## MCI Communications Services, Inc. d/b/a Verizon Business Services

#### **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

Tillo Illing	is required pursuant to commission reals 20 contact 20.012 and/or coolien coz.210 realion.
Please so	elect how the company is certificated and/or registered with the Commission (check bly):
	Incumbent Local Telecommunications Company (ILEC)
	Competitive Local Exchange Telecommunications Company (CLEC)
Χ	Interexchange or Local Non-Switched Telecommunications Company (IXC)
X	Interconnected Voice over Internet Protocol Service Provider (IVoIP)
the Comi	nan one certificate or registration is held by the company you must file an annual report in mission's Electronic Filing and Information System (EFIS) for each certificate or ion. In such situations, we anticipate the annual reports to be identical; however please following:
	The various annual reports filed in EFIS are identical.
Χ	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 cl	hoose one of the following filing options to indicate the security level of the filing:
X	Public submission (NOT Confidential)
	<b>Non-Public submission</b> (Confidential) (See instructions for special requirements.) For this filing to be considered Confidential, additional submission of materials is required, pursuant to Commission Rule 20 CSR 4240-2.135.

**Public** 

For use when filing under seal.

Excel Issue Date: 2/19/2020

Annual Report of MCI Communications Services, Inc. d/b/a Verizon Business Services  for the calendar year of January 1 - December 31, 2019					
State in full the company's i	information helo	· · · ·			
22001 Loudoun		vv .	703-547-2000		
Company Sti			Telephone Number		
, ,			·		
Company Mailing Address (if	different from stree	t address)			
Ashburn	VA	20147			
City	State	Zip			
The company's contact inform	nation in EEIS has	heen reviewe	d (and updated as applicable).		
		Deen leviewed	a (and updated as applicable).		
<b>☑</b> Yes	□ No				
Sharon Adams					
	me				
22001 Loudoun	County Parkway				
	Address				
Mailing	Address				
Ashburn	VA	20147			
City	State	Zip			
703-694-5951					
Telephone	e Number				
sharon.e.adams@verizon.com					
Email A	Address				
Identify the company's top thr Title	ee principal or ge	nerai officers a	at the end of the year. Name		
		_	Name		
President and C	FΩ		George Fischer		

SVP, GC and Secretary

John Frantz

Annual Report of	MCI Communications Services, Inc. d/b/a Verizon Business Services
	for the calendar year of January 1 - December 31, 2019

#### 5. Please provide the following revenue information:

Row	RETAIL END USER REVENUES	**	MO Intrastate (Column A)	**	**	Total Company (Column B)	**
1.	Local Service (Basic local telecommunications service, IVoIP service and features associated with these services)					REDACTED	
2.	Interexchange Service (Message toll services, 800 services, interexchange operator services).		REDACTED				
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.)						
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.)		REDACTED				
	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.		REDACTED				
8.	Miscellaneous Carrier's Carrier Revenue (Remaining Carrier's Carrier Revenue provided in FCC Form 499-A, Block 3 that is not reported in Row 7).						
9.	Wholesale Uncollectibles. (Amount is typically a negative number.)						
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						
12	<b>TOTAL REVENUES</b> (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.		REDACTED				

#### 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 B 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

	Line Quantities								
Exchange	**	Residential	**	**	Business	**			
The company is not a CLEC.		N/A			N/A				
Totals:									

#### 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 Assessment<sup>1</sup>

	Annual Totals
7. Revenue Collected From Relay Missouri Surcharge	
Amount Retained for Billing and Collecting the Surcharge	
Relay Missouri Revenue Remitted to Relay Missouri Fund	
8. Please indicate the per line value of the Relay Missouri Su	urcharge applied to your customers in December.
9. If your firm did not impose the Relay Missouri Surcharge,	, please explain:
The company is an IXC.	

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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#### **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.

OATH											
State Of		Virginia	}								
		Su	}	ss:							
County Of		Loudoun	Prince William								
T=	N S ASS - 4	Sharon Adam		makes oath and s	says that						
	Name of Affiant (Company Official/Representative)										
s/he is	Offici		ment Relations Ana ffiant (Company Official								
of			vices, Inc. d/b/a Veri		vices						
-			f the Respondent (Cer								
and is located at	2200	1 Loudoun Co	unty Parkway Ash	burn, VA 20147	(2)						
	Address and Te	elephone Numb	er of the Affiant (Com	pany Official/Represe	entative)						
that s/he has 1) examined the foregoing report; to the best of his or her knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent, and 2) examined (and updated as applicable) the company's contact information in EFIS; to the best of his or her knowledge, information, and belief, all listed contacts are correct.											
from	January 1	, 2019	, to and including _	December 31 ,	2019						
	Month/Day	Year		Month/Day	Year						
		Qiana	etura of Affiant (Comp	any Official/Represen	73/20						
Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "/s/" before the name.)											
Subscribed and sworn to before me, a Notary Public, in and for the State and County above named,											
this $25$ day of $1000$											
SAMIRA ABDUL HADI  NOTARY PUBLIC  REG. #7799393  COMMONWEALTH OF VIRGINIA  MY COMMISSION EXPIRES NOVEMBER 30, 2022  Notary Commission Number											