

**FCC Form 481 - Carrier Annual Reporting
Data Collection Form**

FCC Form 481

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

July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name: Person USAC should contact with questions about this data	Alex Rasor
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address: Email of the person identified in data line <030>	regulatoryaffairs@truconnect.com
	Form Type	54.422

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

[illegible]

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	
<410>	Complaints per 1000 customers for fixed voice	
<420>	Complaints per 1000 customers for mobile voice	

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com
<515>	Certify compliance with applicable minimum service standards	

(600) Functionality in Emergency Situations Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
---	---

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com
<600>	Certify compliance regarding ability to function in emergency situations	
<610>	Descriptive document for Functionality in Emergency Situations	

(800) Operating Companies Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
---	---

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com
<810>	Reporting Carrier	TruConnect Communications, Inc.
<811>	Holding Company	TSC Acquisition Corporation
<812>	Operating Company	TruConnect Communications, Inc.

[illegible]

**(900) Tribal Lands Reporting
Data Collection Form**
**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018**

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

<900> Does the filing entity offer tribal land services? (Y/N)

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

<920> Tribal Government Engagement Obligation

Name of Attached Document

If your company serves Tribal lands, please select (Yes, No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(5) includes:

- <921> Needs assessment and deployment planning with a focus on Tribal community anchor institutions.
- <922> Feasibility and sustainability planning;
- <923> Marketing services in a culturally sensitive manner;
- <924> Compliance with Rights of way processes
- <925> Compliance with Land Use permitting requirements
- <926> Compliance with Facilities Siting rules
- <927> Compliance with Environmental Review processes
- <928> Compliance with Cultural Preservation review processes
- <929> Compliance with Tribal Business and Licensing requirements.

Select Yes or No or Not Applicable

**(1000) Voice and Broadband Service Rate Comparability
Data Collection Form**

FCC Form 481

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

July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

<1000> Voice services rate comparability certification

<1010> Attach detailed description for voice services rate comparability compliance

Name of Attached Document

<1020> Broadband comparability certification

<1030> Attach detailed description for broadband comparability compliance

Name of Attached Document

**(1100) No Terrestrial Backhaul Reporting
Data Collection Form**
**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018**

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

<1100> Certify whether terrestrial backhaul options exist (Y/N)

<1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).

<1140> Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.

(1200) Terms and Condition for Lifeline Customers
Lifeline
Data Collection Form

FCC Form 481
 OMB Control No. 3060-0986/OMB Control No. 3060-0819
 July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

Schedule of Rates.pdf

<1210> Terms & Conditions of Voice Telephony Lifeline Plans

Name of Attached Document

<1220> Link to Public Website

HTTP

"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:

- | | | |
|--------|---|-------------------------------------|
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | <input checked="" type="checkbox"/> |
| <1222> | Details on the number of minutes provided as part of the plan, | <input checked="" type="checkbox"/> |
| <1223> | Additional charges for toll calls, and rates for each such plan. | <input checked="" type="checkbox"/> |

(2005) Price Cap Carrier Additional Documentation

FCC Form 481

Data Collection Form

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

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

July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR 54.313(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

<2015> 2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)

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

<2016> Certification support used to build broadband

Connect America Phase II Reporting {47 CFR § 54.313(e)}

<2017A> Connect America Fund Phase II recipient?

<2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2017.

<2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)

Name of Attached Document Listing
Required Information

<2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)

(3005) Rate Of Return Carrier Additional Documentation
Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

CAF BLS Reporting

- (3008A) Please indicate whether new locations were deployed during the prior calendar year. (Yes/No)
- (3008B) Please enter the number of new locations deployed in the prior calendar year associated with each of the following speed tiers.
- (3008B1) Number of newly built locations with access to broadband speeds of at least 10/1 Mbps but less than 25/3 Mbps.
- (3008B2) Number of newly built locations with access to broadband speeds of 25/3 Mbps or higher.
- (3008C) Please provide the percentage of deployment across the entire study area.

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	<input type="text"/>
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}		
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	<input type="text"/>
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<input type="radio"/> <input type="radio"/>
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	<input type="radio"/> <input type="radio"/>
	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		<input type="checkbox"/>
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached Document Listing Required Information	<input type="text"/>
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	<input type="radio"/> <input type="radio"/>
	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		
(3019)	Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.		<input type="checkbox"/>
	If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		<input type="checkbox"/>
(3023)	Underlying information subjected to a review by an independent certified public accountant		<input type="checkbox"/>
(3024)	Underlying information subjected to an officer certification.		<input type="checkbox"/>
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		<input type="checkbox"/>
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	<input type="text"/>

(3005) Rate Of Return Carrier Additional Documentation (Continued)

FCC Form 481

Data Collection Form

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

July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
--	---

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

4005 Rural Broadband Experiment

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

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

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

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

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

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

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

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

(5005) Alaska Plan Participants Additional Documentation Data Collection Form	FCC Form 481
	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

5005 Alaska Plan

(5010) Do you participate in the Alaska plan? (Yes/No)

(5011)	Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.	(Yes/No)
--------	---	----------

(5012)	If the filing carrier identified in its approved performance plans that it relies exclusively on satellite backhaul for a certain portion of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas that were previously served exclusively by satellite backhaul.	(Yes/No)
--------	--	----------

[illegible]

**Certification - Reporting Carrier
Data Collection Form**
**FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018**

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

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

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients	
I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
---	--

<010> Study Area Code	549011
<015> Study Area Name	TruConnect Communications Inc.
<020> Program Year	2019
<030> Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035> Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039> Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) <u>Expert Telecom Compliance</u> is authorized to submit the information reported on behalf of the reporting carrier. I also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.	
Name of Authorized Agent:	Expert Telecom Compliance
Name of Reporting Carrier:	TruConnect Communications Inc.
Signature of Authorized Officer:	CERTIFIED ONLINE Date: 07/06/2018
Printed name of Authorized Officer:	Nathan Johnson
Title or position of Authorized Officer:	Co-CEO
Telephone number of Authorized Officer:	3109951417 ext.
Study Area Code of Reporting Carrier:	549011 Filing Due Date for this form: 07/16/2018
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 AUTHORIZED AGENT:

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients on behalf of the reporting carrier; I have provided the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported herein is accurate.	
Name of Reporting Carrier:	TruConnect Communications Inc.
Name of Authorized Agent Firm:	Expert Telecom Compliance
Signature of Authorized Agent or Employee of Agent:	CERTIFIED ONLINE Date: 07/05/2018
Name of Authorized Agent Employee:	Victoria Martin
Title or position of Authorized Agent or Employee of Agent	Regulatory Specialist
Telephone number of Authorized Agent or Employee of Agent:	6786722831 ext.
Study Area Code of Reporting Carrier:	549011 Filing Due Date for this form: 07/16/2018
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.	

Attachments

(800) Operating Companies
Data Collection Form

FCC Form 481
OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018

<010>	Study Area Code	549011
<015>	Study Area Name	TruConnect Communications Inc.
<020>	Program Year	2019
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	regulatoryaffairs@truconnect.com
<810>	Reporting Carrier	TruConnect Communications, Inc.
<811>	Holding Company	TSC Acquisition Corporation
<812>	Operating Company	TruConnect Communications, Inc.

<813>	<a1>	<a2>	<a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	Sage Telecom Communications, LLC	409037	TruConnect
	Sage Telecom Communications, LLC	469028	TruConnect
	Sage Telecom Communications, LLC	229028	TruConnect
	Sage Telecom Communications, LLC	359145	TruConnect
	Sage Telecom Communications, LLC	329024	TruConnect
	Sage Telecom Communications, LLC	419036	TruConnect
	Sage Telecom Communications, LLC	419006	TruConnect
	Sage Telecom Communications, LLC	269048	TruConnect
	Sage Telecom Communications, LLC	279052	TruConnect
	Sage Telecom Communications, LLC	189032	TruConnect
	Sage Telecom Communications, LLC	319041	TruConnect
	Sage Telecom Communications, LLC	369034	TruConnect
	Sage Telecom Communications, LLC	429032	TruConnect
	Sage Telecom Communications, LLC	379030	TruConnect
	Sage Telecom Communications, LLC	559024	TruConnect
	Sage Telecom Communications, LLC	309021	TruConnect
	Sage Telecom Communications, LLC	439060	TruConnect
	Sage Telecom Communications, LLC	439002	TruConnect
	Sage Telecom Communications, LLC	179027	TruConnect
	Sage Telecom Communications, LLC	249030	TruConnect
	Sage Telecom Communications, LLC	449082	TruConnect
	Sage Telecom Communications, LLC	449010	TruConnect
	Sage Telecom Communications, LLC	339042	TruConnect

(800) Operating Companies Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
---	--

OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2018

[illegible]

SCHEDULE OF RATES AND CHARGES
FEATURES AVAILABLE TO TRUCONNECT'S PREPAID WIRELESS PLANS

Service/Feature Name	Service/Feature Definition	Regular Service / Feature Rate and Charge	Service/Feature Restrictions
Call Waiting	A feature that alerts you to an incoming call while you're on a call and allows you to switch between the two calls.	\$0.00	None
Call Forwarding	A feature whereby all calls to your mobile phone number redirect automatically to another number that you designate.	\$0.00	None
Voicemail	A feature that lets a caller to leave a message or access other available options if a line is busy or not answered.	\$0.00	None
Toll Blocking	A feature to limit toll spending thresholds on plans that are not unlimited.	\$0.00	None
International Long Distance (ILD) Blocking	A feature where outbound calls are blocked to international destinations.	\$0.00	None
900 / 976 Call Block	A feature where outbound calls are blocked to 900 and 976 numbers.	\$0.00	None
Local Calls	Any call, text message or other connection made to a location in your local calling area.	\$0.00	None
Long Distance	Any call, text message or other connection made to a location outside your local calling area.	\$0.00	None
211 - State Information	State information service.	\$0.00	None
311 - Government Information	Non-emergency government service information.	\$0.00	None

SCHEDULE OF RATES AND CHARGES
FEATURES AVAILABLE TO TRUCONNECT'S PREPAID WIRELESS PLANS (continued)

411 - Directory Services	411 gives you access to telephone numbers and addresses of business, government, and residential listings.	\$0.00	Note: Limited to 5 (five) 411-Directory Assistance per month
511 - Transportation Information	Non-emergency government service information.	\$0.00	None
611 - Customer and Repair Service	Customer service and repair information.	\$0.00	None
711 - TRS Relay Access	FCC adopted use of the 711 dialing code for access to Telecommunications Relay Services (TRS).	\$0.00	None
811 - Call Before You Dig (CBUD) Information	CBUD information to protect pipes.	\$0.00	None
911 - Emergency Services	Emergency call number based on location information available.	\$0.00	None
0 - Operator Services Live	Live Operator	\$0.00	None
0 - Operator Services Automated	Automated Operator	\$0.00	None
0 - Operator Services Person-to-Person	Person-to-Person Operator Assisted	\$0.00	None
Deaf / Disabled Service	Second line available to deaf and disabled Lifeline Subscribers.	\$0.00	Note: Available to qualified deaf or disabled CA Lifeline Subscribers. Second line only eligible for CA Lifeline subsidy.
Activation Fee (applies to all retail and e-commerce prepaid mobile plans)	A charge to activate service	\$39.00	A one-time activation fee of \$39.00 will be charged to all new or transferred accounts.

Activation Fee (TruConnect Discounted)	A charge to activate service	\$0.00	A one-time activation fee of \$39.00 will be charged to all new or transferred accounts. The California LifeLine Fund will pay for no more than two activation fees per year per eligible LifeLine household. If the LifeLine household is not eligible to receive the \$39.00 activation fee from the California Lifeline Fund, TruConnect will use its own funds to credit the activation fee.
---	------------------------------	--------	--

SCHEDULE OF RATES AND CHARGES
FEATURES AVAILABLE TO TRUCONNECT'S PREPAID WIRELESS PLANS (continued)

Plan	Plan Includes	Regular Plan Charge	Lifeline Plan Charge¹	Additional Charges	California LifeLine Eligible
Unbundled Plan Unlimited Talk & Text	Unlimited Talk & Text	\$24.00	\$0.00	\$0.01 per MB additional data	Eligible
Unlimited Talk & Text Plus 1 GB Data	Unlimited Talk & Text 1 GB Data	\$24.00	\$0.00	\$0.01 per MB additional data	Eligible
Unlimited Talk & Text Plus 1.5 GB Data	Unlimited Talk & Text 1.5 GB Data	\$25.00	\$1.00	\$0.01 per MB additional data	Eligible
Unlimited Talk & Text Plus 3 GB Data	Unlimited Talk & Text 3 GB Data	\$35.00	\$11.00	\$0.01 per MB additional data	Eligible
Unlimited Talk & Text Plus 5 GB Data	Unlimited Talk & Text 5 GB Data	\$45.00	\$21.00	\$0.01 per MB additional data	Eligible

¹ Reflects plan charge after California LifeLine subsidy, federal Lifeline subsidy, and any additional Company discounts are applied.