

Stratus Networks, Inc.

Missouri Public Service Commission

Company Name

(Provide the full name of the company as certificated or registered with the Missouri Public Service Commission, including any Commission approved d/b/a, if applicable. Please do not abbreviate.)

TELECOMMUNICATIONS COMPANY OR IVoIP PROVIDER ANNUAL REPORT TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of January 1 - December 31, 2019

This filing is required pursuant to Commission Rule 20 CSR 4240-28.012 and/or Section 392.210 RSMO. Please select how the company is certificated and/or registered with the Commission (check all that apply): Incumbent Local Telecommunications Company (ILEC) Competitive Local Exchange Telecommunications Company (CLEC) Interexchange or Local Non-Switched Telecommunications Company (IXC) Interconnected Voice over Internet Protocol Service Provider (IVoIP) If more than one certificate or registration is held by the company you must file an annual report in the Commission's Electronic Filing and Information System (EFIS) for each certificate or registration. In such situations, we anticipate the annual reports to be identical; however please verify the following: The various annual reports filed in EFIS are identical. The various annual reports filed in EFIS are different. Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.) Please choose one of the following filing options to indicate the security level of the filing: Public submission (NOT Confidential)

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Excel Issue Date: 11/08/2019

Rule 20 CSR 4240-2.135.

For this filing to be considered Confidential, additional submission of materials is required, pursuant to Commission

Non-Public submission (Confidential) (See instructions for special requirements.)

Annual Re	port of		Stratus Networks, Inc) <u>.</u>
, maar ito		alendar year of	f January 1 - December 31,	2019
State in full the comp	pany's information be	low:		
	d. Peoria Heights, IL		(309) 22	22-2123
Comp	pany Street Address		Teleph	one Number
1595 Peachtre	e Pkwy, Ste 20	04-337		
	ress (if different from stre			
Cumming	GA	30041		
City	State	Zip		
T t	Linformation in ECIO be	a baaa waxilayy	ed (and updated as applicable	١
• -		2 Decu leview	sa (ana ahaatea as abbucanie	<i>y</i> .
✓ Yes	☐ No			
Alisha Garland				
Alisha Gananu	Name			
	Name Pkwy, Ste 204-33	 37		
1595 Peachtree	Name Pkwy, Ste 204-33 Street Address	37		
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Annual Report of	Stratus Networks, Inc.
•	for the calendar year of January 1 - December 31, 2019

5. Please provide the following revenue information:

Row	RETAIL END USER REVENUES	22	MO Intrastate (Column A)	± •	4.	Total Company (Column B)	44
1.	Local Service (Basic local telecommunications service, IVoIP service and features associated with these services)						
2.	Interexchange Service (Message toll services, 800 services, interexchange operator services).						
3.	Non-Switched Services (Dedicated non-switched private line services typically used by business customers. Do not include special access or private line services provided to other telecommunications or IVoIP service providers which are reported in Row 7).						
4.	Bundled Voice Service (If telecommunications or IVoIP service is bundled with non-regulated services then a company may apply either of two methods in reporting bundled revenue in Column A. Method 1: Report bundled revenue in Column A based on the unbundled rate for telecommunications or IVoIP service; or Method 2: Report all bundled revenue in Column A.)						
5.	Retail Uncollectibles. (Amount is typically a negative number.)						201046297 2010502 2010502 2010502
6.	RETAIL END-USER TOTAL (Row 1+2+3+4+5) Revenue in Column A will be provided to Missouri USF Administrator for assessment purposes.)						
	WHOLESALE CARRIER'S CARRIER AND UNIVERSAL SERVICE FUND	RE'	VENUES				
7.	Revenue from services provided for resale as telecommunications or IVoIP services from another telecommunications or IVoIP service provider. This row typically includes revenue associated with switched access service, special access service, billing and collection service. NECA settlements, if any, should be reported solely in Column B.						
8.	Miscellaneous Carrier's Carrier Revenue (Remaining Carrier's Carrier Revenue provided in FCC Form 499-A, Block β that is not reported in Row 7).						
9.	Wholesale Uncollectibles. (Amount is typically a negative number.)						21.000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.000 21.0
10.	Federal USF Revenue (List federal USF revenue in Column B; however, any Connect America Fund Intercarrier Compensation funding used to replace revenue caused by mandatory intrastate switched access rate reductions should be reported in Column A.)						
11	State USF Revenue						
	TOTAL REVENUES (Row 6+7+8+9+10+11) The Total Revenue in Column A should match the Total Gross Intrastate Operating Revenue reported on the Missouri PSC's Statement of Revenue form.		** **			** **	

Revenue reporting clarifications:

Total Company Revenue (Column B) = Missouri Intrastate revenue in Column A + Interstate revenues + International revenues.

IVoIP revenue: If unable to distinguish Missouri Jurisdictional revenue in Column A then a safe harbor percentage can be applied to total revenue that corresponds to the FCC's safe harbor percentage.

Retail non-switched private line service revenue: All of a customer's non-switched private line service revenue can be reported in Column 8 if 10% of more of the customer's private line network traffic is considered interstate traffic.

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6. Line Quantities for Basic Local Telecommunications &/or IVoIP Services

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Totals:		** **	26% (SA)	79779137 1877975 1877976	** **	\$1,000 (g) 1,000 (g) 1,000 (g)

About reporting line quantities:

- 1. Report line quantities for basic local telecommunications service and/or IVoIP service as those terms are defined in 386.020(4) and (23).
- 2. Lines include analog and digital. For DS-1 or higher band-width facilities a voice grade equivalency must be used. For channelized service report the number of channels subscribed to by the customer. For non-channelized facilities, filers are instructed to use a good-faith esitmate of the number of voice grade equivalent lines used for voice service.
- 3. Exchange refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)
- 4. Per 392.550(7)(c) IVoIP line quantities must be filed on a confidential basis. See instructions for how to file annual report information on a confidential basis.

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for the calendar year of January 1 - December 31, 2019

Relay Missouri Assessment¹

Annual Totals

7.	Revenue Collected From Relay Missouri Surcharge		** **	14.000 14.000 14.000
	Amount Retained for Billing and Collecting the Surcharge	74.00 74.00	** **	editation Control
	Relay Missouri Revenue Remitted to Relay Missouri Fund		** **	1000 1000 1000 1000 1000 1000 1000 100

ð.	Please indicate the per line value of the Relay Missouri Surcharge applied to your customers in December.
	0.04
	If your firm did not impose the Relay Missouri Surcharge, please explain:
	N/A

1 ILECs, CLECs and IVoIP providers are required to complete this page; however, companies classified solely as IXCs are not expected to complete this page.

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for the calendar year of January 1 - December 31, 2019

VERIFICATION

The foregoing report must be verified by the Oath of the President, Treasurer, General Manager or Receiver of the company. The Oath required may be taken before any person authorized to administer an oath (Notary Public) by the laws of the State in which the same is taken.

	ā		OATH		
State Of	Georgia			}	
County Of	Forsyth			} ss: }	
	Alisha Garland Name of Affian	nt (Company Of	ficial/Representative)	makes oath an	d says that
s/he is	Attorney In Fact				
	Offi	icial Title of the	Afflant (Company Office	cial/Representative)	
of	Stratus Networks		of the Respondent (Co		
and is located at	Address and	NAME OF TAXABLE PARTY.	ber of the Affiant (Con	npany Official/Repre	sentative)
that s/he has 1) ex all statements of f business and affal company's contact listed contacts are	Address and amined the foregolic act contained in the irs of the above-nant information in EFI correct.	Telephone Num ng report; to the said report are ned respondent S; to the best of	ber of the Affiant <i>(Con</i> e best of his or her kno true and the said repo , and 2) examined (and f his or her knowledge	owledge, information ort is a correct stated updated as applic o, information, and	on, and belief, ement of the sable) the belief, all
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Missouri Revised Statutes § 392.210 or §393.140

CLA 1595 Peachtree Pkwy Ste 204-337 Cumming Ga 30041



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MO PUBLIC SERVICE COMMISSION
MAIL ROOM

Data Center Missouri Public Service Commission
P.D. Box 360

Jefferson City MO 65102-0360