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)
X	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.
X	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)
	Non-Public submission (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

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State in full the company's	information belo	w:	
22001 Loudoui	n County Parkway		703-547-2000
Company S	Street Address		Telephone Number
Company Mailing Address (if different from stree	t address)	
Ashburn	VA	20147	
City	State	Zip	
The company's contact infor	mation in FFIS has	heen reviews	ed (and updated as applicable).
✓Yes	□ No	been review	ed (and appared as apprecisio).
	_ NO		
Annual Report Contact Infor			
List the contact information of t from the address in Item No. 1	he person completin	g the form, wh	nether an employee or a third-party preparer. This may dif
Sharon Adams			
N	ame		
	n County Parkway		
Street	Address		
Mailing	g Address		
Ashburn	VA	20147	
City	State	Zip	
703-694-5951			
Telepho	ne Number		
sharon.e.adams@verizon.con	<u>1</u>		
Email	Address		
Identify the company's top th	ree principal or ge	neral officers	at the end of the year.
Title			Name
President and	CEO		Raymond Wierzbicki
SVP and CE	·O		John Townsend

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.)		N/A				
11	State USF Revenue						
12	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.		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	**	
REDACTED		REDACTED			REDACTED		
Totals:							
i otais:							

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.

Public

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Annual Re	po	rt o	ſ
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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						
	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 Surcharge applied	d to your customers in	December.				
9.	. If your firm did not impose the Relay Missouri Surcharge, please explain:	:					
	Relay assessments of VoIP customers are assessed by the Company's CLEC affiliate (MCImetro Access Transmission						
	Services Corp.) and are included in the report filed by that company. There is not distinction between traditional voice						
	and VoIP customers for purposes of this surcharge. Therefore, the Company i	is unable to report them	separately.				

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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.

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		cial/Representative)	_			
s/he is	Offici		ment Relations Ana ffiant (Company Officia				
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	ture of Affiant (Compa	any Official/Represen	73/20		
			ronic signatures are used, you				
Subscribed and swo	rn to before me, a No	tary Public, in ar	id for the State and Cou	unty above named,			
this	× 5	day of	Vovember	_ , <u>2020</u>			
SAMIRA ABDUL HADI NOTARY PUBLIC REG. #7799393 COMMONWEALTH OF VIRGINIA MY COMMISSION EXPIRES NOVEMBER 30, 2022 Notary Commission Number							