FCC For	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	529014	
<015>	Study Area Name	Assurance Wireless USA L.P.	
<020>	Program Year	2023	
<030>	Contact Name: Person USAC should contact with questions about this data	Tami Shwonek	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4253835551 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.com

<210>	For the prior ca	alendar year, were i	there any reportab	le 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	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of	911 Facilities Affected	Service Outage Description (Check	Did This Outage Affect Multiple 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 529014		
<015>	Study Area Name Assurance Wireless USA L.P.		
<020>	Program Year 2023		
<030>	Contact Name - Person USAC should contact regarding this data Tami Shwonek		
<035>	Contact Telephone Number - Number of person identified in data line <030> 4253835551 ext.		
<039>	Contact Email Address - Email Address of person identified in data line tami.shwonek@t-mobile.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	529014	
<015>	Study Area Name	Assurance Wireless USA L.P.	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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
	December 2020

1010	Charles Assoc Confe	
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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 Coll	lection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code		529014	
<015>	Study Area Name		Assurance Wireless USA L.P.	
<020>	Program Year		2023	
<030>	Contact Name - Person U	JSAC should contact regarding this data	Tami Shwonek	
<035>	Contact Telephone Num	ber - Number of person identified in data line <030>	4253835551 ext.	
<039>	Contact Email Address - I	Email Address of person identified in data line <030>	tami.shwonek@t-mobile.com	
<810>	Reporting Carrier	Assurance Wireless USA, L.P.		
<811>	Holding Company	T-Mobile USA Inc.		
<812>	Operating Company	Assurance Wireless USA, L.P.		

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
-			
-			
-	See a	ttached works	heet
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-			

(900) Tri	bal Lands Reporting	FCC Form 481
Data Co	lection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
		December 2020
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023 Tami Shwonek
<030>	Contact Name - Person USAC should contact regarding this data	4253835551 ext.
<035> <039>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.com
-	·	
<900>	Does the filing entity offer tribal land services? (Y/N)	
<910>	Tribal Land(s) on which ETC Serves	
<920>	Tribal Government Engagement Obligation	Name of Attached Document
to confi demon	company serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached PDF, on line 920, strates coordination with the Tribal government pursuant to 3(a)(5) includes:	Select Yes or No or Not Applicable
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. 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	
<927>	·	
	Compliance with Cultural Preservation review processes	
<929>	Compliance with Tribal Business and Licensing requirements.	

•	pice and Broadband Service Rate Comparability lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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

	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	529014	
<015>	Study Area Name	Assurance Wireless USA L.P.	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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.		

(1200) Te Lifeline	rms and Condition for Lifeline Customers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Coll	ection Form	December 2020
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.com
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans	
		Name of Attached Document
<1220>	Link to Public Website HTTP h	ttps://www.assurancewireless.com/legal/terms-and-conditions
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.	

(2005) Price Cap Carrier Additional Documentation		FCC Form 4	31
Data Collection Form		OMB Contro	ol No. 3060-0986/OMB Control No. 3060-0819
Including Rate-of-Return Carriers affiliated with Price (ap Local Exchange Carriers	December 2	020
<010> Study Area Code	529014		
<015> Study Area Name	Assurance Wireless U	JSA L.P.	
<020> Program Year	2023		
<030> Contact Name - Person USAC should contact re			
<035> Contact Telephone Number - Number of perso	ii idelitiiled iii data iiile <0302	1	
<039> Contact Email Address - Email Address of person	n identified in data line <030> tami.shwonek@t-mobil	Le.com	
	d Connect America Phase II support a	ompliance as a recipient of frozen High Co s set forth in 47 CFR 54.313(c),(d),(e). The	
<2015> 2016 and future Frozen Supp	ort Certification 47 CFR § 54.313(c)(4)		
Price Cap Carrier Connect America IC <2016> Certification support use	.,,		
Connect America Phase II Reporting	[47 CFR § 54.313(e)}		
<2017A> Connect America Fund Phase	Il recipient?		
<2017C> Total amount of Phase II suppo capital expenditures in 2021.	rt, if any, the price cap carrier used for		
<2018> Attach the number, names, an	Attach the number, names, and addresses of community anchor		3
	r newly began providing access to eding calendar year - 54.313(e)(1)(ii)(A)	Required Information	
Connect America Phase II – FCC Form	n 470 Postings		
<2019> For the filing due July 1 following answer yes, no, or not applicable.	ng full implementation of this requirement le to this certification request	t,	

(3005) Rate Of Return Carrier Additional Documentation Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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 Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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.

	elow is accurate.	z). Truitilei certily the	at the n	поппасіон героі	ted on this form and in the documents
(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 Doc	cument L	isting 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 Doo		isting	
	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)	0	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	\bigcirc	O	
	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 Doc Information	cument l	isting 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)	0	0	
(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			5	
(3026)	Attach the worksheet listing required information	Name of Attached Do Information	ocument	Listing Required	L

(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

<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<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> tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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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=			
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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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	> Contact Name - Person USAC should contact regarding this data Tami Shwonek	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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

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

<9030> 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>

(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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030> 4253835551 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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: Assurance Wireless USA L.P.

Signature of Authorized Officer: CERTIFIED ONLINE Date 07/16/2022

Printed name of Authorized Officer: Larry Weians

Title or position of Authorized Officer: Vice President

Telephone number of Authorized Officer: 9137941452 ext.

Study Area Code of Reporting Carrier: 529014 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	529014	
<015>	Study Area Name	Assurance Wireless USA	L.P.
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.	·
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.d	com

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

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier	
I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; agent; and, to the best of my knowledge, the reports ar	is authorized to submit the information reported on behalf of the reporting carrier. I my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized 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 form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.	

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI 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:		
ignature of Authorized Agent or Employee of Agent: Date:		
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agent		
Telephone number of Authorized Agent or Employee of 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

Data Collecti	on Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020
<010>	Study Area Code	529014
<015>	Study Area Name	Assurance Wireless USA L.P.
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	tami.shwonek@t-mobile.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

FCC Form 481

Please Provide Waiver Document Allowable File Type (pdf only)

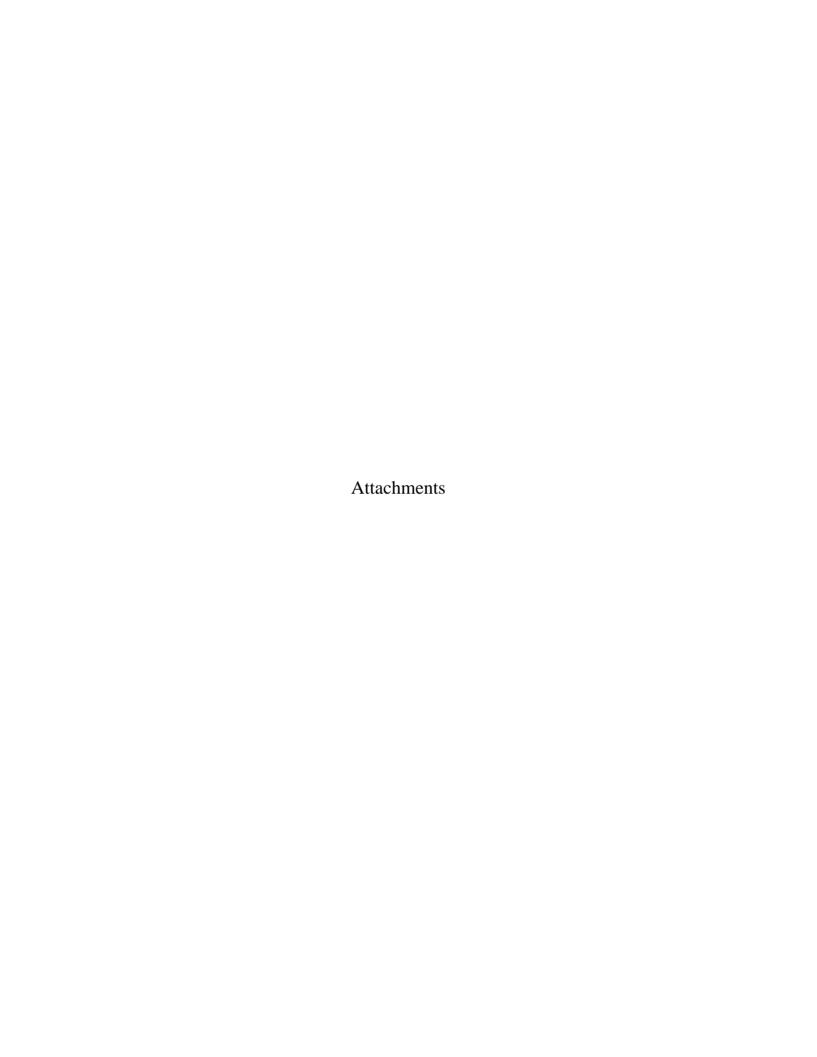
Certify Filing

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.

Yes

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		529014
<015>	Study Area Name		Assurance Wireless USA L.P.
<020>	Program Year		2023
<030>	Contact Name - Person USA	AC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number - Number of person identified in data line <030>		4253835551 ext.
<039>	Contact Email Address - Em	nail Address of person identified in data line <030>	tami.shwonek@t-mobile.com
<810>	Reporting Carrier	Assurance Wireless USA, L.P.	
<811>	Holding Company	T-Mobile USA Inc.	
<812>	Operating Company	Assurance Wireless USA, L.P.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
I	T-Mobile Northeast LLC and T-Mobile Central LLC	179014	DBA T- Mobile
·	T-Mobile Northeast LLC	199016	DBA T- Mobile
	T-Mobile South LLC	219013	DBA T- Mobile
	Powertel/Memphis, Inc. and T-Mobile Central LLC	269024	DBA T- Mobile
	Powertel/Memphis, Inc. and T-Mobile South LLC	289029	DBA T- Mobile
	T-Mobile Central LLC	369014	DBA T- Mobile
	T-Mobile West LLC	529013	DBA T- Mobile
	T-Mobile Puerto Rico LLC	639003	DBA T- Mobile
	MetroPCS California, LLC		Metro by T-Mobile
	MetroPCS Florida, LLC		Metro by T-Mobile
	MetroPCS Georgia, LLC		Metro by T-Mobile
	MetroPCS Massachusetts, LLC		Metro by T-Mobile
	MetroPCS Michigan, Inc.		Metro by T-Mobile
	MetroPCS Nevada, LLC		Metro by T-Mobile
	MetroPCS New York, LLC		Metro by T-Mobile
	MetroPCS Pennsylvania, LLC		Metro by T-Mobile
	MetroPCS Texas, LLC		Metro by T-Mobile
	Virgin Mobile USA LP	259032	Assurance Wireless
	Virgin Mobile USA LP	409025	Assurance Wireless
	Virgin Mobile USA LP	459018	Assurance Wireless
	Virgin Mobile USA LP	549016	Assurance Wireless
	Virgin Mobile USA LP	469014	Assurance Wireless
	Virgin Mobile USA LP	139003	Assurance 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		529014
<015>	Study Area Name		Assurance Wireless USA L.P.
<020>	Program Year		2023
<030>	Contact Name - Person USA	AC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Numbe	r - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>		tami.shwonek@t-mobile.com
<810>	Reporting Carrier	Assurance Wireless USA, L.P.	
<811>	Holding Company	T-Mobile USA Inc.	
<812>	Operating Company	Assurance Wireless USA, L.P.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	Virgin Mobile USA LP	579003	Assurance Wireless
	Virgin Mobile USA LP	569003	Assurance Wireless
	Virgin Mobile USA LP	219012	Assurance Wireless
	Virgin Mobile USA LP	229015	Assurance Wireless
_	Virgin Mobile USA LP	359126	Assurance Wireless
_	Virgin Mobile USA LP	479015	Assurance Wireless
	Virgin Mobile USA LP	349033	Assurance Wireless
	Virgin Mobile USA LP	329011	Assurance Wireless
	Virgin Mobile USA LP	419024	Assurance Wireless
_	Virgin Mobile USA LP	269027	Assurance Wireless
	Virgin Mobile USA LP	279034	Assurance Wireless
_	Virgin Mobile USA LP	119003	Assurance Wireless
	Virgin Mobile USA LP	189009	Assurance Wireless
	Virgin Mobile USA LP	109010	Assurance Wireless
	Virgin Mobile USA LP	319023	Assurance Wireless
	Virgin Mobile USA LP	369018	Assurance Wireless
	Virgin Mobile USA LP	429025	Assurance Wireless
	Virgin Mobile USA LP	289028	Assurance Wireless
	Virgin Mobile USA LP	239018	Assurance Wireless
_	Virgin Mobile USA LP	129005	Assurance Wireless
_	Virgin Mobile USA LP	169003	Assurance Wireless
	Virgin Mobile USA LP	499015	Assurance Wireless
	Virgin Mobile USA LP	559021	Assurance 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		529014
<015>	Study Area Name		Assurance Wireless USA L.P.
<020>	Program Year		2023
<030>	Contact Name - Person US	AC should contact regarding this data	Tami Shwonek
<035>	Contact Telephone Number	er - Number of person identified in data line <030>	4253835551 ext.
<039>	Contact Email Address - Er	nail Address of person identified in data line <030>	tami.shwonek@t-mobile.com
<810>	Reporting Carrier	Assurance Wireless USA, L.P.	
<811>	Holding Company	T-Mobile USA Inc.	
<812>	Operating Company	Assurance Wireless USA, L.P.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	Virgin Mobile USA LP	159018	Assurance Wireless
_	Virgin Mobile USA LP	309005	Assurance Wireless
_	Virgin Mobile USA LP	179012	Assurance Wireless
	Virgin Mobile USA LP	589006	Assurance Wireless
_	Virgin Mobile USA LP	249013	Assurance Wireless of South Carolina LLC
_	Virgin Mobile USA LP	299018	Assurance Wireless
_	Virgin Mobile USA LP	449061	Assurance Wireless
_	Virgin Mobile USA LP	509006	Assurance Wireless
_	Virgin Mobile USA LP	199013	Assurance Wireless
	Virgin Mobile USA LP	339032	Assurance Wireless
	Virgin Mobile USA LP	209015	Assurance Wireless
_	Virgin Mobile USA LP	209015	Assurance Wireless
	PRWireless PR, LLC	639007	Open Mobile
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