Office No.: (678) 672-2800 Fax No.: (678) 672-2830



1725 Windward Concourse, Suite 150 Alpharetta, GA 30005

April 15, 2021

Via EFIS

Data Center Missouri Public Service Commission 200 Madison Street, Suite 100 Jefferson City, MO 65101

RE: GTL (Public Communications)
Missouri Annual Report

Dear Commission,

Attached, please find the Missouri Annual Report for GTL (Public Communications). On behalf of GTL (Public Communications), we hereby submit a proprietary annual report to be kept under seal, along with a redacted public version of the report. Also being filed with each version of the report is an affidavit attesting to the reasoning behind the confidential filing.

Questions regarding the confidential version of the annual report should be directed to Susan Cockerham at (678) 672-2837 or at scockerham@fastektax.com.

Thank you,

1st Susan Cockerham

Susan Cockerham Regulatory Agent FAStek Compliance Solutions, Inc. f/k/a Telecom Professionals, Inc.

BEFORE THE PUBLIC SERVICE COMMISSION OF THE STATE OF MISSOURI

STATE OF GEORGIA)
) §§
COUNTY OF FULTON)

I, Susan Cockerham, of lawful age and being duly sworn, state that I am presently the Regulatory Agent of GTL (Public Communications), a public utility regulated by the Missouri Public Service Commission (MoPSC).

I attest that GTL (Public Communications) is not a publicly traded company. As such, GTL (Public Communications) does not file financial statements with the SEC. The financial information within this annual report is considered sensitive in nature, which GTL (Public Communications) protects from disclosure. This information is not generally available to those inside the Company without specific need-to-know, and the Company keeps it in a secure location to prevent inadvertent disclosure. This information has not been released previously. Public disclosure of the information would cause undue harm to GTL (Public Communications) and would prove detrimental to GTL (Public Communications)'s competitive position in the marketplace.

Respectfully,

Susan Cockerhan

Affiant

Subscribed and sworn to before me this 8^{th} day of April 2021.

alle Dundy

My commission expires: September 20, 2022

(SEAL)

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, 2020

This filing is	s required pursuant to Commission Rule 20 CSR 4240-28.012 and/or Section 392.210 RSMO.
Please se	elect how the company is certificated and/or registered with the Commission (check ly):
	Incumbent Local Telecommunications Company (ILEC)
	Competitive Local Exchange Telecommunications Company (CLEC)
Х	Interexchange or Local Non-Switched Telecommunications Company (IXC)
	Interconnected Voice over Internet Protocol Service Provider (IVoIP)
the Comn registration	nan one certificate or registration is held by the company you must file an annual report in nission's Electronic Filing and Information System (EFIS) for each certificate or on. In such situations, we anticipate the annual reports to be identical; however please following:
	The various annual reports filed in EFIS are identical.
	The various annual reports filed in EFIS are different.
X	Not applicable (Company only has one certificate or registration; therefore only one annual report was filed in EFIS.)
Please ch	noose 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.
Excel Issue Da	te: 2/19/2020 PUBLIC For use when filing under seal.

Form Page 1

Annual Report of	GT	L (Public Co	mmunications)
	for the cale	endar year of Ja	anuary 1 - December 31, 2020
State in full the company's inf	ormation belo	w:	
3120 FAIRVIEW PARK DRIV	/E. STE 300		703-955-3910
Company Street	Address		Telephone Number
SAME			
Company Mailing Address (if diff	erent from street	address)	
FALLS CHURCH	VA	22042	
City	VA State	22042 Zip	
The company's contact informati	on in EFIS has l	been reviewed	(and updated as applicable).
	No		
		the form, whet	her an employee or a third-party preparer. This may dif
from the address in Item No. 1.			
SUSAN COCKERHAM Name			
	IDOE OLUTE	450	
1725 WINDWARD CONCOL Street Add		150	
	1655		
SAME Mailing Add	Iress		
ALPHARETTA	GA	30005	
City	State	Zip	
678-672-2837		•	
Telephone N	umber		
scockerham@fastektax.com			
Email Add	ress		
Email / Idai	000		
Identify the company's top three	nrincinal or gen	eral officers at	the end of the year
Title	principal of gen	iorai omicers a	Name
PRESIDENT, CEO		DI	EB ALDERSON
SECRETARY, VP			LAUDIA REGEN
TDEAGLIDED CEO			NUMBERCED

Annual Report of	GTL (Public Communications)	
	for the calendar year of January 1 - December 31, 2020	

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)						
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.)						
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 FUI	ND R	EVENUES				
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 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	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 B if 10% of more of the customer's private line network traffic is considered interstate traffic.

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For use when filing under seal.

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

		Liı	ne Q	uan	tities	
Exchange	**	Residential	**	**	Business	**
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.

PUBLIC
For use when filing under seal.

for the calendar year of January 1 - December 31, 2020

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	
Ω	Please indicate the per line value of the Relay Missouri Surcharge a	onlied to your customers in December
υ.		pplica to your dustomers in Becchiber.
^		
9.	If your firm did not impose the Relay Missouri Surcharge, please exp	olain:
1	# FO OLFO LIVED 11	

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

PUBLIC

For use when filing under seal.

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.

State Of GEORGIA Susan Cockerham			ОАТН	
SUSAN COCKERHAM	State Of	GEORGIA	}	
SUSAN COCKERHAM				
Name of Affiant (Company Official/Representative) s/he is REGULATORY AGENT Official Title of the Affiant (Company Official/Representative) of GTL (Public Communications) Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at 1725 WINDWARD CONCOURSE, SUITE 150, ALPHARETTA, GA 30005 Address and Telephone Number of the Affiant (Company Official/Representative) 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, 2020, to and including December 31, 2020 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "is" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL 2021 My Commission expires Sept. 20, 2022 CALLA DUNILAP NOTARY PUBLIC GEORGIA FULTON COUNTY My Commissions pieces Sept. 20, 2022 W-00384394	County Of	FULTON	}	
Official Title of the Affiant (Company Official/Representative) of GTL (Public Communications) Exact Legal Title or Name of the Respondent (Certificated Company Name) and is located at 1725 WINDWARD CONCOURSE, SUITE 150, ALPHARETTA, GA 30005 Address and Telephone Number of the Affiant (Company Official/Representative) 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 , 2020 , to and including December 31 , 2020 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "Iss" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL 2021 My Commission expires Sept. September 20 , 2022 OFFICIAL SEAL CALLA DUNLAP NOTARY PUBLIC-GEORGIA FULTON COUNTY W-00384394 W-00384394				at
and is located at 1725 WINDWARD CONCOURSE, SUITE 150, ALPHARETTA, GA 30005 Address and Telephone Number of the Affiant (Company Official/Representative) 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 , 2020 , to and including December 31 , 2020 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "is" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL , 2021 My Commission expires Sept. September 20 , 2022 September 20 , 2022 W-O0384394 W-O0384394	s/he is	REGULATORY AGE	ENT	
and is located at 1725 WINDWARD CONCOURSE, SUITE 150, ALPHARETTA, GA 30005 Address and Telephone Number of the Affiant (Company Official/Representative) 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 , 2020 , to and including December 31 , 2020 Month/Day Year Month/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "is" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL , 2021 My Commission expires September 20 , 2022 Wy Commission expires September 20 , 2022 Whotany Public (If electronic signatures are used, you must use "is" before the name.) Wy Commission expires Sept. 20, 2022 W-00384394		Official 1	Title of the Affiant (Company Official/Representative)	
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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 Year Month/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "Is" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL Signature of Notary Public September 20 OFFICIAL SEAL CALLA DUNLAP NOTARY PUBLIC-GEORGIA FULTON COUNTY My Comm. Expires Sept 20, 2022 W-00384394		Exact Legal Title	e or Name of the Respondent (Certificated Company Name)	
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 Year Wonth/Day Year Signature of Affiant (Company Official/Representative) (If electronic signatures are used, you must use "is" before the name.) Subscribed and sworn to before me, a Notary Public, in and for the State and County above named, this 1st day of APRIL APRIL Signature of Notary Public September 20 Signature of Notary Public (If electronic signatures are used, you must use "is" before the name.) Signature of Notary Public Woommission expires Signature of Notary Public (If electronic signatures are used, you must use "is" before the name.) W-00384394	and is located at			,)
Month/Day Year Month/Day Year Month/Day Year 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 1st day of APRIL , 2021 My Commission expires September 20 , 2022 Signature of Notary Public CALLA DUNLAP NOTARY PUBLIC-GEORGIA FULTON COUNTY My Comm. Expires Sept. 20, 2022 W-00384394	belief, all stateme statement of the applicable) the co and belief, all list	ents of fact contained in business and affairs of t ompany's contact inform ed contacts are correct.	the said report are true and the said report is a correct the above-named respondent, and 2) examined (and updated nation in EFIS; to the best of his or her knowledge, information	on,
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FULTON COUNTY Wy Comm. Expires Sept. 20, 2022 W -00384394		ALLA DUNLAP		
()	8 CT HE	FULTON COUNTY (X)	W-00384394	
Hotaly Commission Hamber			Notary Commission Number	

Missouri Revised Statutes § 392.210 or §393.140

GTL (Public Communications)

		0.4711		
		OATH		
State Of	GEORGIA	}		
		}	ss:	
County Of	FULTON	}}		
	SUSAN COCKER	HAM	makes oath an	d says that
	Name of Affi	ant (Company Official/Representative)		•
s/he is	REGULATORY A			
		Official Title of the Affiant (Company	Official/Representative)	
of	GTL (Public Comr	munications)		
OI	`	xact Legal Title or Name of the Responde	nt (Certificated Company Nan	ne)
		Audi 20gui i ilio di manno di liio modpondo	in (ooramoutou oompan) man	.0)
	170E WINDWARD		, , ,	,
and is located at		CONCOURSE, SUITE 15	0, ALPHARETTA,	GA 30005
and is located at			0, ALPHARETTA,	GA 30005
that s/he has 1) exa	Add	CONCOURSE, SUITE 15 ress and Telephone Number of the Affiant ; that to the best of his or her knowled	0, ALPHARETTA,	GA 30005 ative)
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Missouri Revised Statutes § 392.210 or §393.140 and §509.030 See the Instructions for more information to complete this page.