report Contact Inf  |   |  |                              |                   |             |
| liet the contact information   |   | ng the form, wheth   | ner an employee or a third-p | party preparer. T | his may dif |
|  | 7.  | The state of the s |                              |                   |             |
| from the address in Item No.   | . 1.  |  |                              |                   |             |
|  | . 1.  |  |                              |                   |             |
| from the address in Item No.   | . 1.  |  |                              |                   |             |
| from the address in Item No<br>Eric Schiefelbien   |   |  |                              |                   |             |
| from the address in Item No<br>Eric Schiefelbien<br>200 N Ozark  | Name  |  |                              |                   |             |
| from the address in Item No<br>Eric Schiefelbien<br>200 N Ozark  |   |  |                              |                   |             |
| from the address in Item No<br>Eric Schiefelbien  200 N Ozark  Stre PO Box 100   | Name<br>eet Address   |  |                              |                   |             |
| from the address in Item No<br>Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail   | Name eet Address ing Address  | 66762  |                              |                   |             |
| from the address in Item No. Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  | Name eet Address ing Address KS   | 66762<br>Zin   |                              |                   |             |
| from the address in Item No. Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City  | Name eet Address ing Address KS State   | 66762<br>Zip   |                              |                   |             |
| from the address in Item No. Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82                           | Name eet Address ing Address KS State   | ended to the control of the control  |                              |                   |             |
| from the address in Item No. Eric Schiefelbien  200 N Ozark  PO Box 100  Mail  Girard  City (620) 724-82  Telepi                       | Name eet Address ing Address KS State   | Zip  |                              |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name eet Address ing Address KS State 35 hone Number eein@craw-kan              | Zip  |                              |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name eet Address ing Address KS State   | Zip  |                              |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name eet Address ing Address KS State 35 hone Number eein@craw-kan              | Zip  |                              |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name eet Address ing Address KS State 35 hone Number eein@craw-kan              | Zip  |                              |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name eet Address ing Address KS State 35 hone Number eein@craw-kan              | Zip  |                              |                   |             |
| from the address in Item No. Eric Schiefelbien  200 N Ozark  PO Box 100  Mail  Girard  City  (620) 724-82  Telept  eric.schiefelb  Em. | Name  eet Address ing Address KS State 35 hone Number bein@craw-kan ail Address | .net   | the end of the year.         |                   |             |
| from the address in Item No Eric Schiefelbien  200 N Ozark  Stre PO Box 100  Mail Girard  City (620) 724-82  Telepi eric.schiefelb     | Name  eet Address ing Address KS State 35 hone Number bein@craw-kan ail Address | .net   |                              | me                |             |

# **Board of Directors**

Mary Smith

John Lehman

Barry Bedene

Randy Vogts

Terry Kunstel

Roger Doue

Wilda Pentola

**Sharon Starr** 

John Kovacic

President

Vice-President

Secretary/Treasurer

| Annual   | Report | of |
|----------|--------|----|
| Alliluai | Keboit | OI |

## Craw-Kan Telephone Cooperative, Inc.

for the calendar year of January 1 - December 31, 2021

#### 5. Please provide the following revenue information:

| Row | RETAIL END USER REVENUES  | ** | MO Intrastate<br>(Column A) | ** | ** | Total Company<br>(Column B) | ** |
|-----|---|----|-----------------------------|----|----|-----------------------------|----|
| 1.  | Local Service (Basic local telecommunications service, IVoIP service and features associated with these services)   |    | \$ 525,868.66               |    |    | \$ 2,980,941.59             |    |
| 2.  | Interexchange Service (Message toll services, 800 services, interexchange operator services).   |    | \$ 97,837.61                |    |    |                             |    |
| 3.  | Non-Switched Services (Dedicated non-switched private line services typically used by business customers. Do not include special access or private line services provided to other telecommunications or IVoIP service providers which are reported in Row 7).  |    |                             |    |    |                             |    |
| 4.  | Bundled Voice Service (If telecommunications or IVoIP service is bundled with non-regulated services then a company may apply either of two methods in reporting bundled revenue in Column A. Method 1: Report bundled revenue in Column A based on the unbundled rate for telecommunications or IVoIP service; or Method 2: Report all bundled revenue in Column A.) |    |                             |    |    | \$ 19,009,444.16            |    |
| 5.  | Retail Uncollectibles. (Amount is typically a negative number.)   |    |                             |    |    |                             |    |
| 6.  | RETAIL END-USER TOTAL (Row 1+2+3+4+5) Revenue in Column A will be provided to Missouri USF Administrator for assessment purposes.)  |    | \$ 623,706.27               |    |    | \$ 21,990,385.75            |    |
|     | WHOLESALE CARRIER'S CARRIER AND UNIVERSAL SERVICE FUN   | RE | VENUES                      |    |    |                             |    |
| 7.  | Revenue from services provided for resale as telecommunications or IVoIP services from another telecommunications or IVoIP service provider. This row typically includes revenue associated with switched access service, special access service, billing and collection service. NECA settlements, if any, should be reported solely in Column B.                    |    |                             |    |    | \$ 8,184,207.17             |    |
| 8.  | Miscellaneous Carrier's Carrier Revenue (Remaining Carrier's Carrier Revenue provided in FCC Form 499-A, Block 3 that is not reported in Row 7).  |    |                             |    |    | \$ 687,107.93               |    |
| 9.  | Wholesale Uncollectibles. (Amount is typically a negative number.)  |    |                             |    |    | (\$ 1,179.65)               |    |
| 10. | Federal USF Revenue (List federal USF revenue in Column B; however, any Connect America Fund Intercarrier Compensation funding used to replace revenue caused by mandatory intrastate switched access rate reductions should be reported in Column A.)  |    |                             |    |    | \$ 5,653,299.12             |    |
| 11  | State USF Revenue   |    |                             |    |    | \$ 1,803,637.35             |    |
| 12  | TOTAL REVENUES (Row 6+7+8+9+10+11) The Total Revenue in Column A should match the Total Gross Intrastate Operating Revenue reported on the Missouri PSC's Statement of Revenue form.  |    | \$ 623,706.27               |    |    | \$ 38,317,457.67            |    |

#### Revenue reporting clarifications:

Total Company Revenue (Column B) = Missouri Intrastate revenue in Column A + Interstate revenues + International revenues.

IVoIP revenue: If unable to distinguish Missouri Jurisdictional revenue in Column A then a safe harbor percentage can be applied to total revenue that corresponds to the FCC's safe harbor percentage.

Retail non-switched private line service revenue: All of a customer's non-switched private line service revenue can be reported in Column B if 10% of more of the customer's private line network traffic is considered interstate traffic.

For use when filing under seal.

#### 6. Line Quantities for Basic Local Telecommunications &/or IVoIP Services

|                 | 100            | CONTRACT L  | ine ( | Quanti | ties     | 1300 |
|-----------------|----------------|-------------|-------|--------|----------|------|
| Exchange        | **             | Residential | **    | **     | Business | **   |
| Amsterdam       | 9.5            | 214         |       | 245    | 47       |      |
| East Pleasanton |                | 16          |       | 263    | 2        |      |
| Purcell         |                | 519         |       |        | 36       |      |
| East Arcadia    |                | 23          |       |        | 1        |      |
| Asbury          |                | 485         |       |        | 40       |      |
| Hume            | 93             | 224         |       |        | 37       | 197  |
| East Mulberry   |                | 14          |       |        | 1        | 199  |
| Foster          |                | 132         |       |        | 11       |      |
| Amoret          |                | 112         |       |        | 25       |      |
|                 | and the second |             |       |        |          |      |
|                 |                |             | 130   |        |          |      |
|                 | The same       |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 | (94)           | No.         |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 |                |             |       |        |          |      |
|                 | 33             |             | 100   |        |          | 2000 |
|                 | -              |             |       |        |          |      |
|                 | 100            |             |       |        |          |      |
|                 | 65             |             |       |        |          |      |
|                 |                |             | 221   |        |          |      |
|                 |                |             |       |        |          |      |
| Totals:         |                | 1739        |       |        | 200      |      |

#### About reporting line quantities:

- 1. Report line quantities for basic local telecommunications service and/or IVoIP service as those terms are defined in 386.020(4) and (23).
- 2. Lines include analog and digital. For DS-1 or higher band-width facilities a voice grade equivalency must be used. For channelized service report the number of channels subscribed to by the customer. For non-channelized facilities, filers are instructed to use a good-faith esitmate of the number of voice grade equivalent lines used for voice service.
- 3. Exchange refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)
- 4. Per 392.550(7)(c) IVoIP line quantities must be filed on a confidential basis. See instructions for how to file annual report information on a confidential basis.

For use when filing under seal.

| Annual Report of                                  | Craw-Kan Telepho                               | ne Cooperative, inc.              |                                |
|---|--|-----------------------------------|--------------------------------|
| · -   | for the calendar year                          | of January 1 - Decembe            | r 31, <u>2021</u>              |
|   | Relay Missouri Asse                            | essment <sup>1</sup>              |                                |
|   |  | Annual Totals                     |                                |
| 7. Revenue Collected From Relay                   | Missouri Surcharge                             | \$ 919.5                          | 6                              |
| Amount Retained for Billing and                   |  | \$ 360.0                          | 0                              |
| Relay Missouri Revenue Remitt                     |  | \$ 559.5                          | 6                              |
| 9. If your firm did not impose th                 | e Relay Missouri Surcharge, pleas              | e explain:                        |                                |
| o. II your IIIIII did not iii pade iii            | <u> </u>                                       |                                   |                                |
| 1 ILECs, CLECs and IVoIP providers are this page. | e required to complete this page; however, con | mpanies classified solely as IXCs | are not expected to complete   |
|   |  |                                   | For use when filing under seal |

for the calendar year of January 1 - December 31, 2021

### VERIFICATION

The foregoing report must be verified by the Oath of the President, Treasurer, General Manager or Receiver of the company. The Oath required may be taken before any person authorized to administer an oath Public) by the laws of the State in which the same is taken.

|   |  | 0  | ATH  |  |   |
|---|--|--|--|--|---|
| State Of  | Kansas   |  |  | }  |   |
|   |  |  |  | ss:  |   |
| County Of   | Crawford   |  |  | }  |   |
|   | Mary Smith   |  |  | makes oath and   | d says that   |
|   | Name of Affiant  | (Company Offi  | cial/Representative)   |  |   |
| s/he is   | President  |  |  |  |   |
|   | Offic  | ial Title of the A   | Affiant (Company Offici  | al/Representative)   |   |
| of  | Craw-Kan Telepho   | one Cooperati  | ve, Inc.   |  |   |
|   | Exact Legal  | Title or Name o  | f the Respondent (Ce   | rtificated Company   | Name)   |
| 1 2   |  |  |  |  |   |
| and is located at   | 200 N Ozark, Gira  | rd, KS 66743   |  |  |   |
|   | Address and To   | Jenhone Numb   | or of the Affiant (Com   | pany Official/Repre  | sentative)  |
| all statements of f<br>business and affa  | camined the foregoing<br>fact contained in the s<br>irs of the above-name  | g report; to the<br>said report are t<br>ed respondent,  | best of his or her kno<br>true and the said repo<br>and 2) examined (and   | wledge, information<br>rt is a correct state<br>updated as applic  | on, and belief<br>ement of the<br>able) the                                   |
| all statements of the business and affacompany's contact listed contacts are                                  | camined the foregoing<br>fact contained in the s<br>irs of the above-name<br>of information in EFIS<br>a correct.                                  | g report; to the<br>said report are<br>ed respondent,<br>; to the best of  | best of his or her kno<br>true and the said repo<br>and 2) examined (and<br>his or her knowledge   | wledge, information<br>rt is a correct state<br>updated as applic<br>information, and  | on, and belief,<br>ement of the<br>able) the<br>belief, all                   |
| all statements of f<br>business and affa<br>company's contact   | camined the foregoing<br>fact contained in the s<br>irs of the above-name<br>at information in EFIS<br>a correct.                                  | g report; to the said report are sed respondent, to the best of  | best of his or her kno<br>true and the said repo<br>and 2) examined (and   | wledge, information<br>rt is a correct state<br>updated as applic<br>information, and<br>December 31   | on, and belief,<br>ement of the<br>sable) the<br>belief, all                  |
| all statements of t<br>business and affa<br>company's contact<br>listed contacts are                          | camined the foregoing<br>fact contained in the s<br>irs of the above-name<br>of information in EFIS<br>a correct.                                  | g report; to the<br>said report are<br>ed respondent,<br>; to the best of  | best of his or her kno<br>true and the said repo<br>and 2) examined (and<br>his or her knowledge   | wledge, information<br>rt is a correct state<br>updated as applic<br>information, and  | on, and belief,<br>ement of the<br>able) the<br>belief, all                   |
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| all statements of t<br>business and affa<br>company's contact<br>listed contacts are                          | camined the foregoing<br>fact contained in the s<br>irs of the above-name<br>at information in EFIS<br>a correct.                                  | g report; to the said report are sed respondent,; to the best of  , 2021  Year   | best of his or her kno<br>true and the said repo<br>and 2) examined (and<br>his or her knowledge   | wledge, information is a correct state updated as application, and information, and information information information.  December 31  Month/Day  any Official/Represe   | on, and belief, ement of the sable) the belief, all year                      |
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See the instructions for more information to complete this page.

Craw-Kan Telephone Cooperative, Inc.

|  |  | VERIFICATION   |
|--|--|--|
| The foregoing rep  | ort must be verified by the Oa   | th of the President, Treasurer, General Manager or Receiver of the Company.  |
|  |  | ОАТН   |
| State Of   | Kansas   | }}   |
| County Of  | Crawford   | } ss:<br>}   |
|  | Mary Smith   | makes oath and says that   |
|  | Name of Affia  | nt (Company Official/Representative)   |
| s/he is  | President  |  |
| s/fie is   |  | Official Title of the Affiant (Company Official/Representative)  |
|  | Craw-Kan Tel   | ephone Cooperative, Inc.   |
| of   |  | act Legal Title or Name of the Respondent (Certificated Company Name)  |
|  | 200 N Ozork  | Cinned I/C 66742   |
|  | ZUULINI UZAIK  |  |
| and is located at  |  | Girard, KS 66743 uss and Telephone Number of the Afflant (Company Official/Representative)   |
| that s/he has 1) ex<br>statements of fact<br>of the above-name<br>the best of his or h | Addre<br>amined the foregoing report; t<br>contained in the said report a<br>d respondent, and 2) examine<br>er knowledge, information, ar               | ess and Telephone Number of the Affiant (Company Official/Representative)  that to the best of his or her knowledge, information, and belief, all  re true and the said report is a correct statement of the business and affairs and (and updated as applicable) the Company's contact information in EFIS; to ad belief, all listed contacts are correct.  |
| that s/he has 1) ex<br>statements of fact<br>of the above-name                         | Addre<br>amined the foregoing report;<br>contained in the said report a<br>d respondent, and 2) examine  | that to the best of his or her knowledge, information, and belief, all re true and the said report is a correct statement of the business and affairs to dand updated as applicable) the Company's contact information in EFIS; to   |
| that s/he has 1) ex<br>statements of fact<br>of the above-name<br>the best of his or h | Addre<br>amined the foregoing report; t<br>contained in the said report a<br>d respondent, and 2) examine<br>er knowledge, information, ar<br>January 1  | that to the best of his or her knowledge, information, and belief, all re true and the said report is a correct statement of the business and affairs id (and updated as applicable) the Company's contact information in EFIS; to id belief, all listed contacts are correct.   |
| that s/he has 1) ex<br>statements of fact<br>of the above-name<br>the best of his or h | Address  amined the foregoing report; to contained in the said report at drespondent, and 2) examine er knowledge, information, and January 1  Month/Day | that to the best of his or her knowledge, information, and belief, all re true and the said report is a correct statement of the business and affairs and updated as applicable) the Company's contact information in EFIS; to ad belief, all listed contacts are correct.   |
| that s/he has 1) ex<br>statements of fact<br>of the above-name<br>the best of his or h | Address  amined the foregoing report; to contained in the said report at drespondent, and 2) examine er knowledge, information, and January 1  Month/Day | that to the best of his or her knowledge, information, and belief, all re true and the said report is a correct statement of the business and affairs and updated as applicable) the Company's contact information in EFIS; to ad belief, all listed contacts are correct.    2021, to and including   December 31   2021     Year   Month/Day   Year     Signature of Affiant (Company Official/Representative) |

See the Instructions for more information to complete this page.