

**INTEREXCHANGE CARRIERS
OPERATOR SERVICES PROVIDERS
and
OTHER TELECOMMUNICATION COMPANIES**

ANNUAL REPORT

of

(Legal Name of Utility)

(Address of Utility)

(MPSC Utility Identification Number)

to the

**MISSISSIPPI PUBLIC SERVICE COMMISSION
P.O. Box 1174
Jackson, MS 39215-1174**

FOR YEAR ENDED _____

Instructions for Filing the Annual Report

General Information

I. Purpose:

This report is a regulatory support requirement as set forth by §77-3-79 of the Public Utilities Act of 1983. It is designed to collect financial and operational information from public utilities under the jurisdiction of the Mississippi Public Service Commission.

II. Who Must Submit:

All public utilities who hold a Certificate of Public Convenience and Necessity and whose rates are subject to the regulation of the Mississippi Public Service Commission. In case of multi-utility operations, ***a separate annual report must be filed for each utility***. Example: Where a utility holds a Certificate to operate both water and sewer or water and gas.

III. When and Where to Submit:

a) This report is to be submitted on or before May 1 of the year following the year covered by said report.

b) Submit the **original** annual report to:

Mississippi Public Service Commission
Attention: Wayne Wilkinson
P.O. Box 1174
Jackson, MS 39215-1174
(601) 961-5481
FAX (601) 961-5804

General Instructions

- I. Complete each question fully and accurately even if it has been answered in a previous annual report. Enter the word “None” where it truly and completely states the fact.
- II. For any item that is not applicable to the respondent, enter the words “Not Applicable” or “NA”.
- III. Revenue must be broken down by class – Residential, Commercial, and Institutional. Also, the number of customers in each class must be indicated.
- IV. Indicate negative amounts (such as decreases) by enclosing the figures in parentheses ().
- V. Provide a supplemental statement further explaining accounts or items as necessary. Attach the supplemental statement (8 ½ X 11 inch size) to the page being supplemented. Provide the appropriate identification information, including the title of the page and page number supplemented.
- VI. Do not make references to reports of previous years or to other reports in lieu of required entries.
- VII. Complete the **original** report in permanent black ink or on the computer.

General Penalties

Miss. Code Ann. (as amended) §77-3-81 - Any person or corporation which willfully and knowingly violates...any part or provision thereof, of the commission shall be guilty of a misdemeanor and, upon conviction thereof, shall be subject to a fine of not more than Two Thousand Five Hundred Dollars (\$2,500.00)...

Miss. Code Ann. (as amended) §77-3-81 (1) (b) ...and in case of a continuing violation after a first conviction, each day's continuance thereof shall be deemed to be a separate and distinct offense.

Miss. Code Ann. (as amended) §77-3-83 All penalties accruing under this article

SCHEDULE 1 – IDENTIFICATION

1.	Legal Name – Exact name of the legal entity certified by this agency: (corporate name, owner’s name, partnership name, etc.)
2.	Utility Name – Exact name of the utility for which this report is made: (trade name, d/b/a, etc. – may be same as #1.)
3.	Business Address: PO Box/Street: _____ City/State: _____ Zip: _____ Phone: _____
4.	Name of principal agent and title (Pres., CEO, Manager, Owner, etc.)
5.	Principal General Officers:
6.	If a corporation, give date and State of Incorporation:
7.	Date operations began in Mississippi:
8.	Number of full-time employees in Mississippi:
9.	If a change in Legal Name (1) or Utility’s Name (2) has occurred since the last report, give former name, date of change and a brief explanation:
10.	Location of Points of Presence (POPs) in Mississippi:
11.	Person to whom correspondence should be addressed concerning this report: Name: _____ Title: _____ Address: _____ City/State/Zip: _____ Phone: _____

TABLE OF CONTENTS

BALANCE SHEET – TOTAL COMPANY.....	1-2
INCOME STATEMENT – MISSISSISSIPPI JURISDICTION.....	3
OPERATING REVENUES – MISSISSIPPI JURISDICTION.....	4
OPERATING EXPENSES – MISSISSIPPI JURISDICTION.....	5-6
OPERATING TAXES – MISSISSIPPI JURISDICTION.....	7
FEDERAL INCOME TAXES – MISSISSIPPI JURISDICTION.....	8
ANALYSIS OF TELEPHONE PLANT – TOTAL COMPANY.....	9
ANALYSIS OF TELEPHONE PLANT LOCATED IN MISSISSIPPI.....	10
SIGNATURE PAGE.....	11

Balance Sheet Total Company

Line No.	Account (a)	Balance at Beginning of Year (b)	Balance at End of the Year (c)	Increase (d)
	Current Assets			
1	Cash & Equivalents			
2	Net Receivables			
3	Inventories			
4	Prepaid Accounts			
5	Other Current Assets			
6	Total (lines 1 thru 5)			
	Noncurrent Assets			
7	Investments			
8	Other Noncurrent Assets			
9	Deferred Charges			
10	Other Assets – Net			
11	Total (lines 7 thru 10)			
	Property, Plant & Equipment			
12	Telecommunications Plant in Service			
13	Property Held for Future Telecom Use			
14	Telecom Plant Under Construction			
15	Telecommunications Plant Adjustment			
16	Non Operating Plant			
17	Subtotal (lines 12 to 16, inclusive)			
18	Goodwill			
19	Less Depreciation & Amortization Reserves			
20	Total			
21	Total Assets & Other Debits			

Balance Sheet Total Company

Line No.	Account (a)	Balance at Beginning of Year (b)	Balance at End of the Year (c)	Increase (d)
	Current & Accrued Liabilities			
22	Accounts & Notes Payable			
23	Current Maturities			
24	Current Taxes			
25	Other Current & Accrued Liabilities			
26	Total (lines 22 thru 25)			
	Long-Term Debt			
27	Funded Debt			
28	Other			
29	Total (lines 27 thru 28)			
	Other Liabilities & Deferred Credits			
30	Other Liabilities & Deferred Credits			
31	Noncurrent Taxes			
32	Other Liabilities & Deferred Credits			
33	Total (lines 30 thru 32)			
	Stockholder's Equity			
34	Capital Stock			
35	Additional Paid-in Capital			
36	Treasury Stock & Other Capital			
	Retained Earnings			
37	Appropriated & Unappropriated Retained Earnings			
38	Total (lines 34 thru 37)			
39	Total Liabilities & Other Credits			

Income Statement - Mississippi Jurisdiction

Line No.	Account (a)	Amount for the Current Year (b)	Increase Over Preceding Year (c)
1	Operating Revenues (Page 4, Line 12)		
2	Operating Expenses (Page 6, Line 27)		
3	Depreciation		
4	Amortization		
5	Total (lines 2 thru 4)		
6	Net Operating Revenues Before Taxes (lines 1-5)		
	Other Income, Expenses & Taxes		
7	Other Operating Income & Expense		
8	Federal Taxes		
9	State, Local & Other Taxes		
10	Total Operating Taxes (line 8 + line 9)		
11	Interest & Related Items		
12	Net Income Before Extraordinary Items (line 6, line 7, line 10, line 11)		
13	Extraordinary Items		
14	Net Income		

Operating Revenues – Mississippi Jurisdiction

Line No.	Operating Revenue Accounts (a)	Amount for the Year (b)	Increase Over Preceding Year (c)
	Long Distance Message Revenues		
1	Long Distance Message Revenue*		
2	Unidirectional Long Distance Revenue		
3	Long Distance Private Network		
4	Other Long Distance Revenue*		
5	Other Long Distance Revenue Settlements		
6	Total Long Distance Revenues		
	Miscellaneous Revenues		
7	Rent		
8	Other		
9	Total Miscellaneous		
10	Total Operating Revenues Before Uncollectibles (line 6 + line 9)		
	Uncollectible Revenues – DR.		
11	Total Uncollectibles		
12	Total Operating Revenues (line 10 minus line 11)		

*For these categories, please specify below those amounts attributable to operator services.

Other Long Distance Revenue		
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Operating Expenses – Mississippi Jurisdiction

Line No.	Operating Expense Accounts (a)	Amount for the Year (b)	Increase over Preceding Year (c)
	Plant Specific Operation Expenses		
1	Network Support Expenses		
2	General Support Expenses		
3	Cable & Wire Facilities Expenses		
4	Total Plant Specific		
	Plant Non-Specific Expenses (exclude depreciation & amortization)		
5	Other Property, Plant & Equip. Expense		
6	Total Plant Non-Specific		
	Customer Operations Expense		
7	Product Management		
8	Sales		
9	Product Advertising		
10	Total Marketing		
11	Customer Services		
12	Total Customer Operating Expenses		
	Corporate Operations Expense		
13	Executive		
14	Planning		
15	Total Executive & Planning		

Operating Expenses – Mississippi Jurisdiction (continued)

Line No.	Operating Expense Accounts (a)	Amount for the Year (b)	Increase over Preceding Year (c)
	General & Administrative		
16	Accounting & Finance		
17	External Relations		
18	Human Resources		
19	Information Management		
20	Legal		
21	Procurement		
22	Research & Development		
23	Other General & Administrative		
24	Total General & Administrative (lines 16 -23)		
25	Provision for Uncollectible Notes Rec.		
26	Total Corporate Operating Expense (line 15 + 24 + 25)		
27	Total Operating Expense (line 4 + 6 + 12 + 26)		

OPERATING TAXES – MISSISSIPPI JURISDICTION

Line No.	Taxing Authority (a)	Types of Tax						
		Property (b)	Income (c)	Gross Receipts (d)	Capital Stock (e)	Social Security (f)	Other (g)	Total (h)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11	Total							
12	Billed by Others							
13	Billed to Others							
14	Charged to Construction							
15	Net charged to account							

PREVIOUS YEAR FEDERAL INCOME TAXES – TOTAL COMPANY

Line No.	Account (a)	Debit or Credit Amount (b)
1	Federal Income Taxes – Operating	
2	Federal Income Taxes – Nonoperating	
3	Income Tax Effect of Extraordinary & Delayed Items - Net	

ANALYSIS OF TELEPHONE PLANT – TOTAL COMPANY

Line No.	Transfers & Adjustments (a)	Balance at end of the Year (b)	Accumulated Depreciation (c)	Net Plant in Service (d)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				

() denotes credit amount in column (c) and reverse amount in other columns

ANALYSIS OF TELEPHONE PLANT LOCATED IN MISSISSIPPI

Line No.	Account (a)	Balance Beginning of the Year (b)	Plant Additions (c)	Plant Retirements (d)	Transfers and Adjustments (e)	Balance at End of the Year (f)	Accumulated Depreciation (g)	Net Plant in Service (h)
1	Buildings							
2	Furniture & Office Equipment							
3	Vehicles & Other Work Equip.							
4	Other (specify)							
5	Subtotal							
6	Telephone Plant Acquired							
7	Telephone Plant Sold							
8	Total Telephone Plant in Service							

() denotes credit amount in column (g) and reverse amount in other columns

SIGNATURE PAGE

I _____ certify that I am the responsible
accounting officer of _____;
that I have examined the foregoing report; that to the best of my
knowledge, information and belief, all statements of fact
contained in this report are true and the report is a correct
statement of the business and affairs of the above named
respondent in respect to each and every matter set forth therein
during the period from
_____ to _____ inclusive.

Date _____
Signature _____
Title _____
Telephone Number _____