

ELECTRONICALLY FILED

September 13, 2016

Secretary of the Commission Public Utilities Commission of Ohio 180 East Broad Street Columbus, Ohio 43215

Re: Sage Telecom Communications, LLC Copy of FCC Form 481 Filling Study Area Code 309021 (Ohio): Docket No. 16-1116-TP-COI

To Whom It May Concern:

Enclosed, pursuant to FCC Rule § 54.422 (c), is a copy of Sage Telecom Communications, LLC's FCC Form 481 submission to the Universal Service Administrative Company and the Federal Communications Commission with respect to Lifeline services in Ohio.

If you have any questions regarding this correspondence, please contact me at (214) 495-4723 or cmilligan@truconnect.com.

Respectfully,

Cassandra Milligan **Regulatory Affairs** Sage Telecom Communications, LLC

Enclosures

FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2017	
<030>	Contact Name: Person USAC should contact with questions about this data	Nathaniel Law	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2133795144 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	nlaw@truconnect.com	
	Form Type	54.422	

(4.00) 0	O. Italian I.		500 5 404
-	ervice Quality Improvement Reporting		FCC Form 481
Data C	ollection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
			3017 2013
<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com	
<110>	Has your company received its ETC certification from the FCC?	(yes / no) O	
<u> </u>	If your answer to Line <110> is yes, do you have an existing §54.202(a) "5	(yes/110)	
<111>	year plan" filed with the FCC?	(yes / no) O O	
	7	(7557 1157	
	If your answer to Line <111> is yes, please file a progress report, on line		
	<112> delineating the status of your company's existing § 54.202(a) "5 year		
	plan" on file with the FCC, as it relates to your provision of voice telephony		
	service.		
<112>	Attach Five-Year Service Quality Improvement Plan or, in subsequent years,		
1112	your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your	company is a	
	CETC which only receives frozen support, your progress report is only		
	required to address voice telephony service.		
			A 1 £ A 11 11
	Please select the appropriate responses below (Yes, No, Not		
	Applicable) to confirm that the attached document(s), on line 112, contains a progress		
	report on its five-year		
	service quality improvement plan pursuant to 854 202(a). The		
<113>	Maps detailing progress towards meeting plan targets		
<114>	Report how much universal service (USF) support was received		
<115>	How much (USF) was used to improve service quality and how	support was	
<116>	How much /HCT) was used to improve comics soveress and has		
<117>	How much (LISE) was used to improve service capacity and how	/ elinnort was	
<118>	Provide an explanation of network improvement targets not met		
	in the prior calendar year.		

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com
<210>	For the prior calendar year, were there any reportable voice service or	utages?

	•	•	-			· ·						
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>

<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
NORS									Did This Outage		
Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage	Affect Multiple		
Number	Date	Time	Date	Time	Customers Affected	Total Number of	Affected	Description (Check		Service Outage	Preventative
						Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
									•		
-	1										
-	-										

• •	fulfilled Service Request lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013)819
<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law	
<035>	Contact Telephone Number - Number of person identified in data line <	030> 2133795144 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <	030> nlaw@truconnect.com	
<300> U	Infulfilled service request (voice)		
<310> [Detail on attempts (voice)		
<320>	Unfulfilled service request (broadband)	Name of Attached Document	
<330>	Detail on attempts (broadband)	Name of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should conta	act regarding this data Nathaniel Law
<035>	Contact Telephone Number - Number of p <030>	person identified in data line 2133795144 ext.
<039>	Contact Email Address - Email Address of <030>	person identified in data line nlaw@truconnect.com
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in which any facilities you own, operate, lease, or o	e telephony service in the prior ch you are designated an ETC for
<410>	Complaints per 1000 customers for fixed v	voice
<420>	Complaints per 1000 customers for mobile	e voice
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or grethe prior calendar year for each service ar an ETC for any facilities you own, operate,	eater) for broadband service in rea in which you are designated
<440>	Complaints per 1000 customers for fixed b	broadband
<450>	Complaints per 1000 customers for mobile	e broadband

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
<010>	Study Area Code	309021			
<015>	Study Area Name	Sage Telecom Communications LLC			
<020>	Program Year	2017			
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law			
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com			
<500>	<500> Certify compliance with applicable service quality standards and consumer protection rules				
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance			

Data Co	ollection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
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<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com
<600>	Certify compliance regarding ability to function in emergency situations	

FCC Form 481

(600) Functionality in Emergency Situations

<610> Descriptive document for Functionality in Emergency Situations

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	309021	
<015> Study Area Name	Sage Telecom Communications LLC	
<020> Program Year	2017	
<030> Contact Name - Person USAC should contact regarding this data	Nathaniel Law	
<035> Contact Telephone Number - Number of person identified in data	line <030> 2133795144 ext.	
<039> Contact Email Address - Email Address of person identified in data	a line <030> nlaw@truconnect.com	
<701> Residential Local Service Charge Effective Date 1/1/2016 702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
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(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code	09021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached { <i>select</i> }
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ŀ									

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		309021
<015>	Study Area Name		Sage Telecom Communications LLC
<020>	Program Year		2017
<030>	Contact Name - Person U	SAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - E	mail Address of person identified in data line <030>	nlaw@truconnect.com
<810>	Reporting Carrier	Sage Telecom Communications, LLC	
<811>	Holding Company	TSC Acquisition Corporation	
<812>	Operating Company	Sage Telecom Communications, LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	See atta	ched workshe	eet

(900) Tribal Lands Reporting Data Collection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@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	NI (A 11 L -	- J
for ea to cor line 9	nefratee coordination with the Tribal government nursuant to	Select Yes or No or	
\9Z1>	Needs assessment and deployment planning with a focus on Tribal		
<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		
	,	 	

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	pice and Broadband Service Rate Comparability	FCC Form 481
Data Col	ection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2013
<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com
<1000>	Voice services rate comparability certification	
<1010>	Attach detailed description for voice services rate	
	comparability compliance	
		Name of Attached Document
4000		
<1020>	Broadband comparability certification	
<1030>	Attach detailed description for broadband	
1030>	comparability compliance	
	compared complained	
		Name of Attached Document

-	o Terrestrial Backhaul Reporting lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to conthe reporting carrier offers broadband service of at least 1 Mbps downstream	

Lifeline	erms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
•		
<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Name of Attacked
<1220>	Link to Public Website HTTP h	ttp://www.truconnect.com/legal-terms-and-conditions-personal/
docume or the v pursua	e check these boxes below to confirm that the attached ent(s), on line 1210, website listed, on line 1220, contains the required information of to (2/4)/2) applied reporting for ETCs receiving low-income support	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2000) Price Ca	ap Carrier Additional Documentation	orm 481	
Data Collectio	n Form	ОМВ	Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate	-of-Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2	013
.040:	dv Area Code 309021		
	dy Area Code 309021 dy Area Name Sage Telecom Communi.	cations LLC	
	gram Year 2017	editions and	
	tact Name - Person USAC should contact regarding this data Nathaniel Law		
	tact Telephone Number - Number of person identified in data line <030> 2133795144 ext.		
<039> Con	tact Email Address - Email Address of person identified in data line <030> nlaw@truconnect.com		
	ppropriate responses below (Yes, No, Not Applicable) to note compliance as a reci		•
and Conne	ct America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The inform	nation reported on this form and in the docume	ents attached below is accurate.
Inc	remental Connect America Phase I reporting		
<2010>	2nd Year Certification 47 CFR § 54.313(b)(1)(i) - Note that for the July 1		
\2010 /			
	2016 certification, this applies to Round 2 recipients of Incremental		
	Support		
<2011>	3rd Year Certification 47 CFR § 54.313(b)(1)(ii) - Note that for the July 1		
	2016 certification, this applies to Round 1 recipients of Incremental		
	Support		
<2022>	Recipient certifies, representing year two after filing a notice of		
\2022>			
	acceptance of funding pursuant to 54.312(c), that the locations in		
	question are not receiving support under the Broadband Initiatives		
	Program or the Broadband Technology Opportunities Program for		
	projects that will provide broadband with speeds of at least 4		
	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only.		
.2022		r	
<2023>	The attachment on line 2024 includes a statement of the total amount of	T	
	capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census	S	
	blocks indicating where funding was spent. This covers year two -		
	54.313(b)(2)(ii). Round 2 recipients only.		
.20244			
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year	Name of Attached Document Listing	
	two - 54.313(b)(2)(ii). Round 2 recipients only.	Required Information	
<2025A>	Round 1 or Round 2 Recipient of Incremental Support?		
12025/17	The state of the s		
√202EDs	Attach googgeded Information for Dhace I milectone reports / Down d 1 for	Name of Attached Document Listing	
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 1 for	=	
	year three and Round 2 for year two) - Connect America Fund , WC	Required Information	
	Docket 10-90, Report and Order, FCC 13-		
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

(2000) Price Cap Carrier Additional Documentation (Continued) Data Collection Form Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<2016>	Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband	
	: America Phase II Reporting {47 CFR § 54.313(e)}	
<2017A>	Connect America Fund Phase II recipient?	
<2017B>	Attach information for Phase II - 54.313(e)(1) - list of geocoded locations already meeting the 54.309 public interest obligations at the end of calendar year 2015 and total amount of Phase II support, if any, the price	Name of Attached Document Listing Required Information
<2018>	cap carrier used for capital expenditures in 2015. 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)(2)(ii)	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)(2)(v)	
<2020>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 40% of its supported locations in the state on December 31, 2017 - 54.313(e)(3)	
<2021>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 60% of its supported locations in the state on December 31, 2018 - 54.313(e)(4)	
<2026>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 80% of its supported locations in the state on December 31, 2019 - 54.313(e)(5)	
<2027>	Recipient certifies that it offered broadband meeting the requisite public interest obligations specified in §54.309 to 100% of its supported locations in the state on December 31, 2020 - 54.313(e)(6)	

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309021
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<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@truconnect.com

Complete the items below to note compliance with five year service quality plan (pursuant to 47 CFR § 54.202(a)) and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 CFR § 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(2220)	Progress Report on 5 Year Plan		
(3009)	Carrier certifies to 54.313(f)(1)(iii)		
(3010A)	Milestone Certification {47 CFR § 54.313(f)(1)(i)}		
(3010B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}		
(3012B)	Please Provide Attachment	Name of Attached Document Listing Required Information	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	
(3015)	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: Electronic copy of their annual RUS reports		
(3013)	(Operating Report for Telecommunications		
(3016)	Borrowers) Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required	Name of Attached Document Listing Required Information	
(3018)	documentation If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers		
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:		
(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		
(3023)	Underlying information subjected to a review by an independent certified public accountant		
(3024)	Underlying information subjected to an officer certification.		
(3025)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		
(3026)	Attach the worksheet listing required information	Name of Attached Document Listing Required Information	

(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 2013

Coltact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of person identified in data line (330) Contact Temail Address of per	<010>	Study Area Code	309021
 Colate C Name - Person USAC should contact regarding this data Contact Name - Person USAC should contact regarding this data Nathaniel Law Contact Telephone Number - Number of person identified in data line <030> 2133795144 ext. 	<015>	Study Area Name	Sage Telecom Communications LLC
<035> Contact Telephone Number - Number of person identified in data line <030> 2133795144 ext.	<020>	Program Year	2017
Contact recipitors runned to person actuated in data line 3000	<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<0.39> Contact Fmail Address - Fmail Address of person identified in data line <0.30> nlawet reconnect from	<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
10357 Contact Entail Flouries of person dentaled in data line 10307 ITTAWWET (CONTINUED C. CONT	<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@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 2013

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
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<039>	Contact Email Address - Email Address of person identified in data I	ine <030> nlaw@truconnect.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

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 to the identified locations 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.

speed and data usage allowances available in the

relevant geographic area.

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.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

Name of Attached Document Listing Required Information

Name of Attached Document Listing Required Information

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2017
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@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: Sage Telecom Communications LLC

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/29/2016

Printed name of Authorized Officer: $^{
m Nathan}$ Johnson

Title or position of Authorized Officer: ${ t Chairman}$

Telephone number of Authorized Officer: 3106964001 ext.

Study Area Code of Reporting Carrier: 309021 Filing Due Date for this form: 07/01/2016

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	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2017	
<030>	Contact Name - Person USAC should contact regarding this data	Nathaniel Law	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2133795144 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	nlaw@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) 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:			
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.			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Ager	nt Authorized to File Annual Reports for CAF or LI Reci	pients on Behalf of Reporting Carrier		
l, 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:				
Name of Authorized Agent Firm:				
Signature of Authorized Agent or Employee of Agent:		Date:		
Name of Authorized Agent Employee:				
Title or position of Authorized Agent or Employee of Agent				
Telephone number of Authorized Agent or Employee of	Agent:			
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			
Persons willfully making false statements on this fo	rm can be punished by fine or forfeiture under the Communications Ac 18 of the United States Code, 18 U.S.C. § 1001.	t of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title		



(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		309021
<015>	Study Area Name		Sage Telecom Communications LLC
<020>	Program Year		2017
<030>	Contact Name - Person US	AC should contact regarding this data	Nathaniel Law
<035>	Contact Telephone Number	er - Number of person identified in data line <030>	2133795144 ext.
<039>	Contact Email Address - Er	mail Address of person identified in data line <030>	nlaw@truconnect.com
<810>	Reporting Carrier	Sage Telecom Communications, LLC	
<811>	Holding Company	TSC Acquisition Corporation	
<812>	Operating Company	Sage Telecom Communications, LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
:	Telscape Communications, Inc.	549013	
•	Telscape Communications, Inc.	549011	TruConnect

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Commission of Ohio Docketing Information System on

9/27/2016 5:49:58 PM

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Case No(s). 16-1116-TP-COI

Summary: Annual Report FCC Form 481 for Sage Telecom Communications, LLC. electronically filed by Cassandra Milligan on behalf of Sage Telecom Communications, LLC