

Missouri Public Service Commission
Annual Report Instructions
For Telecommunications Companies and IVoIP Providers

1. General Information:

- A. This report is due to the Missouri Public Service Commission on or before **April 15th** and is required to be filed on a calendar year basis pursuant to the Commission rules (4 CSR 240-3.540). **Failure to file this report by the deadline of April 15, could result in penalties up to \$100 for every day the report is late pursuant to Section 392.210, RSMo.**
- B. To file a Request for Extension of less than 30 days, you must make your request **on or before April 15th**. Instructions for seeking an extension are at Item 7e, below.
- C. This report is a Public document, unless you provide a confidential version and a public version. Instructions for filing a confidential version are at Item 4, below.
- D. This report may not combine information from two or more certificated or registered companies.
- E. A company with multiple certificates and/or registrations must file their annual report multiple times into the Commission's Electronic Filing and Information System based on each certificate and/or registration held by the company.

2. About the Form

- A. You are required to use one of the three versions provided by the Commission: 1) the **Adobe fillable** document, 2) the **Excel** version, or 3) the **Adobe** document that may be printed and completed by hand.
- B. The Excel and Adobe fillable documents must be saved or copied to your computer's hard drive to input information into the annual report form.
- C. If additional space is needed, insert an additional page on which you have copied the cell formats or lines to accommodate the necessary information or submit an additional document with the information.
- D. Questions about the annual report form or its contents may be submitted to: Kari Salsman at (573) 526-5630 or by e-mail at kari.salsman@psc.mo.gov.

3. IVoIP Providers

- A. If a company provides only IVoIP service or reports those line counts separately, the company is required to submit customer line counts (Form Page 5) as Proprietary. Please follow the instructions for filing confidential versions outlined below (see Item 4).

4. Confidential Treatment

- A. There are two levels of confidential treatment: proprietary and highly confidential. Information may be designated Highly Confidential in addition to or in place of Proprietary.
- B. Two versions of the annual report must be provided: a fully completed Non-Public version to be kept by the Commission with restricted access and a Public version with the confidential information redacted (removed).

(1) Public Version Requirements:

- a) Check the "Public Submission" box and mark the page "Public" in the lower right corner, in the box provided.
- b) Complete the form without the non-public information. Where information is left out, blank spaces must remain to ensure that the remaining information stays in the same place on the same page as in the non-public version. Proprietary information must have an asterisk at the beginning and the end of the field which held proprietary information. Highly confidential information must have two asterisks at the beginning and the end of the highly confidential information. Asterisk(s) shall be located on both sides of the blank field, in the fields provided, to indicate where the Highly Confidential or Proprietary information had been before redaction/removal (** **).

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- c) Each page on which information has been redacted must be marked “Public” in the lower right corner. A box has been provided to indicate the location where this information should be reflected.
- (2) Proprietary or Highly Confidential Version Requirements:**
- a) Check the “Non-Public Submission” box and denote “Proprietary” or “Highly Confidential” in the lower right corner, in the box provided.
 - b) Complete the form, including all confidential information. Confidential information on each page must be identified. Proprietary information must have an asterisk at the beginning and the end of the proprietary information. Highly confidential information must have two asterisks at the beginning and the end of the highly confidential information. Example: ****this is an example of how to mark highly confidential text****
 - c) Each page on which confidential information appears must be marked “Proprietary” or “Highly Confidential” in the lower right corner. A box has been provided to indicate where these should be located on the form.
- (3) Additional documents are required with both (Public and Confidential) submissions.**
- a) A cover letter must accompany each filing, in which the company states that some or all of the information in its annual report is designated as confidential and requests non-public treatment under seal. The letter must provide the name, phone number and e-mail address of the person responsible for answering questions regarding the confidential information.
 - b) An affidavit must be included, in which the company identifies the specific types of information to be kept under seal, justifies why the specific information should be a closed record and attests that none of the information is available to the public in any format.

5. Specific Page Instructions

A. Form Page 5 – Line Quantities

Completion of Form Page 5 is required **only** of companies providing **local voice services** described in 392.245.5(3) or **VoIP service** defined in 386.020(23). Line counts that record **only** VoIP lines are to be filed as non-public information; see Instructions Sections 3 and 4.

- (1) Retail:** Use these columns to report residential and business local voice service or VoIP lines if the end-user’s rates for these services are set by the company filing this report. Do **not** use these columns for any lines that enable another provider to serve end-user customers. Lines include all analog and digital (whether circuit switched or packet switched) exchange lines and single and bi-directional Key/PBX trunk facilities connecting end-users to the Public Switched Telephone Network, or permitting such connections pursuant to 386.020(23). For DS-1 or higher band-width facilities, whether circuit or packet switched, a voice grade equivalency must be used. For channelized service, report the number of channels subscribed to by the customer. For example, a fully configured DS-1 facility is to be counted as 24 voice-grade equivalent lines. For partially equipped DS-1 facilities, count only the number of channels actually subscribed to by the end-user. For non-channelized facilities, filers are instructed to use a good-faith estimate of the number of voice grade equivalent lines used for voice communications.

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- (2) **Wholesale to Non-Registered Nomadic VoIP Providers:** Use this column to report Interconnected VoIP lines that enable another provider to serve end-user customers. Do not report lines in this column if they are used to directly serve your company's end users; report such lines in the retail columns. Do not report lines in this column if the other provider is also certificated or registered by the **Commission**.

B. Verification Page - Note: Please read the language in it carefully before completion.

The verification page must be completed in full, including notary seals, if or where applicable. This page must accompany all versions of this report including any highly confidential, proprietary and public versions. An updated verification page is required with any amended or revised submission attesting to the added/revised information.

- (1) **Exact Legal Title or Name of the Respondent:** Company Name as certificated/registered with the Commission, as listed on the cover and the top of the verification sheet.
- (2) **Signature of Affiant:** Signature of authorized company representative named above on the verification page.
- (3) The remaining fields are for completion by the notary including the date, month and year of the notarization, the notary's commission expiration date, notary signature, and placement of the notary stamps or seals, where applicable.
- (4) **Electronic submission:** When submitting the annual report form electronically, complete the verification page in full. Electronic signatures are acceptable pursuant to Sections 432.200 through 432.295 RSMo. The original document shall be notarized and kept for your records. On the electronic version, type the electronic signatures (i.e., /s/ John Doe) and the dates that are reflected on the original notarized document.

6. Submitting the Report

- A. The Commission prefers to receive annual reports electronically. The PSC Electronic Filing and Information System (EFIS) accepts submissions 24 hours a day and saves on postage/shipping expenses. **Do not submit the report by e-mail or fax.** Specific instructions for electronic filing are set out at item 7. Electronic Filing Instructions, below.
- B. A hard copy of the report may be mailed to the following addresses:

For U.S. Mail: Missouri Public Service Commission
Attention: Data Center
P.O. Box 360
Jefferson City, MO 65102-0360

For package delivery: Missouri Public Service Commission
Attention: Data Center
200 Madison Street, Suite 100
Jefferson City, MO 65101

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7. Electronic Filing Instructions Using EFIS

If you submit your information electronically, please **do not** send in a paper copy.

A. To file in the Electronic Filing and Information System (EFIS):

- You must have a user ID and password,
- The company you are filing on behalf of must be registered in EFIS. (All certificated companies are already registered in EFIS. Please do not create a company registration),
- The person making the filing must be registered as a contact for the company/firm they are making the filing on behalf of, and
- You need to have the document you want to submit saved electronically.

If you are unsure if you have a user ID, if your company is registered, or if you are registered as a contact for the company, please contact the Data Center at datacenter-psc@psc.mo.gov or (573) 751-7496 before completing new registration information.

B. To access EFIS, go to the PSC website at <http://www.psc.mo.gov>. Click the '**EFIS / Case Filings**' link from the menu on the left-hand side. Scroll down to the 'Main Menu Section of EFIS' and click on the '**EFIS**' link. This will take you to the EFIS Welcome Screen.

1. Click the orange '**Logon**' button on the left-hand side.
2. Enter your User ID and Password. *Note: Passwords are case sensitive.*

C. Submission of Annual Report

1. Click on the '**Filing/Submission**' menu option.
2. Click on the 'Non-Case Related Submission' link.
3. Complete the Non-Case Related Submission screen with the following information:
 - a) **Type of Utility** – Select the utility type for which the company is certificated/registered.
Note: Separate submissions are required if a company has multiple certifications/registrations (**Example:** CLEC and IXC; a submission shall be entered under the CLEC registration, then a separate submission using these same steps should be made under the IXC registration; the same attachment can be used for both submissions if the report includes information about both registrations/certifications sharing the same legal name; the same scenario applies to a company with the same legal name registered and/or certificated any two or more utility types).
 - b) **Company** – Select certificated company name. Choose the d/b/a name, if applicable.
 - c) **Type of Submission** – Select 'Annual Report (MO PSC)'.
d) **Total Missouri Jurisdictional Revenue** – Enter the amount from the annual report form on Form Page 3, Row 13, Column A.
 - e) **Report for Calendar Year** – Enter the current calendar year.
 - f) **Applicable Case No.** – Leave blank.
 - g) Click on the '**Continue**' button. This will take you to the Filing/Submission Attachment screen.
 - h) Click on '**Browse**' – Select the file that contains the completed annual report.
 - i) Choose the security level for your document: Public, Highly Confidential, or Proprietary.
 - j) Click the '**Attach**' button. On-screen instructions are provided for attaching more than one document.
 - k) Confirm that the correct document is attached before proceeding.
 - l) Click the '**Done with Attach**' button. This will return you to the original submission screen.

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m) Scroll down and click on the **'Submit'** button.

This will complete your submission and assign a non-case related tracking number BMAR-20xx-xxxx). Please retain this number for your records.

D. Submission of Additional Information

To submit additional or amended information:

1. Click on the **'Filing/Submission'** menu option.
2. Click on the **'Non-Case Related Supplemental Submission'** link. Complete the Non-Case Related Supplemental Submission screen with the following information:
 - a) Enter the Tracking Number from your original annual report submission.
 - b) Select the most appropriate Title of Filing from the drop down list and enter any applicable comments.
 - c) Select the company name from the **'Filing on Behalf of'** drop down list.
 - d) Repeat steps from 7(C)(3)(g) through 7(C)(3)(m) above.

E. Request for Extension of less than 30 days:

1. All annual report extension requests must be on company letterhead and signed by an officer of the company or on the form provided on the PSC website (www.psc.mo.gov/forms) and signed electronically. **You must include an e-mail address** where you can be notified (usually within five business days) of approval or denial of the extension request.
2. To submit the document in EFIS, follow the instructions for filing an annual report (7C above), but select **'Annual Report (MO PSC) Extension Request'** as the type of submission instead. Under 'Browse', attach your documentation for requesting an extension.

Once your submission is complete, you will be assigned a non-case related tracking number (BARE-20xx-xxxx). Please retain this number for your records.

Multiple Company names cannot be listed. The only exception is if a company uses a d/b/a name and the company lists both the parent name and the d/b/a name.

Company Name

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

**TELECOMMUNICATIONS COMPANY OR IVoIP PROVIDER
ANNUAL REPORT
TO THE
MISSOURI PUBLIC SERVICE COMMISSION**

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

Company name and certificates/registrations must exactly match MoPSC records (see list at <http://www.psc.mo.gov/forms/forms>).

Please select how the company is certificated or registered with the Commission under the Company Name as shown above (check all that apply):

- Incumbent Local Telecommunications Company (not competitively classified ILEC)
- Incumbent Local Exchange Telecommunications Company (competitively classified ILEC)
- Competitive Local Exchange Telecommunications Company (CLEC)
- Interexchange Telecommunications Company (IXC)
- Local Non-switched Telecommunications Provider (classified in EFIS as IXC)
- Interconnected Voice over Internet Protocol Service Provider (IVoIP)

If more than one certificate or registration is held by the company then keep in mind that you must file an annual report in the Commission's Electronic Filing and Information System (EFIS) based on 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 Proprietary or Highly Confidential)
- Non-Public submission** (Highly Confidential or Proprietary)
(See instructions for special requirements.)

Please review the instructions document before proceeding by using the link below:

[Instructions - Annual Report Telco and IVoIP](#)

If checked, ensure a public version is submitted.

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

1. State in full the company's information below: ←

Ensure all requested information is provided.

_____			_____
Company Street Address			Telephone Number
_____			_____
Company Mailing Address			Fax Number
_____			_____
City	State	Zip	E-Mail Address

2. This company is currently a (check appropriate box): ←

A box must be checked. If 'other' is selected, then explain.

- Corporation Sole Proprietorship LP
 Partnership LLC Other - Explain

3. Annual Report Contact Information:

List the contact information of the person completing the form, whether an employee or a third-party preparer. This may differ from the address in Item No. 1.

Ensure all requested information is provided.

_____			_____
Name			Telephone Number
_____			_____
Street Address			Fax Number
_____			_____
Mailing Address			E-mail Address
_____			_____
City	State	Zip	

4. Identify the principal or general officers of the company at the end of the year. Please include an additional sheet, if enough space is not provided on this page, to completely provide the requested information.

Title of General Officer	Name of Person Holding Office
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Must list name/title of at least one general officer.

5. Please provide a list of all mergers, consolidations, and reorganizations involving the registered or certificated company and completed during the last year. Do not include internal company reorganizations or personnel issues.

6. Please provide the following information concerning the company's revenues for this calendar year:

Row	Revenues	MO Jurisdictional (Column A)		Total Company ¹ (Column B)	
I. RETAIL					
1.	Local Service Revenues include tariffed revenues attributed to local telecommunications services, extended area service, secondary features such as call forwarding, caller ID, local operator services, directory-related services, etc. and for IVoIP service.	**	**	**	**
2.	Interexchange Revenues include revenues attributed to interexchange telecommunications services such as toll services, 800 services, interexchange operator services and interexchange IVoIP services.				
3.	Non-Switched Telecommunications Service Revenues include revenues attributed to retail local and interexchange private line services (but not special access or private line services provided to other telecommunications carriers).				
4.	Bundled or Packaged Revenues include any revenues whereby the company is providing voice services in combination with multiple services whereby revenue can not be easily attributed to local, interexchange or non-switched categories. If such bundles includes Internet, video or some non-regulated service then the company's revenue shall be based on the company's rate offer for solely voice services. The excess revenue associated with the bundled service which is over the amount related to revenue associated with voice only service shall be recorded in the Total Company column. If voice service is only offered as part of a bundled service, the company shall identify all revenue associated with the bundle of services in the Missouri Jurisdictional column.				
5.	Retail Uncollectible Revenues from telecommunications revenues. (This amount is generally a negative number.)				
6.	RETAIL TOTAL (This amount should equal the total of Rows 1 - 5 above and should also match your Missouri Universal Service Fund Net Jurisdictional Revenue Report amount.)				
II. OTHER					
7.	Wholesale Revenues include intrastate switched, special access service revenues, carrier billing and collection revenues, and any other revenues derived from other telecommunications carriers.				
8.	Miscellaneous Revenues² associated with non-retail services , such as, advertising revenues, rent revenues, corporate operations revenues, special billing arrangements, customer operations, plant operations, other incidental regulated revenues, and other revenue settlements. (NOTE FOR ILEC ONLY : refer to FCC account #: 5230, 5240, 5250, 5261, 5262, 5263, 5264, 5269, and 5270.)				
9.	Other Uncollectible Revenues from other revenues. (This amount is generally a negative number.)				
10.	High-Cost Federal USF Revenues include all revenues received as support from the Universal Service Fund for the High-Cost program.		N/A		
11.	Other Federal USF Revenues include all revenues received as support from the Universal Service Fund for the following programs: Low Income, Schools and Libraries, and Rural Health.		N/A		
12.	State USF Revenues include all revenues received as support from the Universal Service Fund.				
13.	TOTAL REVENUES (This amount should equal the total of Rows 6 - 12 above.) Total MO Jurisdictional Revenue (Column A) should match Total Gross Intrastate Operating Revenue on the Statement of Revenue .				



These two cells cannot be left blank and must contain a number or 0. If a positive number, then must fill in rows above.

"Telecommunications Service" as defined by Missouri Revised Statutes Section 386.020
 "Interconnected Voice over Internet Protocol service" as defined by Section 386.020(23)
¹ List total regulated revenue and IVoIP revenue provided by a registered company and listed at the top of this page.
 Do not include revenues for any company NOT listed at the top of the page.

² - If you have miscellaneous revenue related to retail telecommunications services, then enter it in Row 1.



For use when filing under seal.

7. Line Quantities for Local Voice Service & IVoIP Service¹

Exchange ²	Retail						Wholesale to Non-Registered Nomadic IVoIP Providers ³	**
	**	Residential	**	**	Business	**		
Totals:								

If reporting line quantities, then ensure lines are reported by exchange.

Any ILEC, CLEC, or VoIP provider must complete this page. If a company does not have any line quantities, then insert '0' in total row for all three columns. Submitting 'n/a' is not acceptable.

¹ See instructions for additional clarification about filling out this page.
² **Exchange** refers to areas as listed in ILEC tariffs. (Exchanges are not always the same as rate centers, wire centers and central offices.)
³ **Wholesale to Non-registered Nomadic IVoIP Providers** refers to arrangements where your company is providing wholesale services for a nomadic IVoIP provider who is not registered with the Missouri PSC. (Do not use this column for retail line quantities or if your company sets the end user's rates.)

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

Any ILEC, CLEC or VoIP provider must comply with these instructions.

Relay Missouri Annual Billing, Collections and Retention

8. Any ILEC, CLEC or VoIP provider must submit information in the table below. (The table should be completely filled-in. The only exception is if a company is reporting "0" line quantities on page 4 whereby insert \$0 in the total row for each of the three columns.)

Month	Relay Missouri Revenue Collected (collected or received, according to your record-keeping methods)		Relay Missouri Retention Amount (of the amount collected)		Relay Missouri Revenue Remitted to Commission (of the amount collected)	
	**	**	**	**	**	**
January						
February						
March						
April						
May						
June						
July						
August						
September						
October						
November						
December						
Total						

9. Please indicate the per line value of the Relay Missouri Surcharge applied to your customers in December.

10. If your firm did not impose the Relay Missouri Surcharge, please explain:

An explanation must be provided if company is reporting line quantities on page 4, but fails to show any Relay Missouri revenue in the above table.

¹ Companies classified in the MoPSC's EFIS system solely as IXC's are not expected to complete this page.

For use when filing under seal.

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

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 _____ }
County Of _____ } ss:

Name of Affiant (Company Official/Representative)
s/he is _____
Official Title of the Affiant (Company Official/Representative)
of _____
Exact Legal Title or Name of the Respondent (Certificated Company Name)
and is located at _____
Address and Telephone Number of the Affiant (Company Official/Representative)

All fields on this page must be completed, including the notary information.

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 _____, _____, to and including _____ December 31 _____, _____
Month/Day Year Month/Day Year

All fields on this page must be completed, including the notary information.

Signature of Affiant (Company Official/Representative)
Subscribed and sworn to before me, a Notary Public, in and for the State _____ and County above named,
this _____ day of _____,
My Commission expires _____,

Signature of Notary Public

Missouri Revised Statutes § 392.210 or §393.140