FCC Foi	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	509004	
<015>	Study Area Name	TracFone Wireless Inc.	
<020>	Program Year	2023	
<030>	Contact Name: Person USAC should contact with questions about this data	Janet Morejon	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	jmorejon@tracfone.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
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

<210> For the prior calendar year, were there any reportable voice service outages? _______

<220>

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

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code 509004		
<015>	Study Area Name TracFone Wireless Inc.		
<020>	Program Year 2023		
<030>	Contact Name - Person USAC should contact regarding this data Janet Morejon		
<035>	Contact Telephone Number - Number of person identified in data line <030>		
<039>	Contact Email Address - Email Address of person identified in data line jmorejon@tracfone.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 December 2020
<010>	Study Area Code	509004	
<015>	Study Area Name	TracFone Wireless Inc.	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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 December 2020
_	<010> Study Area Code	509004	

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com
<600>	Certify compliance regarding ability to function in emergency situations	
<610>	Descriptive document for Functionality in Emergency Situations	

(800) Op	erating Companies			FCC Form 481
Data Col	lection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
				December 2020
<010>	Study Area Code		509004	
<015>	Study Area Name		TracFone Wireless Inc.	
<020>	Program Year		2023	
<030>	Contact Name - Person	USAC should contact regarding this data	Janet Morejon	
<035>	Contact Telephone Num	nber - Number of person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address -	Email Address of person identified in data line <030>	jmorejon@tracfone.com	
<810>	Reporting Carrier	TracFone Wireless Inc		
<811>	Holding Company	Verizon Communications Inc.		
<812>	Operating Company	TracFone Wireless Inc		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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=	Soo a	ttached works	heet
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(900) Tribal Lands Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020
<010> Study Area Code	509004
<015> Study Area Name	TracFone Wireless Inc.
<020> Program Year	2023
<030> Contact Name - Person USAC should contact regarding this data	Janet Morejon 3057156522 ext.
<035> Contact Telephone Number - Number of person identified in data line <030>	jmorejon@tracfone.com
<039> Contact Email Address - Email Address of person identified in data line <030>	J.1022 J0110 22 20 20 11 00 11
<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:	Select Yes or No or Not Applicable
<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	<u> </u>
<929> Compliance with Tribal Business and Licensing requirements.	

		rage o
	pice and Broadband Service Rate Comparability lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
40105	Shortly Assa Code	
<010>	Study Area Code	509004
<015> <020>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year Contact Name - Person USAC should contact regarding this data	2023
<035>	Contact Name - Person OSAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030>	Janet Morejon 3057156522 ext.
<039>	Contact Telephone Number - Number of person identified in data line <030>	jmorejon@tracfone.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
		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 December 2020
<010> <015>	Study Area Code Study Area Name	509004 TracFone Wireless Inc.	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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 upstream within the supported area pursuant to § 54.313(g).	kbps	
<1140>	Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.		

Lifeline	erms and Condition for Lifeline Customers ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
Data Con	ection i offi		Determined 2020
<010>	Study Area Code	509004	
<015>	Study Area Name	TracFone Wireless Inc.	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		
			Name of Attached Document
<1220>	Link to Public Website HTTP	www.safelink.com	
or the we	heck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report:		
<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	Cap Carrier Additional Documentation			FCC Form 481	
Data Collecti	ion Form				3060-0986/OMB Control No. 3060-0819
Including Rat	e-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			December 2020	
<010> St	udy Area Code	509004			
	udy Area Name	TracFone Wireless Inc.			
	ogram Year	2023			
	ontact Name - Person USAC should contact regarding this data	Janet Morejon			
<035> Co	intact Telephone Number - Number of person identified in data line <030>	3057156522 ext.			
<039> Co	ntact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com			
Select th	e appropriate responses below (Yes, No, Not App	licable) to note comp	pliance as a recipient of froze	n High Cost sı	upport. High Cost support
	access charge reductions, and Connect America P	•	•	•	
	in the documents attached below is accurate.	пасс п саррон ас сс		,,,(-,	on the second of
ioiiii aiic	in the documents attached below is accurate.				
<2015	> 2016 and future Frozen Support Certification 47 CFF	R § 54.313(c)(4)			
Drice Co	n Carrier Connect America ICC Support [47 CED S	E4 242/4\)			
Price Ca	p Carrier Connect America ICC Support {47 CFR §	54.313(a)}			
<2016	Certification support used to build broadband				
Connect	America Phase II Reporting (47 CFR § 54.313(e))				
	(4,7				
ر د2017۸۰	Connect America Fund Phase II recipient?				
<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 2021.				
	•				
<2018>	Attach the number, names, and addresses of commu	nity anchor	Name of Attached Docur	nent Listing	
	institutions to which the carrier newly began providing	which the carrier newly began providing access to		Required Information	
	broadband service in the preceding calendar year - 54		·		
	bioauband service in the preceding calendar year - 34	515(e)(1)(II)(A)			
Connec	t America Phase II – FCC Form 470 Postings				
2042	_				
<2019>	For the filing due July 1 following full implementation	of this requirement,			
	answer yes, no, or not applicable to this certification r	equest			

(3005) Rate	Of Return Carrier Additional Documentation ion Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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

3005) Rate (Data Collecti	Of Return Carrier Additional Documentation on Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3 December 2020	060-0819
<010>	Study Area Code		509004		
<015>	Study Area Name		TracFone Wir	celess Inc.	
<020>	Program Year		2023		
<030>	Contact Name - Person USAC should contact regarding this of	data	Janet Morejo	on	
<035>	Contact Telephone Number - Number of person identified in	n data line <030>	3057156522 ex		
<039>	Contact Email Address - Email Address of person identified i	n data line <030>	jmorejon@tra	acfone.com	
	m the drop down menu or check the boxes below to	•		·	
	eporting requirements set forth in 47 CFR 54.313(f) below is accurate.	(2). Hurther cer	tily that the information	reported on this form and in the documen	its
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)}				
010B)	Please Provide Attachment		ed Document Listing Requ	iired	
	Rate-of-Return Community Anchor Institutions	Information			
012A)	Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.				
012B)	Please Provide Attachment		ned Document Listing		
	Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(f)(1)(ii)	Required Inforr	nation		
3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	0 0		
014)	If yes, does your company file the RUS annual report	(Yes/No)	\circ		
	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:				
015)	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				
017)	If the response is yes on line 3014, attach your	Name of Attach	ed Document Listing Requ	in a l	

(/	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	
	Rate-of-Return Community Anchor Institutions	Information	
(3012A)	Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.		
(3012B)	Please Provide Attachment	Name of Attached Document Listing	
	Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(f)(1)(ii)	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)	
	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)		
(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 Document Listing Required Information	
(3018)	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 3026 pursuant to § 54.313(f)(2), contains:	(Yes/No)	
(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		
(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) with 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
	December 2020

<015> Study Area Name TracFone Wireless Inc. <020 Program Year 2023 <030 > Contact Name - Person USAC should contact regarding this data Janet More jon <035> Contact Telephone Number - Number of person identified in data line <030> 3057156522 ext.	<010>	Study Area Code	509004
<030> Contact Name - Person USAC should contact regarding this data	<015>	Study Area Name	TracFone Wireless Inc.
	<020>	Program Year	2023
<035> Contact Telephone Number - Number of person identified in data line <030> 3057156522 ext.	<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
	<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039> Contact Email Address - Email Address of person identified in data line <030> jmorejon@tracfone.com	<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon 3057156522 ext.
<035>	Contact Telephone Number - Number of person identified in data li	ne <030>
<039>	Contact Email Address - Email Address of person identified in data I	ine <030> jmorejon@tracfone.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.

RBE Community Anchor Institutions

<4003a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year

<4003b> Please Provide Attachment: Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79)

Name of Attached Document Listing Required Information

(5005) Alaska Plan Participants Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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 previous calendar year in areas that were previously served exclusively by satellite backhaul.

(Yes/No)

<5013>	<a>>		<c></c>
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
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<u>-</u> _			
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<u>=</u> _			
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Alaska Plan Mobile Carriers' Reasonably Comparable Rate Demonstration

(5014a) Answer yes or no if mobile carriers receiving support from the Alaska Plan can demonstrate compliance at the end of the five-year milestone (2022) by showing that your required standalone voice plan, and one service plan that offers broadband data services, if you offer such plans, are:

(Yes/No)

- Substantially similar to a service plan offered by at least one mobile wireless service provider in the cellular market area (CMA) for Anchorage, Alaska, and
- Offered for the same or a lower rate than the matching plan in the CMA for Anchorage.

Alaska Plan Mobile Carriers' Reasonably Comparable Rate Demonstration Attachment

Name of Attached Document Listing Required Information

(5014b) If 'Yes' is selected for 5014a, attach a document demonstrating compliance with the 5-year milestone. If 'No' is selected for 5014a, attach an explanation of non-compliance.

(6005) Phase II Auction Reporting	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

<6010> Enter the total amount of Phase II Auction Support, if any, the carrier used for capital expenditures.

Phase II Auction and New York Funds Certification

<6011> Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

(Yes/No)

Phase II Auction Community Anchor Institutions

<6012a> Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

<6012b> Please Provide Attachment Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by FCC 14-98 (paragraph 79).

Name of Attached Document Listing Required Information

Phase II Auction FCC Form 470 Postings

<6013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

Phase II Auction Post-Final Deployment Milestone Performance Certification

<6014> Starting the first July 1st after meeting the final service milestone, certify (yes, no, or not applicable) that the Phase II-funded network that the Phase II auction recipient operated in the prior year meets the relevant performance requirements in § 54.309.

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

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

<7010> Phase II Auction recipient performance requirements certification (Yes/No)

(8005) Uniedo a Puerto Rico Fixed and Mobile Funds Certification	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

<8010> Uniendo a Puerto Rico Stage 2 Fixed – Capital Expenditures

Enter the total amount of Uniendo a Puerto Rico Stage 2 fixed support, if any, the carrier used for capital expenditures.

<8011> Uniendo a Puerto Rico Stage 2 Fixed – Available Funds Certification

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

<8012a> Uniendo a Puerto Rico Stage 2 Fixed – Community Anchor Institutions

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

Please Provide Attachment

<8012b> Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(A). Allowable File Types.

Name of Attached Document Listing Required Information

Uniendo a Puerto Rico Stage 2 Fixed – FCC Form 470 Postings

<8013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

<8014> Uniendo a Puerto Rico Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification

Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Uniendo a Puerto Rico Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

<8020> Uniendo a Puerto Rico Stage 2 Fixed – Support Reimbursement Certification

54.313(n): Recipients of Uniendo a Puerto Rico Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Uniendo a Puerto Rico Fund.

<8030> Uniendo a Puerto Rico Stage 2 Fixed – Disaster Preparedness and Response Documentation

54.313(n): Recipients of fixed support from Stage 2 of the Uniendo a Puerto Rico Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

<8040> Uniendo a Puerto Rico Stage 2 Mobile – Support Reimbursement

54.313(n): Recipients of Uniendo a Puerto Rico Fund Stage 2 mobile support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Uniendo a Puerto Rico Fund.

<8050> Uniendo a Puerto Rico Stage 2 Mobile – Disaster Preparedness and Response Documentation

54.313(n): Recipients of mobile support from Stage 2 of the Uniendo a Puerto Rico Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation

<8060> Uniendo a Puerto Rico Stage 2 Mobile – Mobile Disbursements Certification

54.313(o): Recipients of Uniendo a Puerto Rico Fund Stage 2 mobile support shall certify that they are in compliance with all requirements for receipt of such support to continue receiving Stage 2 mobile disbursements

(9005) Connect USVI Fixed and Mobile Funds Certification	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

<9010> Connect USVI Stage 2 Fixed – Capital Expenditures

Enter the total amount of Connect USVI Fund Stage 2 fixed support, if any, the carrier used for capital expenditures.

<9011> Connect USVI Stage 2 Fixed – Available Funds Certification

Certify (either yes or no) regarding whether the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support.

<9012a> Connect USVI Stage 2 Fixed – Community Anchor Institutions

Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.

Please Provide Attachment

Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(i)(A).

Name of Attached Document Listing Required Information

Connect USVI Stage 2 Fixed - FCC Form 470 Postings

<9013> For the filing due July 1 following full implementation of this requirement answer yes, no, or not applicable to this certification request.

Connect USVI Stage 2 Fixed – Post-Final Deployment Milestone Performance Certification

<9014> Starting the first July 1st after meeting the final service milestone, certify (yes or no) that the Connect USVI Fund Stage 2-funded network that the Stage 2 recipient operated in the prior year meets the relevant performance requirements in § 54.309.

Connect USVI Stage 2 Fixed – Support Reimbursement Certification

54.313(n): Recipients of Connect USVI Fund Stage 2 fixed support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Connect USVI Fund.

Connect USVI Stage 2 Fixed – Disaster Preparedness and Response Documentation

54.313(n): Recipients of fixed support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

Connect USVI Fund Stage 2 Mobile - Support Reimbursement Certification

<9040> 54.313(n): Recipients of Connect USVI Fund Stage 2 mobile support shall certify that such support was not used for costs that are (or will be) reimbursed by other sources of support, including of federal or local government aid or insurance reimbursements; and that support was not used for other purposes, such as the retirement of company debt unrelated to eligible expenditures, or other expenses not directly related to network restoration, hardening, and expansion consistent with the framework of the Connect USVI Fund. Recipients of mobile support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and recovery documentation.

Connect USVI Fund Stage 2 Mobile - Disaster Preparedness and Response Documentation

<9050>
54.313(n): Recipients of mobile support from Stage 2 of the Connect USVI Fund shall certify that they have conducted an annual review of the documentation required by section 54.1515(a)-(c) to determine the need for and to implement changes or revisions to disaster preparation and response documentation.

Connect USVI Fund Stage 2 Mobile - Mobile Disbursements Certification

54.313(o): Recipients of Connect USVI Fund Stage 2 mobile support shall certify that they are in compliance with all requirements for receipt of such support to continue receiving Stage 2 mobile disbursements.

<9020>

<9030>

(10005) Rural Digital Opportunity Fund Certification	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

RDOF Capital Expenditures

<10010>

Starting the first July 1st after receiving support until the July 1st after the recipient's support term has ended, recipients of Rural Digital Opportunity Fund support must submit the total amount of support, if any, the recipient used for capital expenditures in the previous calendar year. This is required by 47 C.F.R. § 54.313(e)(2)(i)(B).

RDOF Available Funds Certification

<10011>

Please provide a response (either yes or no) to this certification request for any recipient of Rural Digital Opportunity Fund support that the recipient has available funds for all project costs that will exceed the amount of support that will be received for the next calendar year. This certification must be provided starting the first July 1st after receiving support until the recipient's penultimate year of support, as required by required by 47 C.F.R. § 54.313(e)(2)(ii).

RDOF Community Anchor Institutions

<10012a>

Recipients of Rural Digital Opportunity Fund support must attach a list containing the number, names, and addresses of community anchor institutions to which the eligible telecommunications carrier newly began providing access to broadband service in the preceding calendar year. This filing is required by 47 C.F.R. § 54.313(e)(2)(i)(A).

Please Provide Attachment

<10012b>

Using link, download template and list the number, name and address for each community anchor institution. Attach the document which contains the community anchor institution details as required by 47 C.F.R. § 54.313(e)(2)(i)(A).

Name of Attached Document Listing Required Information

RDOF FCC Form 470 Postings

<10013>

For the filing due July 1st following full implementation of this requirement, please provide a response (either yes, no, or not applicable) to this certification request. Recipients of Rural Digital Opportunity Fund must respond affirmatively that they 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 (as described in § 54.501) located within any area in a census block where the carrier is receiving Rural Digital Opportunity Fund, and that such bids were at rates reasonable comparable to rates charged to eligible schools and libraries in urban areas for Instructions for Completing FCC Form 481 OMB Control No. 3060-0986 (High-Cost) OMB Control No. 3060-0819 (Low-Income) November 2020 Page 44 comparable offerings. This filing is required by 47 C.F.R. § 54.313(e)(2)(i)(C). This certification will not be required until the July 1st following the E-Rate program year that this obligation has been fully implemented. Modernizing the E-Rate Program for Schools and Libraries et al., WC Docket. Nos. 13-184, 10-90, 29 FCC Rcd 15538, 15566-67, para. 72 (2014).

RDOF Post-Final Deployment Milestone Performance Certification

<10014>

Starting the first July 1st after a Rural Digital Opportunity Fund recipient meets its final service milestone until the July 1st after the support recipient's support term has ended, please provide a response (either yes, no, or not applicable) that the Rural Digital Opportunity Fund-funded network that the support recipient operated in the prior year meets the relevant performance requirements in 47 C.F.R. § 54.309. This filing is required by 47 C.F.R. § 54.313(e)(2)(iii).

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.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: TracFone Wireless Inc.

Signature of Authorized Officer: CERTIFIED ONLINE Date 07/22/2022

Printed name of Authorized Officer: Alex Pis-Dudot

Title or position of Authorized Officer: Accounting Executive Director

Telephone number of Authorized Officer: 3056402063 ext.

Study Area Code of Reporting Carrier: 509004 Filing Due Date for this form: 08/01/2022

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 December 2020
<010>	Study Area Code	509004	
<015>	Study Area Name	TracFone Wireless In	c.
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon	
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com	n

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

	is authorized to submit the information reported on behalf of the reporting car my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authori d 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	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 Recipie	ents on Behalf of Reporting Carrier
	norized to submit the annual reports for universal service support reporting carrier; and, to the best of my knowledge, the informat	• • • • • • • • • • • • • • • • • • • •
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 Agen	t	
Telephone number of Authorized Agent or Employee of A	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	
Persons willfully making false statements on this form	n can be punished by fine or forfeiture under the Communications Act of 18 of the United States Code, 18 U.S.C. § 1001.	1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

Certify Filing Data Collecti		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	509004
<015>	Study Area Name	TracFone Wireless Inc.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	jmorejon@tracfone.com

I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, modify, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.

Yes

Please Provide Waiver Document Allowable File Type (pdf only)

Name of Attached Document Listing Required Information

I certify that no Federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.

Please Provide Waiver Document Allowable File Type (pdf only)

Name of Attached Document Listing Required Information



(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code		509004
<015>	Study Area Name		TracFone Wireless Inc.
<020>	Program Year		2023
<030>	Contact Name - Person U	SAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	3057156522 ext.
<039>	Contact Email Address - E	mail Address of person identified in data line <030>	jmorejon@tracfone.com
<810>	Reporting Carrier	TracFone Wireless Inc	
<811>	Holding Company	Verizon Communications Inc.	
<812>	Operating Company	TracFone Wireless Inc	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	TracFone Wireless Inc	109008	SafeLink Wireless
_	TracFone Wireless Inc	119002	SafeLink Wireless
	TracFone Wireless Inc	129004	SafeLink Wireless
	TracFone Wireless Inc	139002	SafeLink Wireless
	TracFone Wireless Inc	149006	SafeLink Wireless
_	TracFone Wireless Inc	159016	SafeLink Wireless
_	TracFone Wireless Inc	169001	SafeLink Wireless
	TracFone Wireless Inc	179011	SafeLink Wireless
_	TracFone Wireless Inc	189006	SafeLink Wireless
	TracFone Wireless Inc	199010	SafeLink Wireless
	TracFone Wireless Inc	209013	SafeLink Wireless
	TracFone Wireless Inc	219003	SafeLink Wireless
_	TracFone Wireless Inc	229010	SafeLink Wireless
_	TracFone Wireless Inc	239010	SafeLink Wireless
_	SafeLink Wireless Inc	249012	SafeLink Wireless
_	TracFone Wireless Inc	259021	SafeLink Wireless
_	TracFone Wireless Inc	269025	SafeLink Wireless
_	TracFone Wireless Inc	279026	SafeLink Wireless
_	TracFone Wireless Inc	289026	SafeLink Wireless
_	TracFone Wireless Inc	299011	SafeLink Wireless
_	TracFone Wireless Inc	309002	SafeLink Wireless
_	TracFone Wireless Inc	319021	SafeLink Wireless
_	TracFone Wireless Inc	329012	SafeLink Wireless

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code		509004
<015>	Study Area Name		TracFone Wireless Inc.
<020>	Program Year		2023
<030>	Contact Name - Person U	SAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>		3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>		jmorejon@tracfone.com
<810>	Reporting Carrier	TracFone Wireless Inc	
<811>	Holding Company	Verizon Communications Inc.	
<812>	Operating Company	TracFone Wireless Inc	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	TracFone Wireless Inc	339025	SafeLink Wireless
	TracFone Wireless Inc	349021	SafeLink Wireless
	TracFone Wireless Inc	359127	SafeLink Wireless
	TracFone Wireless Inc	369032	SafeLink Wireless
	TracFone Wireless Inc	409014	SafeLink Wireless
	TracFone Wireless Inc	419031	SafeLink Wireless
	TracFone Wireless Inc	429010	SafeLink Wireless
	SafeLink Wireless Inc	439067	SafeLink Wireless
	TracFone Wireless Inc	449058	SafeLink Wireless
	TracFone Wireless Inc	459008	SafeLink Wireless
_	TracFone Wireless Inc	469033	SafeLink Wireless
_	TracFone Wireless Inc	479021	SafeLink Wireless
	TracFone Wireless Inc	499012	SafeLink Wireless
	TracFone Wireless Inc	509004	SafeLink Wireless
	TracFone Wireless Inc	529012	SafeLink Wireless
	TracFone Wireless Inc	549028	SafeLink Wireless
_	TracFone Wireless Inc	559006	SafeLink Wireless
_	TracFone Wireless Inc	569002	SafeLink Wireless
_	TracFone Wireless Inc	579001	SafeLink Wireless
_	TracFone Wireless Inc	589002	SafeLink Wireless
_	TracFone Wireless Inc	629005	SafeLink Wireless
_	TracFone Wireless Inc	639009	SafeLink Wireless
	Verizon New England Inc.	585114	Verizon

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code		509004
<015>	Study Area Name		TracFone Wireless Inc.
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<030>	Contact Name - Person US	SAC should contact regarding this data	Janet Morejon
<035>	Contact Telephone Number - Number of person identified in data line <030>		3057156522 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>		jmorejon@tracfone.com
<810>	Reporting Carrier	TracFone Wireless Inc	
<811>	Holding Company	Verizon Communications Inc.	
<812>	Operating Company	TracFone Wireless Inc	

3>	<a1></a1>		<a3></a3>	
	Affiliates		Doing Business As Company or Brand Designation	
Ve	erizon New York Inc.	155130	Verizon	
Ve	erizon New Jersey Inc.	165120	Verizon	
Ve	erizon Pennsylvania LLC	175000	Verizon	
Ve	erizon North LLC	170169	Verizon	
Ve	erizon North LLC	170170	Verizon	
Ve	erizon North LLC	170201	Verizon	
Ve	erizon Maryland LLC	185030	Verizon	
Ve	erizon Virginia LLC	195040	Verizon	
Ve	erizon Delaware LLC	565010	Verizon	
Ve	erizon Washington D.C. Inc.	575020	Verizon	
Ve	erizon South Inc.	190233	Verizon	
Ve	erizon South Inc.	190479	Verizon	
Ve	erizon South Inc.	230864	Verizon	
RS	SA 7 Limited Partnership	359070	Verizon Wireless	
I	owa 8 - Monona Limited Partnership	359071	Verizon Wireless	
No	orth Central RSA 2 of North Dakota Limited Partnership	389006	Verizon Wireless	
No	rthwest Dakota Cellular of North Dakota Limited Partnershi	389007	Verizon Wireless	
	orth Dakota RSA No. 3 Limited Partnership	389008	Verizon Wireless	
Ва	adlands Cellular of North Dakota Limited Partnershi	389009	Verizon Wireless	
No	orth Dakota 5 - Kidder Limited Partnership	389010	Verizon Wireless	
Ne	ew York RSA 2 Cellular Partnership	159015	Verizon Wireless	
W	isconsin RSA #1 Partnership	339023	Verizon Wireless	
St	t Lawrence Seaway Cellular Partnership	159014	Verizon Wireless	