

498/499 ID Basics for Service Providers

Webinar

May 8, 2019



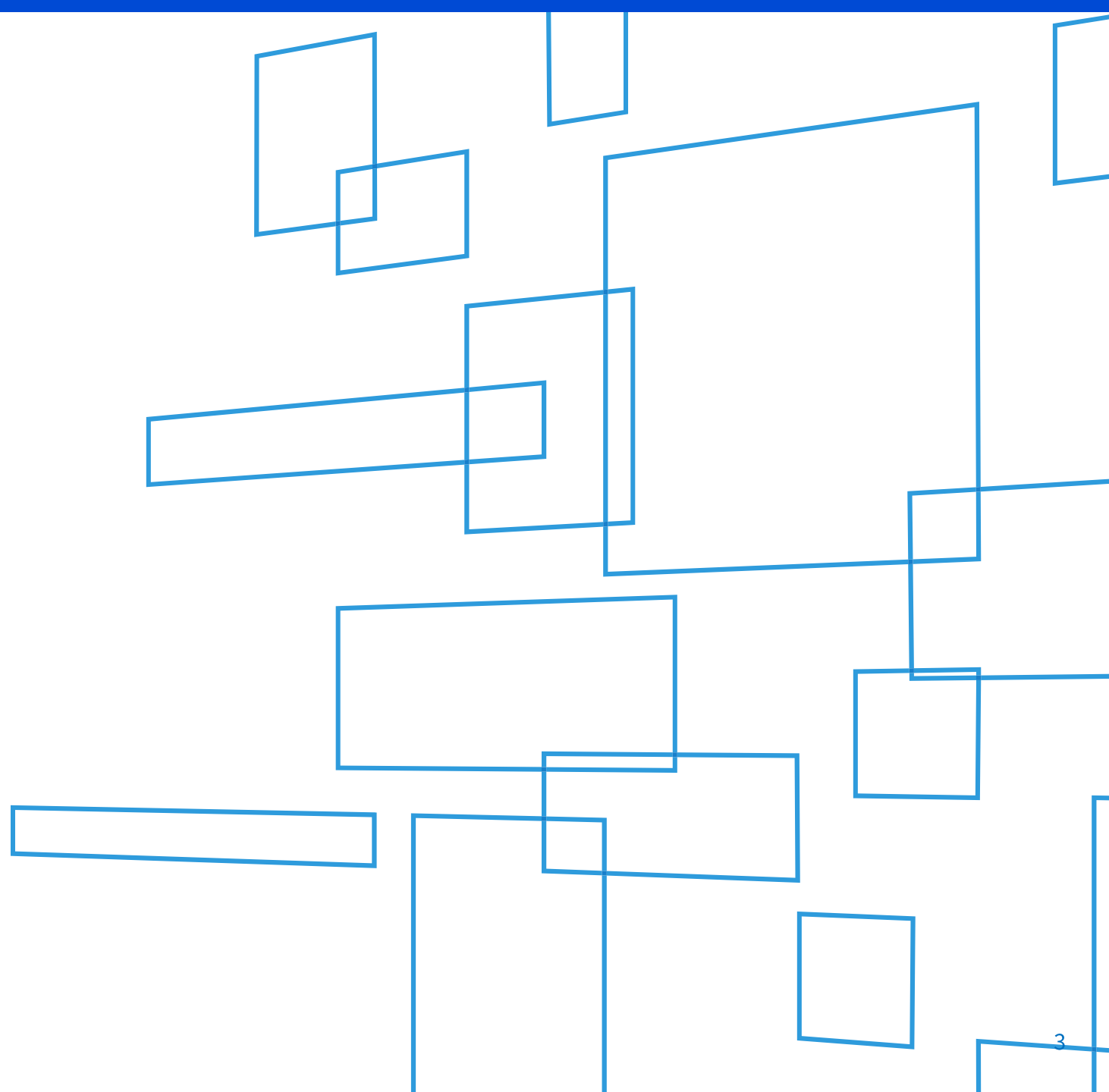
Universal Service
Administrative Co.

Housekeeping

- Audio is available through your computer's speakers
- The audience will remain on mute
- Enter questions at any time using the “Questions” box
- If your audio or slides freeze, restart the webinar
- A copy of the slide deck available in the “handouts” section of the webinar panel

Webinar Overview

In this webinar, designed for Service Providers new to USAC, we'll cover the basics of the 498 ID and the 499 ID, their difference and how to request them.



Agenda

1. 498 ID & 499 ID Purpose
2. Form 498 Registration
3. Form 499-A Registration
4. Questions

498 ID & 499 ID

What are these IDs?



What The IDs Are

498 ID

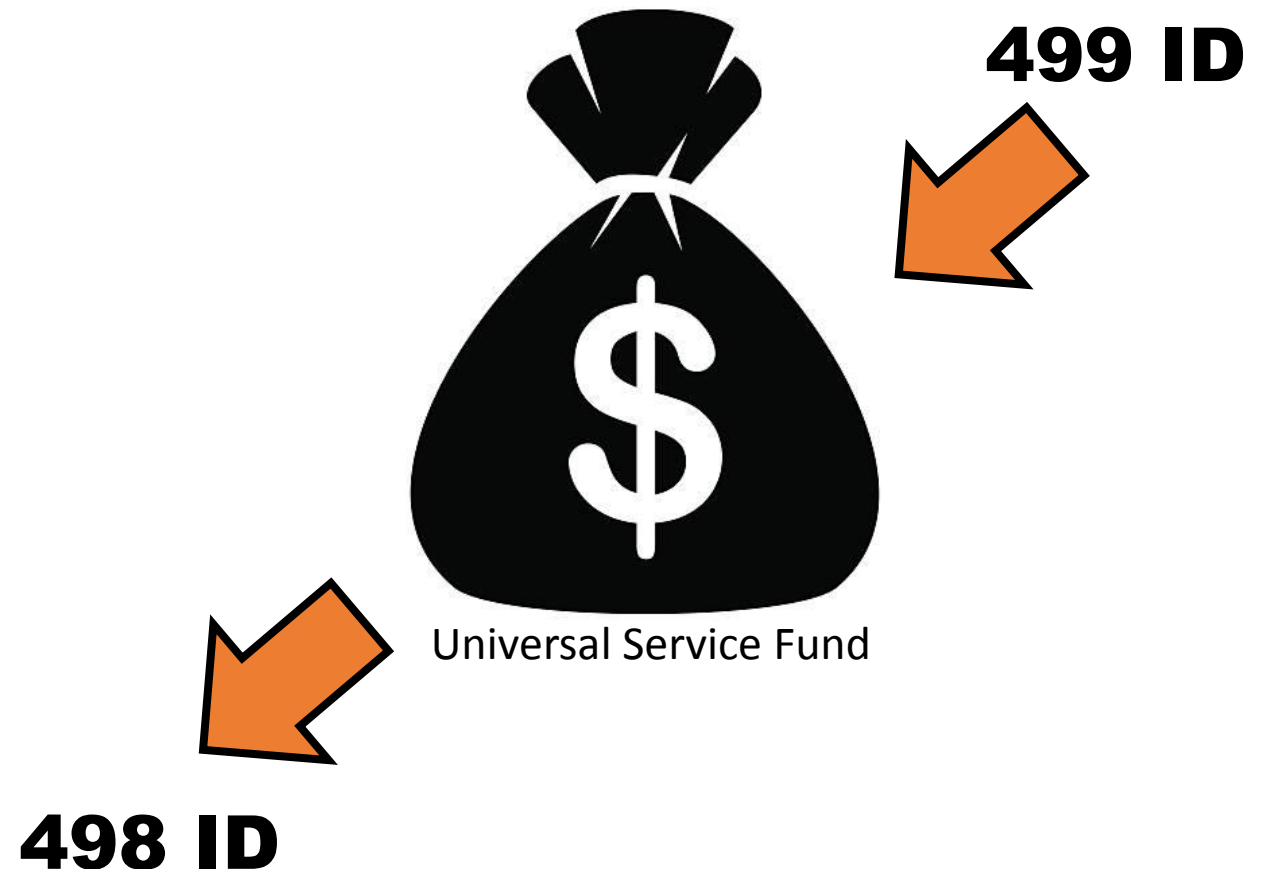
Takes its name from the registration form -
FCC Form 498

Identification used to *receive* Universal
Service funding

499 ID

Takes its name from its registration form -
FCC Form 499-A

Identification used to *contribute* to the
Universal Service Fund



ID Difference

498 Identification Number

aka

SPIN (Service Provider Identification Number), 498 ID
Nine digit number beginning with “143” (i.e. 143999999)

Who - Telecommunications Providers,
Service Providers, Schools, Libraries

Why - to participate in any of the 4
programs USAC administers: *Rural
Health Care, High Cost, Lifeline, Schools
and Libraries*

How - Complete Form 498

499 Filer ID

aka

Filer ID, 499 ID, 6 digit number
Six digit number beginning with an “8” (i.e. “889993”)

Who - Telecommunications Providers,
including VoIP service providers

Why - to contribute to the Universal
Service Fund

How - Complete Form 499-A

Companies that have a 498 ID don't necessarily have to have a 499 ID, and vice versa!

498 ID Registration

Understanding the Sections



Find the Form 498

Navigate to USAC's website:
www.usac.org

Select *Service Providers*
From the top right hand of page

Select *Forms*
from the left hand navigation menu



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ABOUT THE SERVICE PROVIDERS

USAC makes approved disbursements from the universal service programs to service providers based on the information they provide on the FCC Form 498, Service Provider and Billed Entity Identification Number and General Contact Information Form.

The FCC Form 498 is used to collect contact and remittance information for service providers that receive support from the universal service fund programs.

Form 498 & Instructions

The paper copy of the instructions as well as the form itself are listed in the section 'FCC Forms'.

Click on the name to open up a .pdf document.

FILERS






PAYERS



FCC FORMS

You must file all FCC forms electronically. Log in to your E-File account to start a form. Paper forms are for reference only.

[Log In to E-File](#)

| Form | Name |
|---|--|
| FCC Form 498 and Instructions  Learn More | Service Provider Identification Number and General Contact Information Form |
| FCC Form 499-A and Instructions  Learn More | 2018 Annual Telecommunications Reporting Worksheet (For reporting calendar year 2017 revenue) |
| FCC Form 499-Q and Instructions  Learn More | Quarterly Telecommunications Reporting Worksheet |

[See Prior Year FCC Form 499-A Forms and Instructions](#)

Paper Form 498

| | |
|--|--|
| File electronically at http://usac.org/about/tools/e-file.aspx/ | |
| FCC Form 498 OMB 3060-0824 | |
| Service Provider And Billed Entity Identification Number and General Contact Information Form | |
| Estimated Average Burden Hours Per Response: 1.6 hours | |
| FCC Form 498 is used to collect contact and remittance information for service providers and applicants that receive support from the Federal universal service support programs. For greater flexibility, this form allows service providers to use the same general contact information for all their contacts and the same remittance data collected for each of the four programs or multiple contact and remittance information. Please report any changes to this information on a revised FCC Form 498 to prevent any delays in notification and the timeliness of disbursements. Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001. | |
| Please read instructions, located at: http://usac.org/sp/tools/forms.aspx , before beginning this application. | |
| Provider Type | |
| Please check one box below See Instruction Section III.A | |
| <input type="checkbox"/> Service Provider <input type="checkbox"/> School/Library or other Billed Entity | |
| Submission Type | |
| Please check one box below See Instruction Section III.B | |
| <input type="checkbox"/> Original Application for FCC Form 498 ID <input type="checkbox"/> Revision to existing FCC Form 498 on file with USAC | |
| <input type="checkbox"/> Request for FCC Form 498 ID Merger/Consolidation <input type="checkbox"/> Request for FCC Form 498 ID Deactivation | |
| Service Provider Identification Number (FCC Form 498 ID) (To be inserted by USAC for first time applications. Required for subsequent revisions.) | |
| 499 Filer ID (Required if your company is required to file the FCC Form 499) | |
| Block 1: Organization Information [All Fields REQUIRED] See Instruction Section III.D | |
| 1 Company Name or Billed Entity | |
| 2 Name Entity or Company Is Doing Business As (DBA) or Formerly Known As (FKA) | |
| 3 <input type="checkbox"/> Check this Box if the Company is part of or maintains affiliate companies and complete page 2. | |
| 4 Street Address | |
| 5 Address Line 2 | |
| 6 City 7 State 8 Zip Code + 4 | |
| Block 2: General Contact Information [All Fields REQUIRED] See Instruction Section III.E | |
| 9 First: Middle Initial: Last: 10 Title | |
| 11 General Contact (Company Preparer Name) | |
| 12 Phone Number Ext. | |
| 13 Street Address | |
| 14 Address Line 2 | |
| 15 City 16 State 17 Zip Code + 4 | |
| 18 E-mail Address | |
| Block 3: Federal EIN, DUNS and FCC Registration Number [All Fields REQUIRED] See Instruction Section III.F | |
| 19 <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other | |
| 20 Enter Federal Employer Identification Number (Federal EIN or Tax ID Number) | |
| 21 Enter Dunn and Bradstreet Number (DUNS) FCC Registration Number (CORES ID) | |

The Form 498 is a total of 11 pages

The purpose of this form is to collect information from service providers and billed entities that receive support from the High Cost, Lifeline, Rural Health Care, and Schools and Libraries Programs.

Page 1 Information Collected

- Company Identification
- General Contact Info
- Federal EIN (tax number)
- Dunn and Bradstreet Number (DUNS)
- FCC Registration Number (CORES ID)

Paper Form 498 – Program Selection

| | |
|---|--|
| This page is for Schools and Libraries Program participants only. | |
| For more information about the Schools and Libraries Program, please refer to: http://www.usac.org/sl/ | |
| Block 12: Schools and Libraries Support Financial Institution and Remittance Information [ALL Fields REQUIRED] | |
| <input type="checkbox"/> Check this box discontinue use of this FCC Form 498 ID for Schools and Libraries Support. | |
| Financial institution information is required. Electronic payment of universal service support payments is mandated by the Debt Collection Improvement Act of 1996, Pub. Law 104-134, 110 Stat. 1321-358. See instruction Section III.D | |
| <input type="checkbox"/> Check this box if this information is the same as the General Contact Information (Block 2) and complete lines 105-107. | |
| 72 _____ Remittance Company Name, if different from Company or Billed Entity Name | |
| 73 First: _____ Middle Initial: _____ Last: _____ 74 _____ Remittance Contact Name - Statements will be sent to Remittance Contact's attention Title | |
| 75 (_____) _____ 76 _____ Phone Number Ext E-mail Address for receipt of remittance advice | |
| 77 _____ Remittance Financial Institution for ACH or locked box transfer of funds (required) | |
| 78 [][][][][][][][][][][][][][][] _____ Financial Institution Account Number for ACH (required) | 79 [][][][][][][][][][] _____ ACH Financial Institution Transit Number - must be nine digits (required) |

| | |
|---|--|
| Block 13: Company Contact for Schools and Libraries Support | |
| See instruction Section III.E | |
| <input type="checkbox"/> Check this box if this information is the same as the General Contact Information (Block 2) and continue on to Block 14. | |
| 80 First: _____ Middle Initial: _____ Last: _____ 81 _____ Contact Name for Schools and Libraries Program Title <i>(Must be a company, or entity employee or designated representative)</i> | |
| 82 _____ Contact Address for Schools and Libraries Program | |
| 83 _____ Address Line 2 | |
| 84 _____ 85 _____ 86 _____ City State Zip Code + 4 | |
| 87 (_____) _____ 88 _____ Phone Number Ext E-mail Address of Schools and Libraries Program Contact | |

USAC Program page

Banking Info

Program Contact

Some programs require more information in addition to these standard requirements.

ALL programs require you to upload banking validation documentation!

Paper Form 498 – Distribution Offsets

| Disbursement Offsets and Healthcare Connect Certification | |
|--|--|
| Block 15: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For High Cost Participants <i>See Instruction Section III.R</i> The following information pertains only to telecommunications companies participating in the High Cost Program. A telecommunications company may choose to offset its payment against its Federal universal service contribution. A telecommunications company must have an FCC Form 499 Filer ID number in order to offset its High Cost Program payments against its Federal universal service contribution. In order to obtain an FCC Form 499 Filer ID number, visit http://www.usac.org/cont/tools/forms/default.aspx and select FCC Form 499. You do not need an FCC Form 499 Filer ID in order to be issued a FCC Form 498 ID. | |
| 89 <input type="checkbox"/> Yes, I want my High Cost Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No." | |
| Block 16: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For Lifeline/Lifeline Participants <i>See Instruction Section III.S</i> The following information pertains only to telecommunications companies participating in the Lifeline Program. A telecommunications company may choose to offset its payment against its Federal universal service contribution. A telecommunications company must have an FCC Form 499 Filer ID number in order to offset its Lifeline Program payments against its Federal universal service contribution. In order to obtain an FCC Form 499 Filer ID number, visit http://www.usac.org/cont/tools/forms/default.aspx and select FCC Form 499. You do not need an FCC Form 499 Filer ID in order to be issued a FCC Form 498 ID. | |
| 90 <input type="checkbox"/> Yes, I want my High Cost Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No." | |
| Block 17: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For Rural Healthcare Participants <i>See Instruction Section III.O</i> The following information pertains only to telecommunications companies participating in the Rural Health Care Program. In accordance with FCC rule section 54.679 regarding Rural Health Care payments, a telecommunications company may choose to offset its payment against its Federal universal service contribution. A telecommunications company must have an FCC Form 499 Filer ID number in order to offset its Rural Health Care Program payments against its Federal universal service contribution. In order to obtain an FCC Form 499 Filer ID number, visit http://www.usac.org/cont/tools/forms/default.aspx and select FCC Form 499. You do not need an FCC Form 499 Filer ID in order to be issued a FCC Form 498 ID. | |
| 91 <input type="checkbox"/> Yes, I want my Rural Health Care Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No." | |
| Block 18: Certification to Assist Health Care Providers <i>See Instruction Section III.T</i> In accordance with FCC rule section 54.640(b), service providers participating in the Healthcare Connect Fund Program must certify, as a condition of receiving support, that they will provide to health care providers, on a timely basis, all information and documents regarding supported equipment, facilities, or services that are necessary for the health care provider to submit required forms or respond to FCC or USAC inquiries. USAC may withhold disbursements to the service provider if the service provider, after written notice from USAC, fails to comply with this requirement. | |
| 92 <input type="checkbox"/> I certify, as a condition of receiving support under the Healthcare Connect Fund Program, that the above-named service provider will provide to health care providers, on a timely basis, all information and documents regarding the supported equipment, facility(ies), or service(s) that are necessary for the health care provider to submit required forms or respond to FCC or USAC inquiries. | |
| Block 19: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For Schools and Libraries Participants <i>See Instruction Section III.U</i> The following information pertains only to telecommunications companies participating in the Schools and Libraries Program. In accordance with FCC rule section 54.515 regarding Schools and Libraries Program payments, a telecommunications company may choose to offset its Schools and Libraries Program payment against | |
| 93 <input type="checkbox"/> Yes, I want my Schools and Libraries Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No." | |

On this page, service providers have the option to tell USAC that they want any disbursement payments made to them by USAC to OFFSET their contributor payment requirements.

Information Needed Prior to Registration

Information you need prior to registering!

- Federal Employer Identification Number (FEIN) aka Tax ID Number
- FCC Registration Number (FRN) aka CORES ID
- Dunn and Bradstreet Number (DUNS)
- Banking verification documentation

Registration Process – Service Providers

- Submit an FCC Form 498 with USAC through **E-File**

Registration Process – Applicants (e.g. libraries or school districts)

- Request access to EPC by calling the Client Service Bureau at 888-203-8100.
- Submit an FCC Form 498 with USAC through **EPC**

498 ID Registration

Applicants



EPC Form 498 – Registration

Start by going to the USAC home page

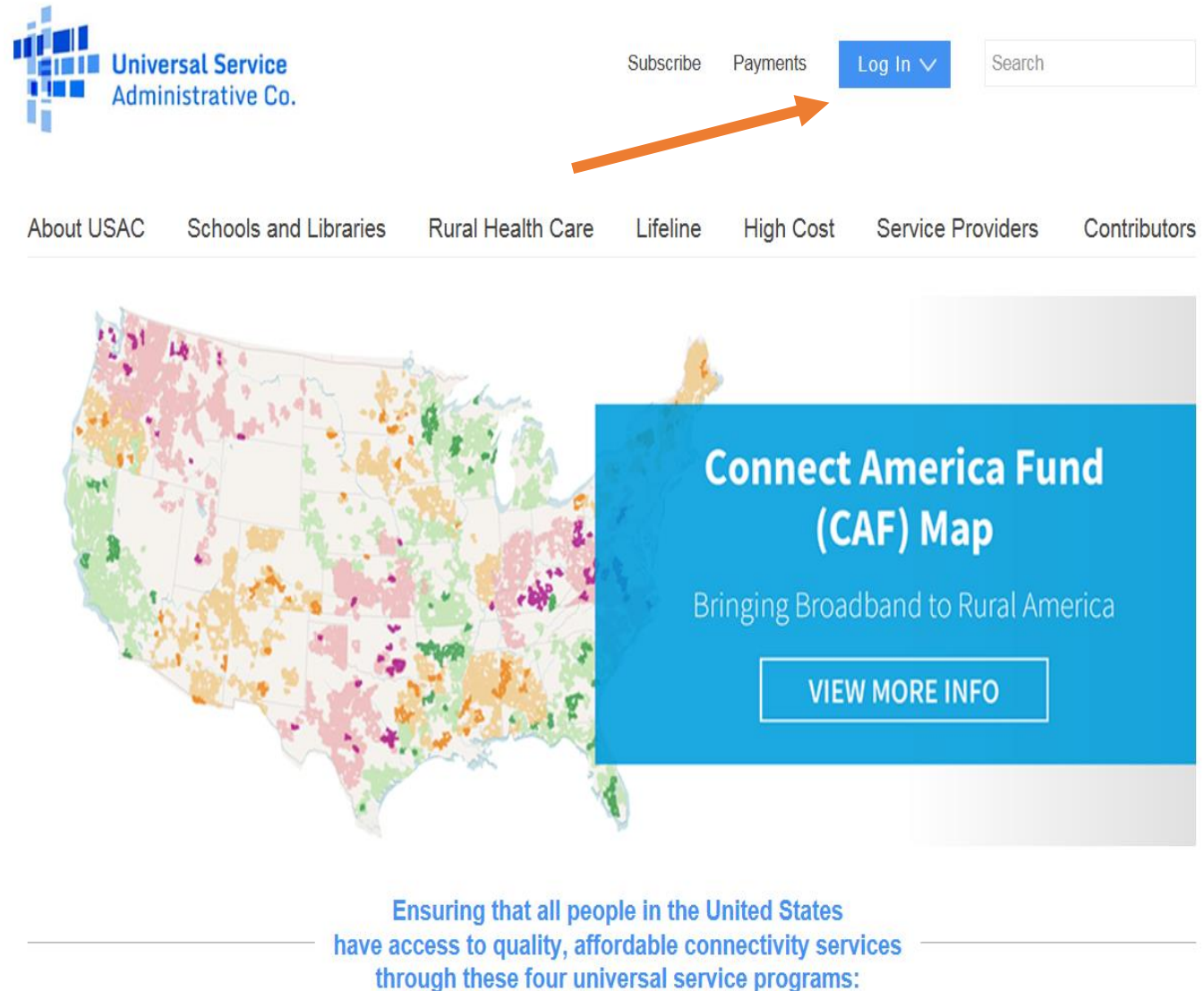
www.usac.org

Find the blue “Log In” button at the top of the page.

Select “EPC” from the drop down menu.

Registration is completed on-line. No paper copies accepted.

NOTE! New users to EPC will need to get a username and password first by calling the SLD’s Client Service Bureau at 888-203-8100.



The screenshot shows the USAC website header with the logo and navigation links: About USAC, Schools and Libraries, Rural Health Care, Lifeline, High Cost, Service Providers, and Contributors. The 'Log In' button is highlighted with a blue box and an orange arrow pointing to it. Below the header is a map of the United States with a blue overlay box containing the text 'Connect America Fund (CAF) Map' and 'Bringing Broadband to Rural America'. A 'VIEW MORE INFO' button is also present. At the bottom, a blue banner reads: 'Ensuring that all people in the United States have access to quality, affordable connectivity services through these four universal service programs:'.

EPC Form 498 – Registration

Once the user is logged in to EPC, from the “Landing Page”, you’ll select from the top row, the tab titled “Records”.

My Landing Page

Apply Now | Contact Us | Help

USAC O&M TEST

Welcome to the new EPC system, more functionality will be rolling out soon!

Organizations

| Organization | City | State | Zip Code | Type |
|----------------------|-----------|-------|----------|-----------|
| Einstein Library 2 | Chantilly | VA | 20151 | Applicant |
| Einstein Library NIF | Chantilly | VA | 20151 | Applicant |

My Tasks


| Name | Received | Status | Deadline |
|---------------------|------------------------|----------|----------|
| Create FCC Form 470 | 9/11/2015 9:58 AM EDT | Accepted | |
| Create FCC Form 470 | 9/11/2015 10:03 AM EDT | Accepted | |
| Create FCC Form 470 | 9/18/2015 10:17 AM EDT | Accepted | |

Map data ©2015 Google

EPC Form 498 – Registration

The resulting screen in EPC will list the records related to this applicant.

From this list, you will select the one titled “Applicant Entries”.



The screenshot displays the EPC (Electronic Procurement Center) interface. At the top, there is a navigation bar with tabs for News, Tasks (6), Records (selected), Reports, and Actions. The user's name, Jasper Smith, and the company name, Applian, are visible in the top right corner. The main content area is titled "Records" and contains a list of records. The first record, "Applicant Entities", is highlighted with a red box and a red arrow pointing to it. Below it are other records: Consulting Firms, Customer Service Cases, FCC Forms 470, FCC Forms 498, Knowledge Base Center, Service Providers, Users, and Whistleblower Cases. Each record has a small icon to its left and a description below its title.

| Record Title | Description |
|------------------------|---|
| Applicant Entities | List of Applicant Entities |
| Consulting Firms | List of Consulting Firms |
| Customer Service Cases | List of Customer Service Cases |
| FCC Forms 470 | List of FCC Forms 470 |
| FCC Forms 498 | List of FCC Forms 498 |
| Knowledge Base Center | E-rate help with FAQs, guidance documents, and videos |
| Service Providers | List of Service Providers |
| Users | Directory of users |
| Whistleblower Cases | List of Whistleblower Cases |

EPC Form 498 – Registration

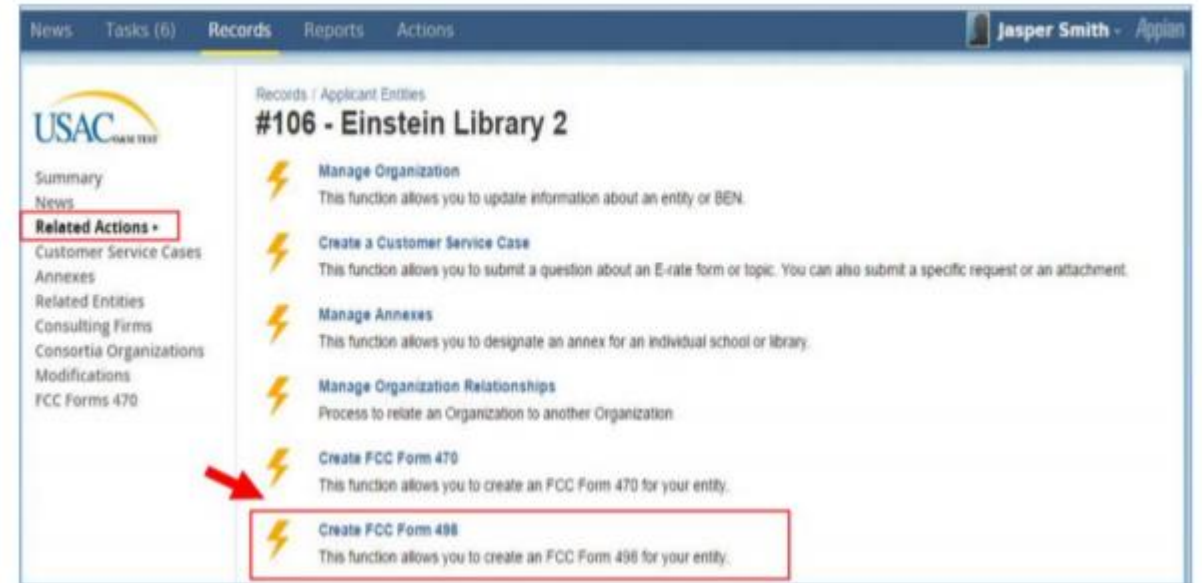
Select 'Related Actions' from the left hand navigation.

Click on 'Create FCC Form 498'.

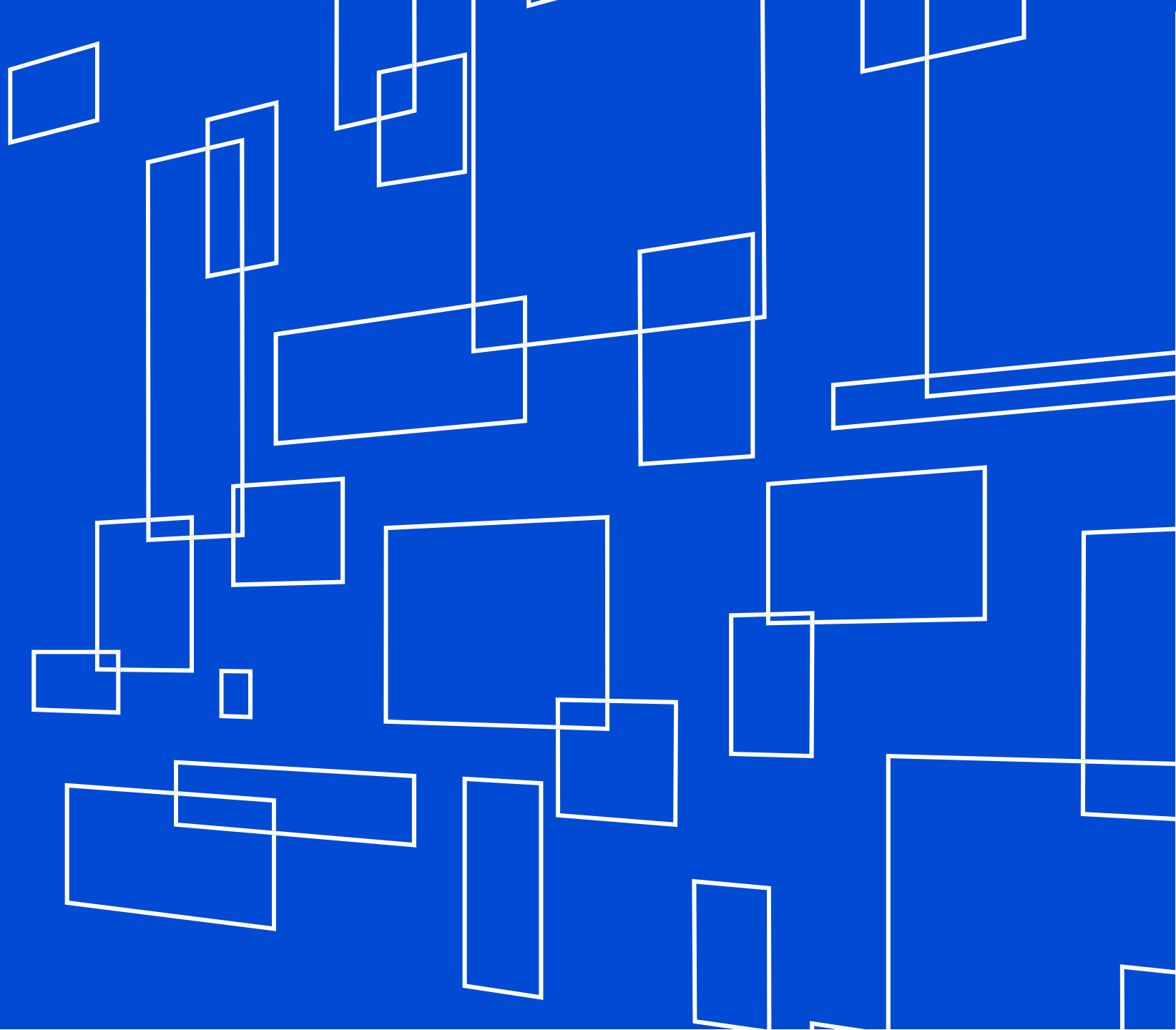
Follow the online directions and start entering the data.

It's not going to look like the paper form, but the online data entry program will ask you for the same information that is required on the paper form.

At the end, you'll be prompted to upload your banking validation documentation. It's important to do this – USAC won't review the form without one.



Questions ?



498 ID Registration

Service Providers



E-File Form 498 – Registration

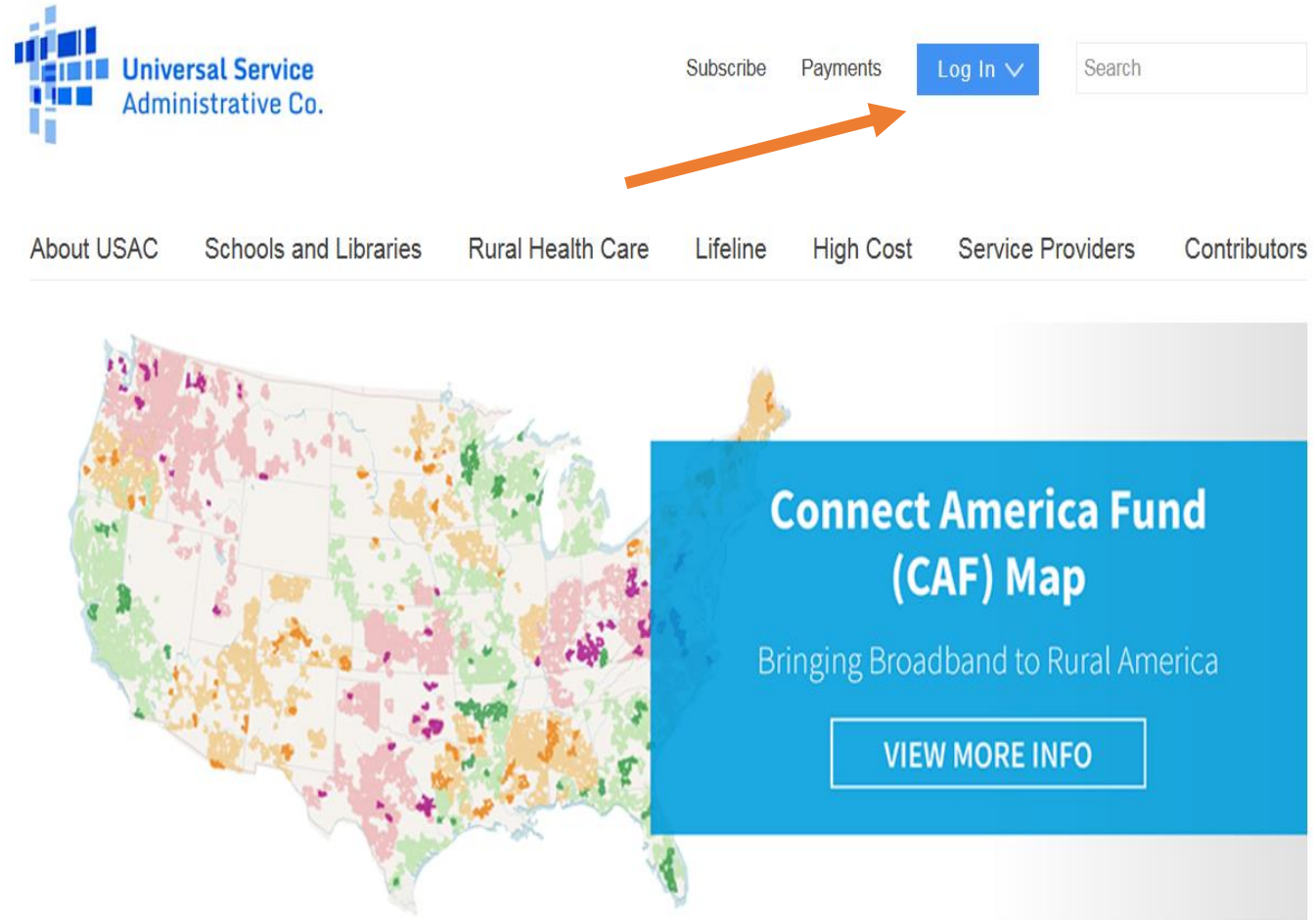
Start by going to the USAC home page

www.usac.org

Find the blue “Log In” button at the top of the page.

Select “E-File” from the drop down menu.

Registration is completed on-line. No paper copies accepted.



Ensuring that all people in the United States
have access to quality, affordable connectivity services
through these four universal service programs:

E-File Form 498 – Online Registration



SCROLL to the bottom of the page to find the selection **‘New Service Provider – 498 ID’**.

It’s the first option in the list.

RESOURCES FOR FORM FILING

Access all FCC Forms, instructions, and user guides on the [Forms page](#) of the public website.

Watch our form-filing demo videos in the [Online Learning Library](#)

E-FILE SIGN IN

User ID (Email Address): *

Password: *

[Forgot password?](#)

IMPORTANT SYSTEM NOTICE - This system is the property of the Universal Service Administrative Company (USAC) and is to be used to assist individuals with managing their entity's involvement in federal universal service programs. This system may be accessed by authorized users only. By logging in, the user represents himself or herself as an authorized user. This system is monitored, recorded and subject to audit. Any unauthorized use or misuse of this system is strictly prohibited and subject to legal action, including criminal prosecution and civil penalties. Use of this system indicates acceptance of these terms and system monitoring and recording.

☐ Click the box to accept. *

If you experience any issue logging in, please make sure

- Visit <https://forms.universalservice.org> without any suffix.
- If the above doesn't work, please clear your browser cache and try again.

Login

Reset

New users, please select from the options below:

- New Service Provider - 498 ID
- Add FCC Form 498 Company Officer
- New Contributor/Registration In Progress
- Add FCC Form 499 Company Officer
- New RHC Applicant

Instructions for Service Providers

E-File 498 Online Registration



E-FILE

NEW SERVICE PROVIDER REGISTRATION

1 Provide information about your company to start new Form 498 ID application.

Company Name

2

Company Name

Federal EIN or TAX ID Number

2

Tax ID number

USF Programs

2

- ☐ High Cost
- ☐ Life Line
- ☐ Rural Health Care
- ☐ Schools and Libraries

USF Program(s) company will participate in

FilerID

2

1 From the List of Activities box below, select the Principal Communication activity or activities that describe the company's business. When selecting more than one activity, rank the activities in order of importance to the company's business. Select no more than five.

List of Activities

Audio Bridging Provider
CAP/CLEC
Cellular/PCS/SMR
Coaxial Cable
Incumbent LEC
Interconnected VoIP

Selected Activities - Rank in order of Importance

→

←

↑

↓

Services provided

Continue

Instructions for Service Providers

E-File Form 498 Registration Training Video

Select '*Trainings & Outreach*' from the left hand navigation menu

Select '*Online Learning Library*' from the gray bar menu.

The screenshot shows the Universal Service Administrative Co. website. At the top, there is a navigation bar with links for 'Subscribe', 'Payments', 'Log In', and a search box. Below this is a secondary navigation bar with links for 'About USAC', 'Schools and Libraries', 'Rural Health Care', 'Lifeline', 'High Cost', 'Service Providers', and 'Contributors'. The 'Contributors' link is underlined. Below the secondary navigation bar, there is a breadcrumb trail: 'USAC Home | Contributors | **Trainings & Outreach**'. On the left side, there is a 'Trainings & Outreach' link in the left-hand navigation menu, which is highlighted with an orange box. In the main content area, there is a 'TRAININGS & OUTREACH' section with a sub-menu containing 'Handouts & Reference', 'Online Learning Library', and 'Newsletter'. The 'Online Learning Library' link is highlighted with an orange box. Below this section, there is an 'Upcoming Events' section with a list of webinars. To the right of the webinars, there is a blue box with the text 'Looking for a past event?' and links to 'View webinar recordings' and 'View full event archive'. At the bottom, there is a 'Newsletters' section with a form to subscribe to a quarterly newsletter about FCC Form 498 and FCC Form 499.

Universal Service Administrative Co.

Subscribe Payments Log In Search

About USAC Schools and Libraries Rural Health Care Lifeline High Cost Service Providers **Contributors**

USAC Home | Contributors | **Trainings & Outreach**

ABOUT

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TRAININGS & OUTREACH

- Handouts & Reference
- Online Learning Library**
- Newsletter

USAC offers a variety of training events for companies who must contribute to universal service and/or file FCC Forms 499-A/Q. USAC also offers training events for service providers who must file the FCC Form 498 and participate in any of the four universal service programs. All events and resources are offered free of charge.

Upcoming Events

2019 Webinars

- Recurring Basic Training – **New!**
- FCC Form 499-A Series
- See the complete list of [training webinars and register](#).

Looking for a past event?

- [View webinar recordings](#)
- [View full event archive](#)

Newsletters

Quarterly newsletter about FCC Form 498 and FCC Form 499.

E-File 498 Registration Video

Complete Walkthrough - How to Register using the E-File System

FCC Form 498



Register for a New 498 ID

[Register for a New 498 ID★](#)

3:28 minutes | November 2018

[Add or Remove 498 User as Company Officer](#)

2:39 minutes | December 2015

[Update Banking Info as a Company Officer](#)

1:45 minutes | November 2015

[Revise an FCC Form 498 as a General Contact](#)

2:52 minutes | September 2015

[Revise an FCC Form 498 as a Company Officer](#)

2:45 minutes | September 2015

[Request a 498 ID Deactivation as a Company Officer](#)

2:44 minutes | September 2015

[Overview of FCC Form 498](#)

5:53 minutes | August 2013

498 ID Registration RECAP



Form 498 – Registration Recap

Two Categories. Two Registration Systems!

Applicants e.g. libraries, schools, school districts → Use EPC to register

Service Providers e.g. CLECS, VoIP providers → Use E-File to register

Both systems can be accessed from www.usac.org

Top of page, blue **Log In** button

498 ID Registration Complete

1. USAC will review and approve the Form within 72 business hours
2. Email confirmation will be sent to Company Officer certifying the form, identifying the new 498 ID.
3. FCC Form 498 can be updated at any time
4. If revising banking information, new banking documents need to be submitted
5. The Company Officer has **FOURTEEN** days to “Certify” the Form

Upload Banking Documentation

[About USAC](#)[Schools and Libraries](#)[Rural Health Care](#)[Lifeline](#)[High Cost](#)[Service Providers](#)[Contributors](#)[USAC Home](#) | [Service Providers](#)

ABOUT

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ABOUT THE SERVICE PROVIDERS

USAC makes approved disbursements from the universal service programs to service providers based on the information they provide on the FCC Form 498, Service Provider and Billed Entity Identification Number and General Contact Information Form.

The FCC Form 498 is used to collect contact and remittance information for service providers that receive support from the universal service fund programs.

This section of the site will assist service providers in managing their 498 ID (formerly known as SPIN) data, perform research on pending payments, and the impacts of billing and collections on service provider payments.

LATEST NEWS

FCC Announces 2nd Quarter 2010 Contribution Factor Decrease to 18.8 Percent

[Read more](#)

QUICK LINKS

Upload Form 498 Banking Verification Documents – After you certify your FCC Form 498, you must upload a copy of relevant financial documents.

Check 498 ID Status

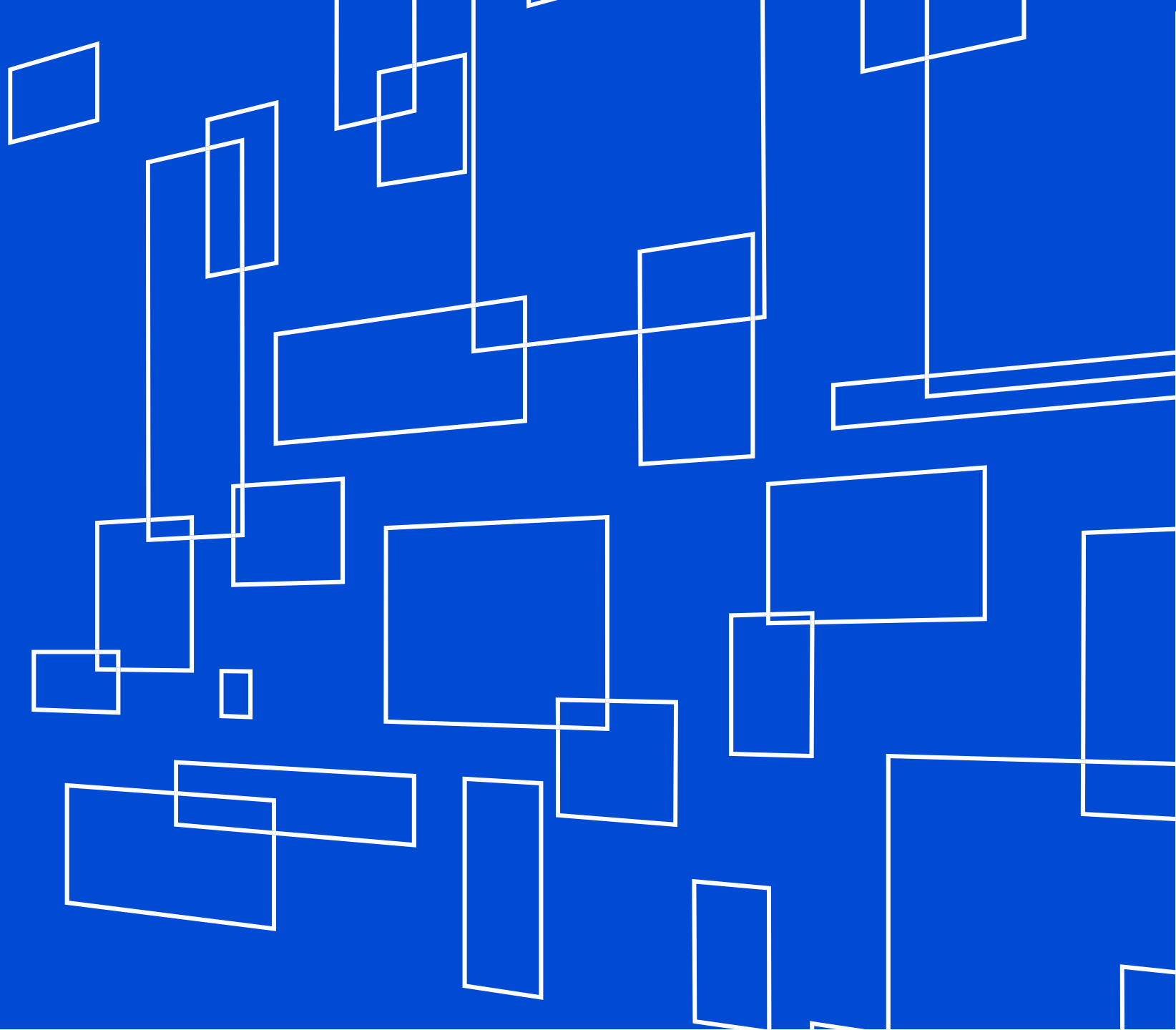
1. Applicants -

- Schools and Libraries → Tools → Search for 498 ID Status

2. Service Providers

- Log in to E-File → Information Center for Service Providers

Questions ?



EPC Assistance Information

About USAC | Schools and Libraries | Rural Health Care | Lifeline | High Cost | Service Providers | Contributors

USAC Home | Schools and Libraries Program | E-rate Productivity Center (EPC)

ABOUT THE PROGRAM

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Eligible Services List
Document Retention
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Glossary of Terms (PDF)
FAQs

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E-rate Productivity Center

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Contact Us

FY2019 Application
Filing Window Is Now
Closed*

APPLICANT PROCESS

SERVICE PROVIDER PROCESS

E-RATE PRODUCTIVITY CENTER (EPC)

FY2019 Filing Window

EPC Maintenance Schedule

EPC Training Site

About EPC

EPC is the account and application management portal for the Schools and Libraries (E-rate) Program. E-rate Program participants use this tool to manage program processes, receive notifications and to contact customer service.

General Guidance

- Videos – Visit our [Online Learning Library](#)
- Form User Guides – Visit our [Forms](#) page
- [EPC Access Agreement \(Commercial End User Agreement\)](#) 📄
- View the [application process flowchart](#) 📄 to keep track of where you are in the [applicant](#) or [service provider](#) process.

Web Browsers

Returning user?

Log in to the E-rate Productivity Center (EPC) to access your forms and messages.

EPC

New users? [Contact Us](#).

✓ Call Client Service Bureau Phone: (888) 203-8100

499 Filer ID Registration

How to Register

Find the Form 499

Navigate to USAC's website:
www.usac.org

Select *Contributors*
from the top right hand of
page

Select *Forms* from the left
hand navigation menu

The screenshot displays the USAC (Universal Service Administrative Co.) website. At the top, the USAC logo is on the left, and navigation links for 'Subscribe', 'Payments', 'Log In', and a 'Search' bar are on the right. A horizontal menu below the logo includes 'About USAC', 'Schools and Libraries', 'Rural Health Care', 'Lifeline', 'High Cost', 'Service Providers', and 'Contributors'. The 'Contributors' link is highlighted with an orange box. Below this menu, the breadcrumb 'USAC Home | Contributors' is shown. On the left side, under the 'ABOUT' section, there is a list of links: 'Getting Started', 'Billing Disputes', 'Audits & Assessments', 'Glossary of Terms (PDF)', and 'FAQs'. Under the 'RESOURCES & TOOLS' section, the 'Forms' link is highlighted with an orange box. To the right of the navigation menu, a large blue banner advertises 'New Upcoming Webinars for Service Providers' with a 'REGISTER NOW' button. Below the banner, there are two blue tabs labeled 'FILERS' and 'PAYERS'. At the bottom, there are two columns: 'LATEST NEWS' featuring a link to 'January 2019 Contributor Invoice Summary Now Available Online (1/17/2019)' and 'QUICK LINKS' featuring a link to 'USF Has Transferred to the U.S. Treasury – Learn More'.

Universal Service Administrative Co.

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About USAC Schools and Libraries Rural Health Care Lifeline High Cost Service Providers **Contributors**

USAC Home | Contributors

ABOUT

- Getting Started
- Billing Disputes
- Audits & Assessments
- Glossary of Terms (PDF)
- FAQs

RESOURCES & TOOLS

- Forms**
- Invoices
- Latest News
- Contribution Factors
- When to File
- Mergers, Sales, & Deactivations
- Late Payments, DCIA, Red Light
- Trainings & Outreach
- Contact Us

New Upcoming Webinars for Service Providers

Join us to learn more about program basics and filing forms.

REGISTER NOW

FILERS **PAYERS**

LATEST NEWS

January 2019 Contributor Invoice Summary Now Available Online (1/17/2019)

QUICK LINKS

USF Has Transferred to the U.S. Treasury – Learn More

Form 499-A and Instructions

Official Name for FCC Form 499-A is official named: “**Annual** Telecommunications Reporting WORKSHEET”, but everyone calls it the “**Form 499-A**” .

The paper copy of the instructions as well as the form itself are listed in the section ‘FCC Forms’.

Click on the name to open up a .pdf document.

FILERS






PAYERS



FCC FORMS

You must file all FCC forms electronically. Log in to your E-File account to start a form. Paper forms are for reference only.

[Log In to E-File](#)

| Form | Name |
|---|--|
| FCC Form 498 and Instructions  Learn More | Service Provider Identification Number and General Contact Information Form |
| FCC Form 499-A and Instructions  Learn More | 2018 Annual Telecommunications Reporting Worksheet (For reporting calendar year 2017 revenue) |
| FCC Form 499-Q and Instructions  Learn More | Quarterly Telecommunications Reporting Worksheet |

[See Prior Year FCC Form 499-A Forms and Instructions](#)

Paper Form 499

2018 FCC Form 499-A Telecommunications Reporting Worksheet (Reporting 2017 Revenues)

APPROVED BY OMB

3060-0855

>>> Please read instructions before completing.<<<

Annual Filing -- due April 1, 2018

| Block 1: Contributor Identification Information | | During the year, filers must refile Blocks 1, 2 and 6 if there are any changes in Lines 104 or 112. See Instructions. | | | |
|---|---|---|---|---|---|
| 101 | Filer 499 ID [If you don't know your number, contact the administrator at (888) 641-8722. If you are a new filer, write "NEW" in this block and a Filer 499 ID will be assigned to you.] | | | | |
| 102 | Legal name of filer | | | | |
| 103 | IRS employer identification number | [Enter 9 digit number] | | | |
| 104 | Name filer is doing business as | | | | |
| 105 | Telecommunications activities of filer [Select up to 5 boxes that best describe the reporting entity. Enter numbers starting with "1" to show the order of importance -- see instructions.] | | | | |
| | <input type="checkbox"/> Audio Bridging (teleconferencing) Provider | <input type="checkbox"/> CAP/CLEC | <input type="checkbox"/> Cellular/PCS/SMR (wireless telephony inc. by resale) | | |
| | <input type="checkbox"/> Coaxial Cable | <input type="checkbox"/> Incumbent LEC | <input type="checkbox"/> Interconnected VoIP | <input type="checkbox"/> Interexchange Carrier (IXC) | <input type="checkbox"/> Local Reseller |
| | <input type="checkbox"/> Non-Interconnected VoIP | <input type="checkbox"/> Operator Service Provider | <input type="checkbox"/> Paging & Messaging | <input type="checkbox"/> Payphone Service Provider | <input type="checkbox"/> Prepaid Card |
| | <input type="checkbox"/> Private Service Provider | <input type="checkbox"/> Satellite Service Provider | <input type="checkbox"/> Shared-Tenant Service Provider / Building LEC | <input type="checkbox"/> SMR (dispatch) | |
| | <input type="checkbox"/> Toll Reseller | <input type="checkbox"/> Wireless Data | <input type="checkbox"/> Other Local | <input type="checkbox"/> Other Mobile | <input type="checkbox"/> Other Toll |
| | If Other Local, Other Mobile or Other Toll is checked describe carrier type / services provided: | | | | |
| 106.1 | Affiliated Filers Name/Holding Company Name (All affiliated companies must show the same name on this line.) | | | Check if filer has no affiliates <input type="checkbox"/> | |
| 106.2 | Affiliated Filers Name/Holding Company Name IRS employer identification number | | | [Enter 9 digit number] | |
| 107 | FCC Registration Number (FRN) [https://fjallfoss.fcc.gov/coresWeb/publicHome.do] [For assistance, contact the CORES help desk at 877-480-3201 or CORES@fcc.gov] | | | [Enter 10 digit number] | |
| 108 | Management company [if filer is managed by another entity] | | | | |
| 109 | Complete mailing address of reporting entity corporate headquarters | | Street1 Street2 Street3 City | State | Zip (postal code) Country |
| 110 | Complete business address for customer inquiries and complaints | | Street1 Street2 Street3 City | State | Zip (postal code) Country |
| | check if same address as Line 109 <input type="checkbox"/> | | | | |
| 111 | Telephone number for customer complaints and inquiries [Toll-free number if available] | | | () - ext - | |
| 112 | List all trade names used in the past 3 years in providing telecommunications. Include all names by which you are known by customers. | | | | |
| | a | | g | | |
| | b | | h | | |
| | c | | i | | |
| | d | | j | | |
| | e | | k | | |
| | f | | l | | |

Use additional sheets if necessary. Each filer must provide all names used for telecommunications activities

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. § 1001

Page 1 Information Collected

- Company Identification
- Telecommunications services provided
- Company address
- Federal EIN (tax ID)
- Affiliates
- FCC Registration Number (CORES ID)
- All company or trade names the filer does business as

Paper Form 499

| 2018 FCC Form 499-A Telecommunications Reporting Worksheet (Reporting 2017 Revenues) | | | | | | Page 2 |
|--|--|---|------------------|-------------------|-----------|--------|
| Block 2-A: Regulatory Contact Information | | | | | | |
| 201 | Filer 499 ID [from Line 101] | | | | | |
| 202 | Legal name of filer [from Line 102] | | | | | |
| 203 | Person who completed this Worksheet | First | MI | Last | | |
| 204 | Telephone number of this person | () | - | ext - | | |
| 205 | Fax number of this person | () | - | | | |
| 206 | Email of this person [not for public release] | | | | | |
| 207 | Contact person name, office name, and mailing address of a corporate office to which correspondence regarding this Telecommunications Reporting Worksheet should be sent. check if same name as Line 203 <input type="checkbox"/> check if same address as Line 109 <input type="checkbox"/> | Office | Attn: First name | MI | Last | |
| | | Email [not for public release] | Phone () - | ext- | Fax () - | |
| | | ----- | | | | |
| | | Street1 | | | | |
| | | Street2 | | | | |
| | | Street3 | | | | |
| | | City | State | Zip (postal code) | Country | |
| 208 | Billing address and billing contact person [Plan administrators will send bills for contributions to this address. Please attach a written request for alternative billing arrangements.] check if name and address same as Line 207 <input type="checkbox"/> | Company | Attn: First name | MI | Last | |
| | | Email [not for public release] | Phone () - | ext- | Fax () - | |
| | | ----- | | | | |
| | | Street1 | | | | |
| | | Street2 | | | | |
| | | Street3 | | | | |
| | | City | State | Zip (postal code) | Country | |
| 208.1 | Email address pertaining to ITSP regulatory fee issues | [not for public release] | | | | |
| Block 2-B: Agent for Service of Process | | All carriers and providers of interconnected and non-interconnected VoIP must complete Lines 209 through 213. During the year, these filers must refile Blocks 1, 2, and 6 if there are any changes in this section. See Instructions | | | | |
| 209 | D.C. Agent for Service of Process | Company | Attn: First name | MI | Last | |
| 210 | Telephone number of D.C. agent | () | - | ext - | | |
| 211 | Fax number of D.C. agent | () | - | | | |
| 212 | Email of D.C. agent | | | | | |
| 213 | Complete business address of D.C. agent for hand service of documents | Street1 | | | | |
| | | Street2 | | | | |
| | | Street3 | | | | |
| | | City | State | DC | Zip | |
| 214 | Local/alternate Agent for Service of Process (optional) | Company | Attn: First name | MI | Last | |
| 215 | Telephone number of local/alternate agent | () | - | ext - | | |
| 216 | Fax number of local/alternate agent | () | - | | | |
| 217 | Email of local/alternate agent | | | | | |
| 218 | Complete business address of local/alternate agent for hand service of documents | Street1 | | | | |
| | | Street2 | | | | |
| | | City | State | Zip (postal code) | Country | |

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. § 1001

Page 2 Information Collected

- Form Preparer Contact
- Company Contact
- Billing Contact
- DC Agent
 - ✓ Required for carriers and VoIP providers
 - ✓ Must be a DC address

Paper Form 499

Page 3 Information Collected

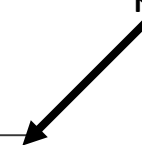
- Company Officer
- Jurisdictions
- The date the company started providing telecom or VoIP services

| 2018 FCC Form 499-A Telecommunications Reporting Worksheet (Reporting 2017 Revenues) | | | | | Page 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|---|--|----------------------------------|-------------------------------|--|-----------------------------------|------------------------------------|---------------------------------|---------------------------------|-----------------------------------|---|--------------------------------|---|--------------------------------|---------------------------------------|---------------------------------------|-------------------------------|----------------------------------|-----------------------------------|------------------------------------|---|--|-----------------------------------|----------------------------------|--------------------------------------|-------------------------------|----------------------------------|-------------------------------------|-------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|---|----------------------------------|---------------------------------|--------------------------------------|--------------------------------------|---------------------------------|-----------------------------------|---------------------------------------|-------------------------------------|-----------------------------------|-----------------------------------|---------------------------------|--------------------------------------|--|---|------------------------------------|--|---------------------------------------|------------------------------------|----------------------------------|--------------------------------|-------------------------------------|---|----------------------------------|----------------------------------|-----------------------------------|-------------------------------------|---------------------------------------|--|
| Block 2-C: FCC Registration and Contact Information | | Filers must refile Blocks 1, 2 and 6 if there are any changes in this section. See Instructions. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 219 | Filer 499 ID [from Line 101] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 220 | Legal name of filer [from Line 102] | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 221 | Chief Executive Officer (or, highest ranking company officer if the filer does not have a chief executive officer) | First | MI | Last | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 222 | Business address of individual named on Line 221 check if same as Line 109 <input type="checkbox"/> | Street1 Street2 Street3 City | State | Zip (postal code) Country | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 223 | Second ranking company officer, such as Chairman (Must be someone other than the individual listed on Line 221) | First | MI | Last | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 224 | Business address of individual named on Line 223 check if same as Line 109 <input type="checkbox"/> | Street1 Street2 Street3 City | State | Zip (postal code) Country | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 225 | Third ranking company officer, such as President or Secretary (Must be someone other than individuals listed on Lines 221 and 223) | First | MI | Last | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 226 | Business address of individual named on Line 225 check if same as Line 109 <input type="checkbox"/> | Street1 Street2 Street3 City | State | Zip (postal code) Country | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 227 | Indicate jurisdictions in which the filer provides service. Include jurisdictions in which service was provided in the past 15 months and jurisdictions in which service is likely to be provided in the next 12 months. <table border="0"><tr><td><input type="checkbox"/> Alabama</td><td><input type="checkbox"/> Guam</td><td><input type="checkbox"/> Massachusetts</td><td><input type="checkbox"/> New York</td><td><input type="checkbox"/> Tennessee</td></tr><tr><td><input type="checkbox"/> Alaska</td><td><input type="checkbox"/> Hawaii</td><td><input type="checkbox"/> Michigan</td><td><input type="checkbox"/> North Carolina</td><td><input type="checkbox"/> Texas</td></tr><tr><td><input type="checkbox"/> American Samoa</td><td><input type="checkbox"/> Idaho</td><td><input type="checkbox"/> Midway Atoll</td><td><input type="checkbox"/> North Dakota</td><td><input type="checkbox"/> Utah</td></tr><tr><td><input type="checkbox"/> Arizona</td><td><input type="checkbox"/> Illinois</td><td><input type="checkbox"/> Minnesota</td><td><input type="checkbox"/> Northern Mariana Islands</td><td><input type="checkbox"/> U.S. Virgin Islands</td></tr><tr><td><input type="checkbox"/> Arkansas</td><td><input type="checkbox"/> Indiana</td><td><input type="checkbox"/> Mississippi</td><td><input type="checkbox"/> Ohio</td><td><input type="checkbox"/> Vermont</td></tr><tr><td><input type="checkbox"/> California</td><td><input type="checkbox"/> Iowa</td><td><input type="checkbox"/> Missouri</td><td><input type="checkbox"/> Oklahoma</td><td><input type="checkbox"/> Virginia</td></tr><tr><td><input type="checkbox"/> Colorado</td><td><input type="checkbox"/> Johnston Atoll</td><td><input type="checkbox"/> Montana</td><td><input type="checkbox"/> Oregon</td><td><input type="checkbox"/> Wake Island</td></tr><tr><td><input type="checkbox"/> Connecticut</td><td><input type="checkbox"/> Kansas</td><td><input type="checkbox"/> Nebraska</td><td><input type="checkbox"/> Pennsylvania</td><td><input type="checkbox"/> Washington</td></tr><tr><td><input type="checkbox"/> Delaware</td><td><input type="checkbox"/> Kentucky</td><td><input type="checkbox"/> Nevada</td><td><input type="checkbox"/> Puerto Rico</td><td><input type="checkbox"/> West Virginia</td></tr><tr><td><input type="checkbox"/> District of Columbia</td><td><input type="checkbox"/> Louisiana</td><td><input type="checkbox"/> New Hampshire</td><td><input type="checkbox"/> Rhode Island</td><td><input type="checkbox"/> Wisconsin</td></tr><tr><td><input type="checkbox"/> Florida</td><td><input type="checkbox"/> Maine</td><td><input type="checkbox"/> New Jersey</td><td><input type="checkbox"/> South Carolina</td><td><input type="checkbox"/> Wyoming</td></tr><tr><td><input type="checkbox"/> Georgia</td><td><input type="checkbox"/> Maryland</td><td><input type="checkbox"/> New Mexico</td><td><input type="checkbox"/> South Dakota</td><td></td></tr></table> | | | | <input type="checkbox"/> Alabama | <input type="checkbox"/> Guam | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee | <input type="checkbox"/> Alaska | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Michigan | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas | <input type="checkbox"/> American Samoa | <input type="checkbox"/> Idaho | <input type="checkbox"/> Midway Atoll | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah | <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> Northern Mariana Islands | <input type="checkbox"/> U.S. Virgin Islands | <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont | <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia | <input type="checkbox"/> Colorado | <input type="checkbox"/> Johnston Atoll | <input type="checkbox"/> Montana | <input type="checkbox"/> Oregon | <input type="checkbox"/> Wake Island | <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kansas | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> Washington | <input type="checkbox"/> Delaware | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nevada | <input type="checkbox"/> Puerto Rico | <input type="checkbox"/> West Virginia | <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Louisiana | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin | <input type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming | <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota | |
| <input type="checkbox"/> Alabama | <input type="checkbox"/> Guam | <input type="checkbox"/> Massachusetts | <input type="checkbox"/> New York | <input type="checkbox"/> Tennessee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Alaska | <input type="checkbox"/> Hawaii | <input type="checkbox"/> Michigan | <input type="checkbox"/> North Carolina | <input type="checkbox"/> Texas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> American Samoa | <input type="checkbox"/> Idaho | <input type="checkbox"/> Midway Atoll | <input type="checkbox"/> North Dakota | <input type="checkbox"/> Utah | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Arizona | <input type="checkbox"/> Illinois | <input type="checkbox"/> Minnesota | <input type="checkbox"/> Northern Mariana Islands | <input type="checkbox"/> U.S. Virgin Islands | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Arkansas | <input type="checkbox"/> Indiana | <input type="checkbox"/> Mississippi | <input type="checkbox"/> Ohio | <input type="checkbox"/> Vermont | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> California | <input type="checkbox"/> Iowa | <input type="checkbox"/> Missouri | <input type="checkbox"/> Oklahoma | <input type="checkbox"/> Virginia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Colorado | <input type="checkbox"/> Johnston Atoll | <input type="checkbox"/> Montana | <input type="checkbox"/> Oregon | <input type="checkbox"/> Wake Island | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Connecticut | <input type="checkbox"/> Kansas | <input type="checkbox"/> Nebraska | <input type="checkbox"/> Pennsylvania | <input type="checkbox"/> Washington | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Kentucky | <input type="checkbox"/> Nevada | <input type="checkbox"/> Puerto Rico | <input type="checkbox"/> West Virginia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> District of Columbia | <input type="checkbox"/> Louisiana | <input type="checkbox"/> New Hampshire | <input type="checkbox"/> Rhode Island | <input type="checkbox"/> Wisconsin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Florida | <input type="checkbox"/> Maine | <input type="checkbox"/> New Jersey | <input type="checkbox"/> South Carolina | <input type="checkbox"/> Wyoming | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Georgia | <input type="checkbox"/> Maryland | <input type="checkbox"/> New Mexico | <input type="checkbox"/> South Dakota | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 228 | Year and month filer first provided (or expects to provide) telecommunications in the U.S. | <input type="checkbox"/> Check if prior to 1/1/1999, otherwise: | Year | Month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

PERSONS MAKING WILLFUL FALSE STATEMENTS IN THE WORKSHEET CAN BE PUNISHED BY FINE OR IMPRISONMENT UNDER TITLE 18 OF THE UNITED STATES CODE, 18 U.S.C. § 1001

Year the filer started providing telecommunications.

This date can be in the past.



499 ID Registration Information

Information to have prior to starting your 499 ID Registration

- FCC Registration Number (FRN)
 - You can register with the FCC here:
<https://www.fcc.gov/licensing-databases/fcc-registration-commission-registration-system>
 - The information you enter on your 499 registration Form MUST MATCH the information associated with your FRN in the FCC's CORES system
- All carriers and VoIP providers registering for a 499 Filer ID must identify a “**DC Agent for Service of Process**”. The physical location address of the DC Agent must be in “Washington, DC” as well as having a DC-based area code.
- Registration consists of completing a Form 499-A, with only the administrative information. No revenue information required for initial registration.
- You can save partially completed 499-A forms for up to 30 days, prior to “officially” submitting it to USAC.

Form 499 – Registration

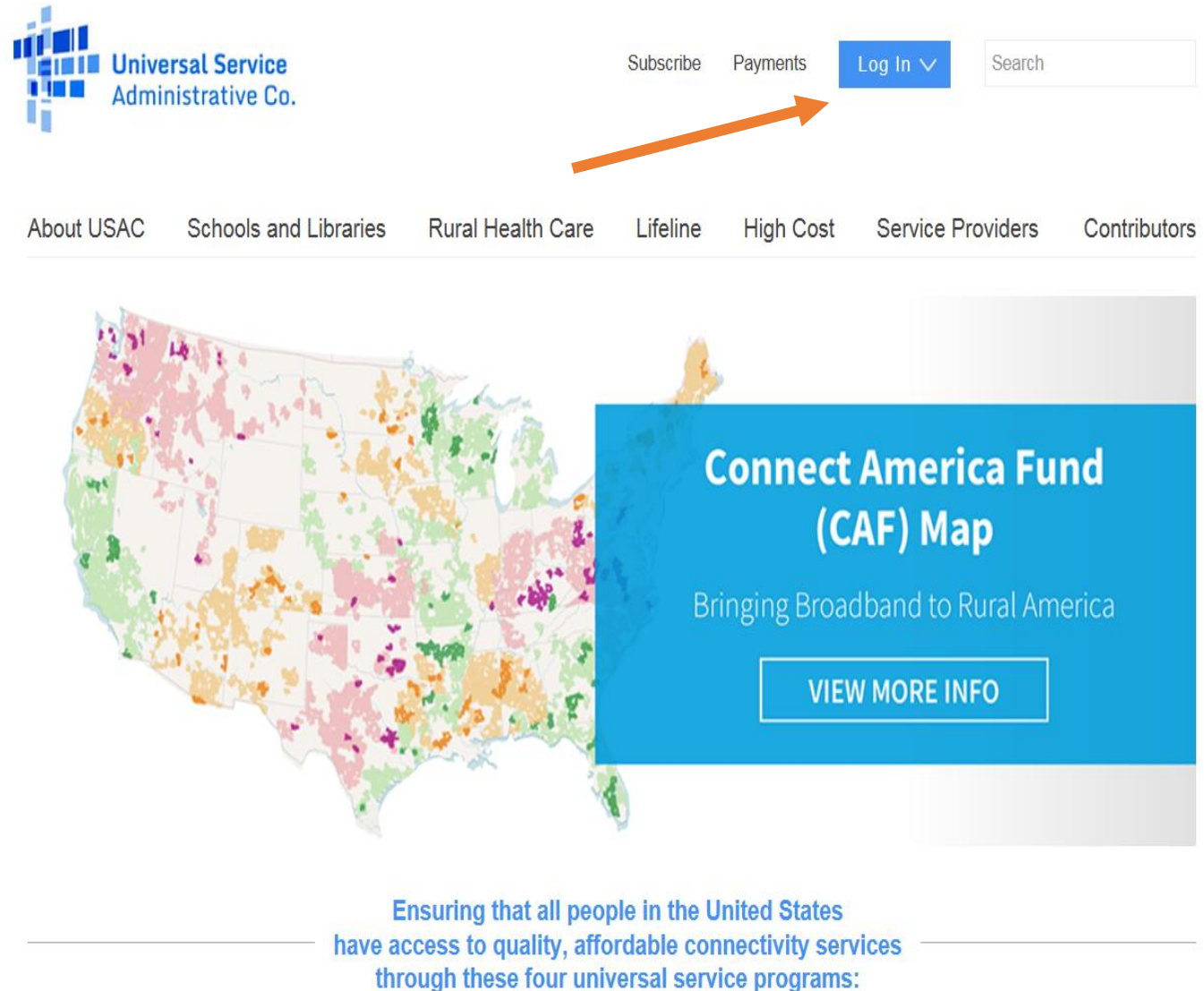
Start by going to the USAC home page

www.usac.org

Find the blue “Log In” button at the top of the page.

Select “E-File” from the drop down menu.

Registration is completed on-line. No paper copies accepted.



Universal Service Administrative Co.

Subscribe Payments Log In Search

About USAC Schools and Libraries Rural Health Care Lifeline High Cost Service Providers Contributors

Connect America Fund (CAF) Map

Bringing Broadband to Rural America

[VIEW MORE INFO](#)

Ensuring that all people in the United States have access to quality, affordable connectivity services through these four universal service programs:

Form 499 – Online Registration

E-FILE SIGN IN

User ID (Email Address): *

Password: *

[Forgot password?](#)

IMPORTANT SYSTEM NOTICE - This system is the property of the Universal Service Administrative Company (USAC) and is to be used to assist individuals with managing their entity's involvement in federal universal service programs. This system may be accessed by authorized users only. By logging in, the user represents himself or herself as an authorized user. This system is monitored, recorded and subject to audit. Any unauthorized use or misuse of this system is strictly prohibited and subject to legal action, including criminal prosecution and civil penalties. Use of this system indicates acceptance of these terms and system monitoring and recording.

☐ Click the box to accept. *

If you experience any issue logging in, please make sure

- Visit <https://forms.universalservice.org> without any suffix.
- If the above doesn't work, please clear your browser cache and try again.

Login

Reset

New users, please select from the options below:

- New Service Provider
- Add FCC Form 498 Company Officer
- **New Contributor/Registration In Progress**
- Add FCC Form 499 Company Officer
- New RHC Applicant



SCROLL to the bottom of the page to find the selection '**New Contributor/Registration in Progress**'.

499 ID Registration Process

1. Submit an FCC Form 499-A with USAC through E-File
 - For registration purposes, you will not be required to enter revenue information.
2. Filer will have the opportunity to Save before submitting
3. New registration must be completed within 30 days
4. USAC will review form within 72 business hours
5. If the reviewer has any questions, they will be sent via email from 'Form499@usac.org'.

Form 499 – Online Registration



E-FILE

[USAC Home](#) |

DOCUMENTS

[Form 499-A Instructions](#)

GETTING STARTED

[Returning Users – Log in using EIN](#)

Welcome, new filers!

Before You Register with USAC

You must first select some services that your company will be offering.

List of Services

Access points used in a local area network (LAN)
Antennas, cabling, connectors, and related comp
Asynchronous Transfer Mode (ATM)
Broadband over Power Lines
Cable Modem
Caching
Cellular, personal communications service (PCS)
Centrex
Coaxial cable provider
Competitive access provider (CAP)

Selected Services



[Continue](#)

Select the telecommunications services your company provides by moving them from the box on the left over to the box on the right.

Form 499 – Online Registration



E-FILE

[USAC Home](#)

DOCUMENTS

[Form 499-A Instructions](#)

FILER REGISTRATION LOG IN—ENTER EIN













Please enter your company's IRS Employee Identification Number (EIN) to get started.

Enter the EIN or tax ID number

Continue

CONTRIBUTOR IDENTIFICATION INFORMATION

 In this section, please provide the following identification information.

| | | |
|--|---|--|
| Legal Name |  | <input type="text" value="Test Company"/> |
| IRS Employer Identification Number |  | <input type="text" value="99-0000000"/> |
| Name Filer is Doing Business as (DBA) |  | <input type="text" value="The Best Test"/> |
| Management Company |  | <input type="text" value="Test Management"/> |
| FCC Registration Numbers |  | <div><input type="text" value="002577067"/> <input type="text" value=""/> </div> |
| Trade Names |  | <input type="text" value=""/>  |
| Corporate Headquarters Mailing Address |  | |
| Do you want to enter foreign address? | <div><input type="radio"/> Yes <input checked="" type="radio"/> No</div> | |
| <input type="text" value="700 12th Street NW"/> | | <input type="text" value="Washington"/> |
| <input type="text" value="Suite 900"/> | <div>DC </div> | <div><input type="text" value="20005"/></div> |
| <input type="text" value="Street Address Line 3"/> | | <div>United States</div> |

Form 499 – Online Registration

Page requiring main company identification details.

Please include all trade names used.

Save & Return to Summary

Save & Continue

Save & Close

Form 499 – Online Registration

CONTACT INFORMATION FOR CUSTOMER INQUIRIES

Please enter Company Information for customer inquiries and complaints.

Error! The following information must be corrected before saving:

- The phone number is either missing or invalid. Please provide a valid 10-digit phone number. For toll-free numbers, exclude the '1' and include dashes in the following format: xxx-xxx-xxxx.
- The first line of the street address is missing or invalid.
- The city is missing. Please provide the name of the city.
- The state or territory is missing or invalid. Please provide a valid state or territory. For foreign addresses you may enter state information in the third street address field.
- The postal code is missing or invalid. Please provide a 5-digit, numeric postal code.

Telephone Number for Customer Inquiries and Complaints



xxx-xxx-xxxx

ext

Business Address for Customer Inquiries and Complaints



☐ Same as corporate headquarters address

Do you want to enter foreign address?

☐ Yes

☒ No

Street, P.O. Box, Company name, c/o

City

Apartment, Suite, Unit, Building, floor etc.



Postal code

Street Address Line 3

United States

Online form will prompt the user if any information is missing or entered in an incorrect format; highlighting fields with errors and displaying error messages in a red box.

Several more entry screens of different contact information is required; form preparer, company officers, billing contact, DC Agent for Process.

Form 499 – Online Registration



E-FILE

NEW FILER REGISTRATION COMPLETE



Thank you for completing New Filer Registration. USAC will review your information to make sure everything is correct.

Within two business days, USAC will issue your Filer ID via email to the FCC Form 499 Preparer and Company Officer. The Company Officer will also receive information about using E-File, including how to log in, establish users, and manage FCC Forms 499-A/Q.

If you have any questions, please call USAC Customer Operations at (888) 641-8722.

[Return to Home Page](#)

Upon completion of all required contact information, the system will prompt you to review the form.

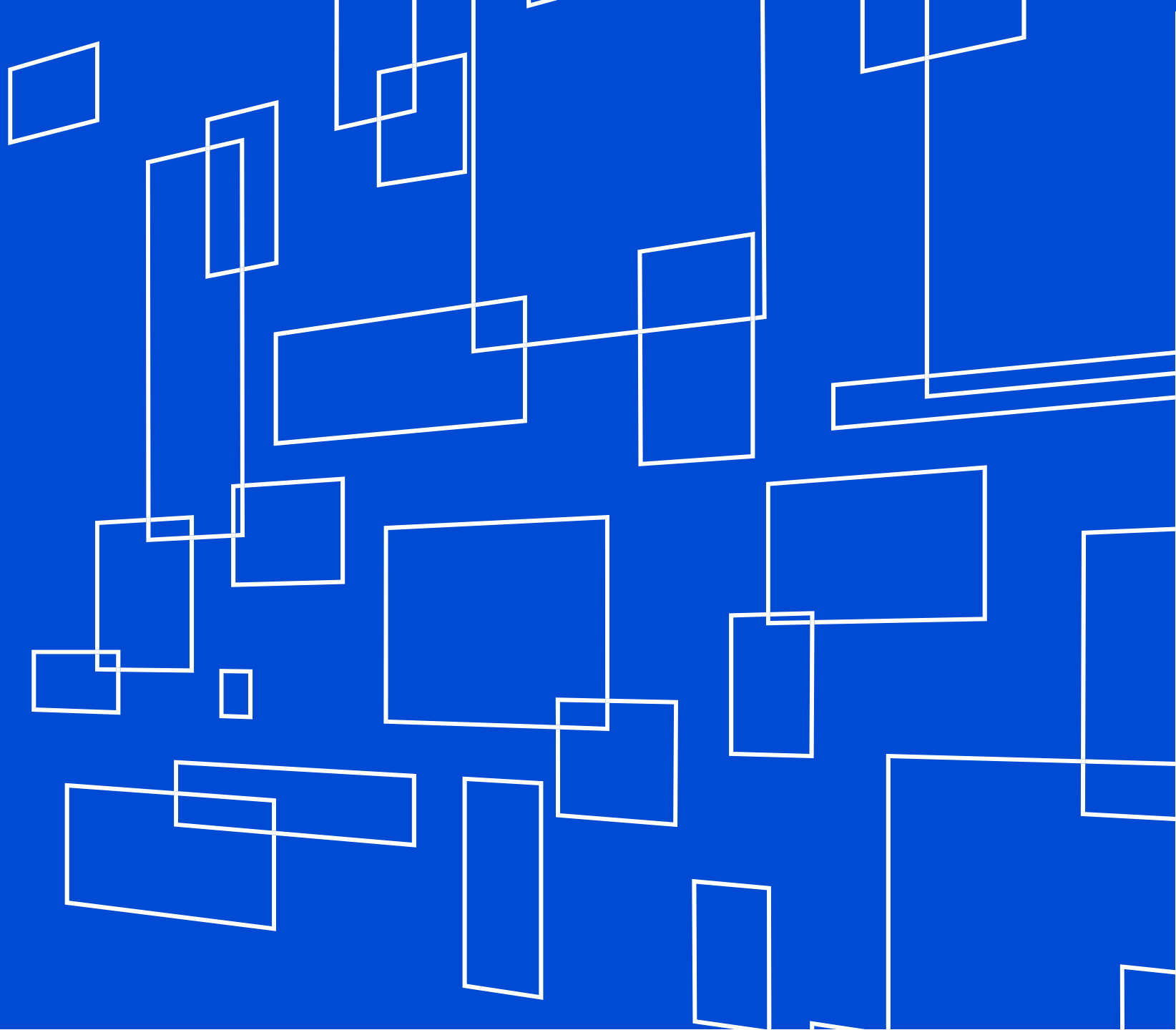
A pop up window will display a .pdf version of the form with the data input.

Certify to submit the form to USAC and this screen will appear upon successful submission.

499 ID Registration – Next Steps

1. Upon USAC approval – 2 emails will be sent to Company Officer
 - Assignment of 499 ID & Required 499 filings (both Quarterly and Annual)
 - Company Officer User ID setup
2. The Company Officer should set up authorized users in E-File (Form Preparers or persons responsible for paying contributor invoices)
3. [Make a note of the filing deadlines!](#)
 - 1st day of February, May, August and November (Form 499-Q)
 - April 1st (Form 499-A)

Questions ?



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FCC Form 498



Register for a New 498 ID

| | |
|--|---|
| Register for a New 498 ID★ 3:28 minutes November 2018 | Add or Remove 498 User as Company Officer 2:39 minutes December 2015 |
| Update Banking Info as a Company Officer 1:45 minutes November 2015 | Revise an FCC Form 498 as a General Contact 2:52 minutes September 2015 |
| Revise an FCC Form 498 as a Company Officer 2:45 minutes September 2015 | Request a 498 ID Deactivation as a Company Officer 2:44 minutes September 2015 |
| Overview of FCC Form 498 5:53 minutes August 2013 | |

Upcoming Webinar Training

Service Providers New to USAC

499-Q Basics will be repeated quarterly

498/499 ID Basics for Service Providers (also repeated quarterly)

Sign up through our “Trainings & Outreach” webpage!

Service Providers -> Trainings & Outreach -> Upcoming Events

<https://www.usac.org/cont/about/outreach/training/2019-Webinars.aspx>

For More Assistance

- ✓ Call Customer Support Phone: (888) 641-8722, Option 4
Hours: Monday-Friday 9 AM to 5 PM ET
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