FCC Foi	rm 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	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2021	
<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	
<210>	210> For the prior calendar year, were there any reportable voice service outages?		

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

NORS Reference Number Outage Start Date Time Outage End Time Date Outage End Time Outage End	_	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
Number Date Time Date Time Customers Affected Total Number of Affected Description (Check Study Areas Service Outage Preventative	Ī	NORS									Did This Outage		
Number Date Time Date Time Customers Affected Total Number of Affected Description (Check Study Areas Service Outage Preventative		Reference	Outage Start	Outage Start	Outage End	Outage End	Number of		911 Facilities	Service Outage			
								Total Number of				Service Outage	Preventative
	ŀ								(100)	ан анастъръту	(100)		
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(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 2018

<010>	Study Area Code	309021		
<015>	Study Area Name	Sage Telecom Communications LLC		
<020>	Program Year	2021		
<030>	Contact Name - Person USAC should contact	t regarding this data Alex Rasor		
<035>	Contact Telephone Number - Number of pe <030>	rson identified in data line		
<039>	Contact Email Address - Email Address of person identified in data line RegulatoryAffairs@truconnect.com <030>			
<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			

•	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 2018	
<010>	Study Area Code	309021	
<015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Program Year	2021	
<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	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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	FCC Form 481	
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010> Study Area Code	309021	
<015> Study Area Name	Sage Telecom Communications LLC	

2021

<020>

Program Year

<030>	Contact Name - Person L	JSAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Num	ber - 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	Sage Telecom Communications, LLC	
<811>	Holding Company	TSC Acquisition Corporations	
<812>	Operating Company	Sage Telecom Communications, LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	See attac	ned workshee	

(900) Tri	bal Lands Reporting	FCC Form 481	
Data Co	llection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0	819
		July 2018	
.040		309021	
<010> <015>	Study Area Name	Sage Telecom Communications LLC	
<020>	Study Area Name Program Year	2021	
<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	Manual of Aurabad	
for ea to cor demo	r company serves Tribal lands, please select (Yes,No, NA) ach these boxes of the status described on the attached PDF, on line 920, enstrates coordination with the Tribal government pursuant to 313(a)(5) includes:	Select Yes or No or	
<921>	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 Facilities string rules Compliance with Environmental Review processes		
<928>	Compliance with Cultural Preservation review processes		
<929>	Compliance with Tribal Business and Licensing requirements.		
\J_J/	Compliance with Tribal business and Electioning requirements.		

				1 466 0
(1000) V	oice and Broadband Service Rate Comparability		FCC Form 481	
Data Coll	lection Form			60-0986/OMB Control No. 3060-0819
			July 2018	
<010>	Study Area Code	200001		
<015>		309021		
	Study Area Name	Sage Telecom Communications LLC		
<020>	Program Year	2021		
<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			
1010	comparability compliance			
		Name of Attached Document		
<1020>	Broadband comparability certification			
<1030>	Attach detailed description for broadband			
	comparability compliance			
		Name of Attached Document		

	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No.	3060-0986/OMB Control No. 3060-0819
			July 2018	·
<010>	Study Area Code	309021		
<015>	Study Area Name	Sage Telecom Communications	LLC	
<020>	Program Year	2021		
<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 conthe reporting carrier offers broadband service of at least 1 Mbps downstrear			
<1140>	Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.			

Lifeline	rms and Condition for Lifeline Customers ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	
<030>	Contact Name - Person USAC should contact regarding this data	2021 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
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	Sage 1210 2020_generic.pdf
<1220>	Link to Public Website HTTP	
docume or the v pursual 8 54 42 <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.	

(2005) Price (Data Collection	Cap Carrier Additional Documentation on Form			Form 481 B Control No. 3060-0986/OMB Control No. 3060-0819
Including Rate	e-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		July	2018
<010> Stu	ıdy Area Code	309021		
	udy Area Name	Sage Telecom Communications	LLC	
<020> Pro	ogram Year	2021		
	ntact Name - Person USAC should contact regarding this data	Alex Rasor 2132862010 ext.		
	ntact Telephone Number - Number of person identified in data line <030> ntact Email Address - Email Address of person identified in data line <030>	RegulatoryAffairs@truconnect.	COM	
<0392 COI	intact Email Address - Email Address of person identified in data line \0502	RegulatoryArrarisecracomice		
to offset	e appropriate responses below (Yes, No, Not Appliaccess charge reductions, and Connect America Ph I 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 § 5	i4.313(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 capital expenditures in 2018.	carrier used for		
<2018>	Attach the number, names, and addresses of commun	nity anchor	Name of Attached Document	Listing
		stitutions to which the carrier newly began providing access to oadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)		
<2019>	Recipient certifies that it bid on category one telecomn Internet access services in response to all FCC Form 47 broadband service that meets the connectivity targets libraries universal service support program for eligible	70 postings seeking s for the schools and		
	libraries located within any area in a census block whe receiving Phase II model-based support, and that such reasonably comparable to rates charged to eligible sch urban areas for comparable offerings - 54.313(e)(1)(ii)(ere the carrier is n bids were at rates nools and libraries in		

(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	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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

(3007) Does this filing retain a Cost Consultant and/or Firm, or other Third Party to prepare financial and operations data disclosures submitted to the National Exchange Carrier Association (NECA), USAC, or the Administrator?

(3007a)	(3007b)
Name of Consultant	Name of Consultant Firm/Third Party

CAF BLS Reporting

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

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2018

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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 Docu- Information	ment Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	mornida		
(3012B)	Please Provide Attachment	Name of Attached Documents	ment Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	0 0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	0 0	
(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			
	(Operating Report for Telecommunications Borrowers)			
(3016)	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 documentation	Name of Attached Docu Information	ment Listing Required	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No)	0 0	
	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			
(3020)	Operating Report for Telecommunications Borrowers 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			
(3022)	3026 pursuant to § 54.313(f)(2), contains: 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			
(3023)	Telecommunications Borrowers Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Documents	ment Listing Required	

(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	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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 Commun.	
Financial Data Summary	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(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	FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819
		July 2018

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 2132862010 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ine <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.

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

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<030>	Contact Name - Person USAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number - Number of person identified in data line <030>	
<039>	Contact Email Address - Email Address of person identified in data line <030>	RegulatoryAffairs@truconnect.com

5005 Alaska Plan

Please indicate whether any terrestrial backhaul or other satellite backhaul became

(5011) commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.

(Yes/No)

If the filing carrier identified in its approved perfomance plans that it relies exclusively on (5012) satellite backhaul for a certain poriton of the population in its service area, indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previoius calendar year in areas that were previoiusly served exclusively by satellite backhaul.

<5013>	<a>		<c></c>
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
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(6005) Phase II Auction Reporting	FCC Form 481
Data Collection	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	April 2020

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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

<6010> Total amount of Phase II auction support, if any, the phase II Auction recipient carrier used for capital expenditures in the previous calendar year

<6011> Phase II Auction recipient performance requirements certification (Yes/No)

(7005) Phase-Down Support Reporting	FCC Form 481
Data Collection	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	April 2020

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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

<7010> Price Cap Carrier and Fixed Competitive Eligible Telecommunications Carrier Phase-Down support requirement certification

(Yes/No)

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

<010>	Study Area Code	309021
<015>	Study Area Name	Sage Telecom Communications LLC
<020>	Program Year	2021
<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: 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	309021
<015> Study Area Name	Sage Telecom Communications LLC
<020> Program Year	2021

2132862010 ext.

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 certify that (Name of Agent)				
agent; and, to the best of my knowledge, the reports and data provided to t	the authorized agent is accurate.			
Name of Authorized Agent: Expert Telecom Compliance				
Name of Reporting Carrier: Sage Telecom Communications LLC				
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 07/01/2020			
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: 309021	Filing Due Date for this form: 07/01/2020			
, ,	or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment f the United States Code, 18 U.S.C. § 1001.			

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Contact Name - Person USAC should contact regarding this data

<035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030>

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: Sage Telecom Communications LLC				
Name of Authorized Agent Firm: Expert Telecom Compliance				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/25/2020		
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: 309021 Filing Due Date for this form: 07/01/2020				
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. 18 of the United States Code, 18 U.S.C. § 1001.	§§ 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 2018

<010>	Study Area Code		309021
<015>	Study Area Name		Sage Telecom Communications LLC
<020>	O> Program Year		2021
<030>	Contact Name - Person US	SAC should contact regarding this data	Alex Rasor
<035>	Contact Telephone Number	er - Number of person identified in data line <030>	2132862010 ext.
<039>	Contact Email Address - Er	mail Address of person identified in data line <030>	RegulatoryAffairs@truconnect.com
<810>	Reporting Carrier	Sage Telecom Communications, LLC	
<811>	Holding Company	TSC Acquisition Corporations	
<812>	Operating Company	Sage Telecom Communications, LLC	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	TruConnect Communications, Inc.	549011	TruConnect
-	TruConnect Communications, Inc.	549013	TruConnect
-	TruConnect Communications, Inc.	649009	TruConnect
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Sage Telecom Communications, LLC d/b/a TruConnect

LIFELINE OFFERING EFFECTIVE 12/1/2019

Plan	Minutes	Text	Data	Net Cost to Lifeline Customer
Basic Lifeline Plan	1,000	Unlimited	3.0 GB	\$ 0.00

Plans Include:

- Free SIM card
- Free calls to Company Customer Service
- Free calls to 911 emergency services
- Free access to Voicemail, Caller-ID, Call Waiting, Call Forwarding, and 3-Way Calling
- Free Domestic Long Distance
- Data at 3G speeds or higher

Additional airtime available for purchase

Voice, Data, and International Talk refill options are maintained on the Company's website: https://www.truconnect.com/international

Complete terms and conditions available at:

https://www.truconnect.com/legal-terms-and-conditions-personal/

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Case No(s). 20-1116-TP-COI

Summary: Report Sage Telecom Communications, LLC FCC Form 481 electronically filed by Lance Steinhart on behalf of Sage Telecom Communications, LLC