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	473333	
<015>	Study Area Name	Fremont Telecom - RoR	
<020>	Program Year	2023	
<030>	Contact Name: Person USAC should contact with questions about this data	Michelle Owens	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4065415131 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	mowens@blackfoot.com	
	Form Type	54.313 and 54.422	

2022 JUL 14 AM III: 09

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(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
D. 2. 18 12 12 12 12 12 12 12 12 12 12 12 12 12	December 2020

<010>	Study Area Co					473333						
<015>	Study Area Na					Fremont Tel	ecom - RoR					
<020>	Program Year 2023											
<030>	Contact Name - Person USAC should contact regarding this data Michelle Owens											
<035>	Contact Telephone Number - Number of person identified in data line <030> 4065415131 ext.											
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	l in data line <0	30> mowens@blac	kfoot.com					
<210>	For the prior	r calendar yea	ar, were there	any reportal	ble voice serv	rice outages?				_		
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>&gt;</h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative 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
<b>《图图》是《中国共享》的《图图》的《图图》的《图图》的《图图》的《图图》的《图图》的《图图》</b>	December 2020

<010>	Study Area Code	473333		
<015>	Study Area Name	Fremont Telecom - RoR		
<020>	Program Year	2023		
<030>	Contact Name - Person USAC should con	ntact regarding this data Michelle Owens		
<035>	Contact Telephone Number - Number of person identified in data line <030>			
<039>	Contact Email Address - Email Address of person identified in data line moven##blackfoot.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	473333	
<015>	Study Area Name	Fremont Telecom - RoR	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com	

	unctionality in Emergency Situations Ollection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  December 2020		
<010>	Study Area Code	473333			
<015>	Study Area Name	Fremont Telecom - RoR			
<020>	Program Year	2023			
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens			
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com			
<600>	Certify compliance regarding ability to function in emergency situations	Yes			
<610>	Descriptive document for Functionality in Emergency Situations	472222id610.pdf			

ata Coll	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-081 December 2020
<010>	Study Area Code		473333	
<015>	Study Area Name		Fremont Telecom - RoR	
<020>	Program Year		2023	
<030>	Contact Name - Person	USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Nun	nber - Number of person identified in data line <030>	4065415131 ext.	
<039>	Contact Email Address	Email Address of person identified in data line <030>	mowens@blackfoot.com	
<810>	Reporting Carrier	Fremont Telcom Co.		
<811>	Holding Company	BTC Holdings, Inc.		
<812>	Operating Company	Fremont Telcom Co. DBA Blackfoot Communicat:	ions	
			Marine State William Co. of the State of the	
<813>		<a1></a1>	<a2></a2>	<a3></a3>
		Affiliates	SAC	<b>Doing Business As Company or Brand Designation</b>
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet
			See attached works	heet

(800) Operating Companies

	bal Lands Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 December 2020		
<010>	Study Area Code	473333			
<015>	Study Area Name	Fremont Telecom - RoR			
<020>	Program Year	2023			
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens			
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.			
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com			
<900>	Does the filing entity offer tribal land services? (Y/N)	No			
910>	Tribal Land(s) on which ETC Serves				
×920>	Tribal Government Engagement Obligation	Name	of Attached Document		
f vour c	company serves Tribal lands, please select (Yes,No, NA) for each these boxes				
	rm the status described on the attached PDF, on line 920,				
	trates coordination with the Tribal government pursuant to	Select			
	3(a)(5) includes:	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				
929>	Compliance with Tribal Business and Licensing requirements.				

TOTAL STREET,	oice 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		473333
<015>	Study Area Name		Fremont Telecom - RoR
<020>	Program Year		2023
<030>	Contact Name - Person USAC should contact regarding this data		Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line	<030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line	<030>	mowens@blackfoot.com
<1000>	Voice services rate comparability certification	Yes	
<1010>	Attach detailed description for voice services rate comparability compliance	47222	2id1010.pdf
			Name of Attached Document
<1020>	Broadband comparability certification	Yes the	- Pricing is no more than the most recent applicable benchmark announced by Wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance	47222	2id1030.pdf
			Name of Attached Document

The PERSON NO. (500, 600 No.	lo Terrestrial Backhaul Reporting llection Form			FCC Form 481 OMB Control No December 2020	. 3060-0986/OMB Control No. 3060-0819
<010>	Study Area Code	473333			
<015>	Study Area Name		Telecom - RoR		
<020>	Program Year	2023			
<030>	Contact Name - Person USAC should contact regarding this data  Contact Telephone Number - Number of person identified in data line <030>	Michell			
<035>	Contact Telephone Number - Number of person identified in data line <030>  Contact Email Address - Email Address of person identified in data line <030>		131 ext.		
<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 upstream within the supported area pursuant to § 54.313(g).	6 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
<010>	Study Area Code		473333	
<015>	Study Area Name		Fremont Telecom - RoR	
<020>	Program Year		2023	
<030>	Contact Name - Person USAC should contact regarding this data		Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data	line <030	> 4065415131 ext.	
<039>	Contact Email Address - Email Address of person identified in data	line <030	> mowens@blackfoot.com	
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans		472222id1210.pdf	
				Name of Attached Document
<1220>	Link to Public Website	НТТР	blackfootcommunications.com	
or the we	heck these boxes below to confirm that the attached document(s), on line obsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers mureport:			
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	1		
<1222>	Details on the number of minutes provided as part of the plan,	<b>1</b>		
<1223>	Additional charges for toll calls, and rates for each such plan.	1		

POR CONTRACTOR OF THE PARTY OF	ce Cap Carrier Additional Documentation			FCC Form 481
Data Colle	ection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
Including	Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			December 2020
<010>	Study Area Code	473333		
<015>	Study Area Name	Fremont Telecom - RoR		
<020>	Program Year	2023		
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens 4065415131 ext.		
<035>	Contact Telephone Number - Number of person identified in data line <030> Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com		
Select	the appropriate responses below (Yes, No, Not App	licable) to note complian	ce as a recipient of frozen H	High Cost support, High Cost support
to offs	et access charge reductions, and Connect America F	hase II support as set for	th in 47 CFR 54.313(c),(d),(e	e). The information reported on this
form a	nd in the documents attached below is accurate.			
<201	.5> 2016 and future Frozen Support Certification 47 CFI	R § 54.313(c)(4)		
Price (	Cap Carrier Connect America ICC Support {47 CFR §	54.313(d)}		
<201	6> Certification support used to build broadband			
Conne	ect America Phase II Reporting (47 CFR § 54.313(e))			
<2017A	> Connect America Fund Phase II recipient?			
<2017C	Total amount of Phase II support, if any, the price cap capital expenditures in 2021.	carrier used for		
-2010	Attach the number, names, and addresses of commu	nity anchor		
<2018>	Attach the number, names, and addresses of commu	nity anchor	Name of Attached Documer	nt Listing
	institutions to which the carrier newly began providin broadband service in the preceding calendar year - 54	-	Required Information	
Conn	ect America Phase II – FCC Form 470 Postings			
<2019>	For the filing due July 1 following full implementation answer yes, no, or not applicable to this certification r			

(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	473333	
<015>	Study Area Name	Fremont Telecom - RoR	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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)	(3007ь)
Name of Consultant	Name of Consultant Firm/Third Party

(3005) Rate Data Collect	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		473333	
<015>	Study Area Name		Fremont Teleco	m - RoR
<020>	Program Year		2023	
<030>	Contact Name - Person USAC should contact regarding this of	data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in	data line <030>	4065415131 ext.	
<039>	Contact Email Address - Email Address of person identified in	n data line <030>	mowens@blackfo	oct.com
financial r	m the drop down menu or check the boxes below to eporting requirements set forth in 47 CFR 54.313(f)(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)}		Yes - Attach Certif	ication 472222id3010.pdf
(3010B)	Please Provide Attachment	Name of Attach Information	ed Document Listing Required	4/2222Id30IV.pdI
	Rate-of-Return Community Anchor Institutions	mormation		
(3012A)	Indicate if the carrier newly deployed broadband service to community anchor institution(s) in the previous calendar year.	Yes - Attach	New Community Anchors	
(3012B)	Please Provide Attachment		ned Document Listing	472222id3012bCommunity Anchor Institution.xlsm
(50125)	Using link, download template and list the number,	Required Inform	nation	
	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)			
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	<ul><li>O</li></ul>	
(3014)	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:			
(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 Attach Information	ed Document 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)	<ul><li>O</li></ul>	
(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		1	
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows		1	
(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:		<b>/</b>	
(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.			472222id3026AuditedFinancials.pdf
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows	Name of Associ	hed Document Listing Require	4
(3026)	Attach the worksheet listing required information	Information	hed Document Listing Require	u

(3005) Rate Of Return Carrier Additional Documentation (Continued) Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-08
		December 2020
<010>	Study Area Code	473333
<010>	Study Area Code Study Area Name	473333 Fremont Telecom - RoR
<015>	Study Area Name	Fremont Telecom - RoR
<015> <020>	Study Area Name Program Year	Fremont Telecom - RoR 2023

Financial Data Summary	
(3027) Revenue	5993339
(3028) Operating Expenses	5004178
(3029) Net Income	690339
(3030) Telephone Plant In Service(TPIS)	23492207
(3031) Total Assets	20865562
(3032) Total Debt	6636122
(3033) Total Equity	14229440
(3034) Dividends	0

(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	December 2020

Study Area Code	473333
Study Area Name	Fremont Telecom - RoR
Program Year	2023
Contact Name - Person USAC should contact regarding this data	Michelle Owens
Contact Telephone Number - Number of person identified in data I	ine <030>
Contact Email Address - Email Address of person identified in data	line <030> mowens@blackfoot.com
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data I

### 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	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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)

(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></a>	<b><b></b></b>	
	Description Of Backhaul Technology	Date Backhaul Available	Newly Served Locations or Population
_			
_			
_			
_			
_			
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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	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com

Enter the total amount of Phase II Auction Support, if any, the carrier <6010> 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 Name of Attached 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).

**Document Listing Required** Information

### **Phase II Auction FCC Form 470 Postings**

For the filing due July 1 following full implementation of this <6013> 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	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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 2070

<010>	Study Area Code	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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 ail 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

ECC Form 491

OMB Control No. 3060-0986/OMB Control No. 3060-0819

December 2020

<010>	Study Area Code	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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

<9020>

<9030>

<9050>

<9012b> 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

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.

(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	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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 Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 December 2020	
<010>	Study Area Code	473333	
<015>	Study Area Name	Fremont Telecom - ROR	
<020>	Program Year	2023	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com	

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

	ing for CAF or LI Recipients	
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 scipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.		
Name of Reporting Carrier: Fremont Telecom - RoR		
Signature of Authorized Officer: CERTIFIED ONLINE	Date 07/12/2022	
Printed name of Authorized Officer: Stacey Mueller		
Title or position of Authorized Officer: Chief Financial Officer		
Telephone number of Authorized Officer: 4065415000 ext.		
Study Area Code of Reporting Carrier: 473333 Filing Due Date for this form: 07/29/202	2	

Certification - Agent / Carrier Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-081 December 2020
<010>	Study Area Code	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.com

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

certify that (Name of Agent) is authorized to submit the information reported on behalf of the reporting carrier; also certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized agent; and, to the best of my knowledge, the reports and data provided to the authorized agent is accurate.				
Name of Authorized Agent:				
Name of Reporting Carrier:				
Signature of Authorized Officer:	Date:			
Printed name of Authorized Officer:				
Title or position of Authorized Officer:				
Telephone number of Authorized Officer:				
Study Area Code of Reporting Carrier:	Filing Due Date for this form:			

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Recipien	ats 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:					
Signature of Authorized Agent or Employee of Agent:		Date:			
Name of Authorized Agent Employee:					
Title or position of Authorized Agent or Employee of Agent					
Telephone number of Authorized Agent or Employee of Ag	ent:				
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 19 18 of the United States Code, 18 U.S.C. § 1001.	934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title			

		December 2020
<010>	Study Area Code	473333
<015>	Study Area Name	Fremont Telecom - RoR
<020>	Program Year	2023
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@blackfoot.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

OMB Control No. 3060-0986/OMB Control No. 3060-0819

Please Provide Waiver Document Allowable File Type (pdf only)

ata Collection Form

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		473333
<015>	Study Area Name		Fremont Telecom - RoR
<020>	Program Year		2023
<030>	Contact Name - Person U	SAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Numb	er - Number of person identified in data line <030>	4065415131 ext.
<039>	Contact Email Address - E	mail Address of person identified in data line <030>	mowens@blackfoot.com
<810>	Reporting Carrier	Fremont Telcom Co.	
<811>	Holding Company	BTC Holdings, Inc.	
<812>	Operating Company	Fremont Telcom Co. DBA Blackfoot Communica	tions

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	Blackfoot Communications, Inc.	489018	Blackfoot Communications
	Syringa Networks, LLC.		
_	Vision Net, Inc.		
_	Blackfoot Telephone Cooperative, Inc.	483308	Blackfoot Communications
_	Blackfoot Telephone Cooperative, Inc.	482235	Blackfoot Communications
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