FCC For	m 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	476222	
<015>	Study Area Name	First Step Internet, LLC	
<020>	Program Year	2020	
<030>	Contact Name: Person USAC should contact with questions about this data	Kevin Owen	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	2088828869 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	kowen@fsr.com	
	Form Type	54.313 and 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	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com

<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									Did This Outage		
	Reference		Outage Start					911 Facilities	Service Outage	Affect Multiple		
	Number	Date	Time	Date	Time	Customers Affected		Affected	Description (Check		Service Outage	Preventative
							Customers	(Yes / No)	all that apply)	(Yes / No)	Resolution	Procedures
		-										
	L	1				I			I			

(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	476222		
<015>	Study Area Name	First Step Internet, LLC		
<020>	Program Year	2020		
<030>	Contact Name - Person USAC should contact regarding this data Kevin Owen			
<035>	Contact Telephone Number - Number of person identified in data line <030> 2088828869 ext.			
<039>	Contact Email Address - Email Address of person identified in data line kowen@fsr.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

(500) Compliance With Service Quality Standards and Consumer Protection Rules Data Collection Form

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

<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com

<515> Certify compliance with applicable minimum service standards

• •	unctionality in Emergency Situations ollection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	Ability to Function in Emergency Situations.pdf

	erating Companies lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2018
<010>	Study Area Code		476222		
<015>	Study Area Name		First Step I	nternet, LLC	
<020>	Program Year		2020		
<030>	Contact Name - Person	USAC should contact regarding this data	Kevin Owen		
<035>		nber - Number of person identified in da		ext.	
<039>	Contact Email Address -	Email Address of person identified in da	ta line <030> kowen@fsr.co	om	
<810>	Reporting Carrier	First Step Internet, LLC			
<811>	Holding Company	Not Applicable			
<812>	Operating Company	First Step Internet, LLC			
<813>		<a1></a1>		<a2></a2>	<a3></a3>
		Affiliates		SAC	Doing Business As Company or Brand Designation
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- -			See attac	ched workshee	
-			See attac	hed workshee	
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- - - - - - - - - - - - - - - - - - -			See attac	hed workshee	
- - - - - - - - - - - - - - - - - - -			See attac	hed workshee	
-			See attac	hed workshee	
-			See attac	hed workshee	

<010> Study Area Code <015> Study Area Name <020> Program Year <030> Contact Name - Person USAC should contact regarding <035> Contact Telephone Number - Number of person identi <039> Contact Email Address - Email Address of person identi <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government pr § 54.313(a)(5) includes:	ified in data line <030> tified in data line <030>	476222 First Step I 2020 Kevin Owen 2088828869 e kowen@fsr.cc	ext.				
<015> Study Area Name <020> Program Year <030> Contact Name - Person USAC should contact regarding <035> Contact Telephone Number - Number of person identi <039> Contact Email Address - Email Address of person identi <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <910> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes, No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:	ified in data line <030> tified in data line <030>	First Step I 2020 Kevin Owen 2088828869 6	ext.				
<020> Program Year <030> Contact Name - Person USAC should contact regarding <035> Contact Telephone Number - Number of person identi <039> Contact Email Address - Email Address of person identi <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes, No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:	ified in data line <030> tified in data line <030>	2020 Kevin Owen 2088828869 e	ext.				
<030> Contact Name - Person USAC should contact regarding <035> Contact Telephone Number - Number of person identi <039> Contact Email Address - Email Address of person identi <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:	ified in data line <030> tified in data line <030>	Kevin Owen 2088828869 e	om				
<035> Contact Telephone Number - Number of person identi <039> Contact Email Address - Email Address of person identi <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes, No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government pi § 54.313(a)(5) includes:	ified in data line <030> tified in data line <030>	2088828869 6	om				
<039> Contact Email Address - Email Address of person ident <900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government pi § 54.313(a)(5) includes:	tified in data line <030>	kowen@fsr.cc					
<900> Does the filing entity offer tribal land servic <910> Tribal Land(s) on which ETC Serves <920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:			No				
<920> Tribal Government Engagement Obligation If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:							
If your company serves Tribal lands, please select (Yes,No to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:	L						
to confirm the status described on the attached PDF, on I demonstrates coordination with the Tribal government p § 54.313(a)(5) includes:	1		Nar	ne of Attached Do	ocument		
	ine 920,	Select Yes or No or Not Applicable					
<921> Needs assessment and deployment plannin community anchor institutions. <922> Feasibility and sustainability planning;	g with a focus on Tribal						
<923> Marketing services in a culturally sensitive n	manner.						
<923> Marketing services in a curturally sensitive r <924> Compliance with Rights of way processes							
<924> Compliance with Rights of way processes <925> Compliance with Land Use permitting required in the second	rements						
<925> Compliance with Eaclities Siting rules	Cilicitis						
<927> Compliance with Environmental Review prod (222) Compliance with Cultural Preservation and and (222) Compliance with Cultural Preservation and (202)							
<928> Compliance with Cultural Preservation revie <929> Compliance with Tribal Business and Licensin							

	ice and Broadband Service Rate Comparability		Page 8
•	ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 July 2018
<010>	Study Area Code		476222
<015>	Study Area Name		First Step Internet, LLC
<020>	Program Year		2020
<030>	Contact Name - Person USAC should contact regarding this data		Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line	<030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line	e <030>	kowen@fsr.com
<1010>	Voice services rate comparability certification Attach detailed description for voice services rate	FSVoj	ice Comparabiity Compliance.pdf
	comparability compliance		Name of Attached Document
<1020>	Broadband comparability certification		- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	FSBro	padband Comparability Compliance.pdf
			Name of Attached Document

• •	o Terrestrial Backhaul Reporting ection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	476222	
<015>	Study Area Name	First Step Internet, LLC	
<020>	Program Year	2020	
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen	
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com	

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

Yes

- <1130> Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(g).
- <1140> Alaska Plan rate-of-return certification (yes, no, or not applicable) of compliance with approved performance plan.

Lifeline	erms and Condition for Lifeline Customers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	476222	
<015>	Study Area Name	First Step Internet, LLC	
<020>	Program Year	2020	
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen	
<035>	Contact Telephone Number - Number of person identified in data line <030		
<039>	Contact Email Address - Email Address of person identified in data line <03		
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		Name of Attached Document
<1220>	Link to Public Website HTTP	fsr.com/fsvoice	
or the we	neck 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.		

Data Collection FormOMB Control No. 3060-0986/OMB Control No. 3060-0819Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange CarriersJuly 2018	(2005) Price Cap Carrier Additional Documentation			FCC Form 481
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers July 2018	Data Collection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
	Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2018
<010> Study Area Code 476222	<010>	Study Area Code	476222	
<015> Study Area Name First Step Internet, LLC	<015>	Study Area Name	First Step Internet, LLC	
<020> Program Year 2020	<020>	Program Year	2020	
<030> Contact Name - Person USAC should contact regarding this data Kevin Owen	<030>	Contact Name - Person USAC should contact regarding this data		
<035> Contact Telephone Number - Number of person identified in data line <030> 2088828869 ext.	<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.	
<039> Contact Email Address - Email Address of person identified in data line <030> kowen@fsr.com	<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com	

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

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

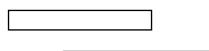
Price Cap Carrier Connect America ICC Support {47 CFR § 54.313(d)}

<2016> Certification support used to build broadband

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

- <2017A> Connect America Fund Phase II recipient?
- <2017C> Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2018.
- <2018> Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)
- <2019> Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)

Name of Attached Document Listing Required Information



Page 11

(3005) Rate Data Collect	Of Return Carrier Additional Documentation ion Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.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
	<u> </u>
CAF BLS Reporting Please indicate whether new locations were deployed during the prior cale Please enter the number of new locations deployed in calendar year associated with each of the following speed tiers.	
Number of newly built locations with access to broadband speeds of at least but less than 25/3 Mbps.	10/1 Mbps
Number of newly built locations with access to broadband speeds of 25/3 M	bps or higher.

(3008C) Please provide the percentage of deployment across the entire study area.

(3008A)

(3008B)

(3008B1)

(3008B2)

<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.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)}			[]
(3012B)	Please Provide Attachment	Name of Attached Docu Information	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)	00	
	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 Docu Information	ment Listing Required	
(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)	00	
(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 OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2018

<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.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

(TPIS)	

No - No New Anchors

<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data lin	ne <030> 20080828069 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ne <030> kowen@fsr.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 Name of Attached Document Listing Required Information of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Page 15

(5005) Alaska Plan Participants Additional Documentation Data Collection Form

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

July 2018

<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com

5005 Alaska Plan

(5010)	Do you participate in the Alaska plan?	(Yes/No)
(5011)	Please indicate whether any terrestrial backhaul or other satellite backhaul became commercially available in the previous calendar year in areas previously served exclusively by performance-limiting satellite backhaul.	(Yes/No)
(5012)	If the filing carrier identified in its approved perfomance plans that it relies exclusively on 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.	(Yes/No)

<5013>	<a>		<c></c>
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
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Certification - Reporting Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.com

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

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: First Step Internet, LLC		
Signature of Authorized Officer: CERTIFIED ONLINE	Date 06/24/2019	
Printed name of Authorized Officer: Kevin Owen		
Title or position of Authorized Officer: President		
Telephone number of Authorized Officer: 2088828869 ext.		
Study Area Code of Reporting Carrier: 476222	Filing Due Date for this form: 07/01/2019	

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	476222
<015>	Study Area Name	First Step Internet, LLC
<020>	Program Year	2020
<030>	Contact Name - Person USAC should contact regarding this data	Kevin Owen
<035>	Contact Telephone Number - Number of person identified in data line <030>	2088828869 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	kowen@fsr.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) is authorized to submit the information reported on behalf of the reporting carrier. Iso 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 gent; 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 fo	m can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine under Title 18 of the United States Code, 18 U.S.C. § 1001.	or imprisonment		

TO BE COMPLETED BY THE AUTHORIZED AGENT:

L				
	Certification of <i>I</i>	Agent Authorized to File Annual Reports for CAF or LI Re	ecipients 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:			
Name	of Authorized Agent Firm:			
Signati	ignature of Authorized Agent or Employee of Agent: Date:			
Name	Name of Authorized Agent Employee:			
Title or	Title or position of Authorized Agent or Employee of Agent			
Teleph	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 t	this form can be punished by fine or forfeiture under the Communications . 18 of the United States Code, 18 U.S.C. § 1001.		

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Attachments

• • •	erating Companies ection Form			FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2018
<010>	Study Area Code		476222	
<015>	Study Area Name		First Step Internet, LLC	
<020>	Program Year		2020	
<030>	Contact Name - Person U	SAC should contact regarding this data	Kevin Owen	
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	2088828869 ext.	
<039>	Contact Email Address - E	mail Address of person identified in data line <030>	kowen@fsr.com	
<810>	Reporting Carrier	First Step Internet, LLC		
<811>	Holding Company	Not Applicable		
<812>	Operating Company	First Step Internet, LLC		

<813>	<ai></ai>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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