## Onvoy, LLC

## **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/IVoIP ANNUAL REPORT TO THE

MISSOURI PUBLIC SERVICE COMMISSION

For the Calendar Year of

This filing is required pursuant to Commission Rule 20 CSR 4240-28.012 and Section 392.210 RSMo.

Please select how the company is certificated and/or registered with the Commission (check all that apply):

Incumbent Local Telecommunications Company (ILEC)

X Competitive Local Exchange Telecommunications Company (CLEC)

X Interexchange or Local Non-Switched Telecommunications Company (IXC)

Interconnected Voice over Internet Protocol Service Provider (IVoIP)

If unsure of the company's authorization, see list of companies at:

https://psc.mo.gov/Forms/Telecommunications Forms

Please choose one of the following filing options to indicate the security level of the filing:

X Public

Confidential (See instructions for how to file an annual report under seal)

Public

For use when filing under seal.

Excel Issue Date: 02-04-25

Annu	al Report of <u>C</u>	Onvoy, LL	С		
	for th	he calenda	ar year of January 1 -	December 31,	2024
Provide th	he following	company	y information:		
11	North Wacker	Drive, Suite	e 2500		312-384-8000
Company S	treet				Telephone Number
					https://www.sinch.com/
Company M	/ailing Address	S		Company	Website Address (if no website insert "no
	from street add				·
Chicago		IL	60606		
City		State	Zip		
The compa	ny's contact i	informatio	on in EFIS has been r	eviewed and up	dated as applicable.
[	✓ Yes	☐ No			
Drovida tha	following inf	formation	for the person comp	lating this annu	al vanavti
Provide the	_			_	•
	Name:	·	Yuliya Kinsey	Stre	et Address:
Ema	il Address: _	iq-taxde	partment@sinch.com		1 North Wacker Drive, Suite 2500
•	Telephone:	2	214-377-0939		Chicago, IL 60606
I am (check	as appropriate	e): ☑ An :	employee of the company	A third-party	r preparer
			nual report contact:	☐ Yes ☐ I	
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Identify the	Tit	le	rincipal officers at th	e end of the yea	Name
Identify the	Tit. CF	tle O	rincipal officers at th	e end of the yea	<b>Name</b> Brian West
	Tit	ile 0 :0		e end of the yea	Name
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<sup>&</sup>lt;sup>1</sup> For information about the Relay Missouri assessment see <a href="https://psc.mo.gov/Telecommunications/Assessments">https://psc.mo.gov/Telecommunications/Assessments</a> and Filing Requirements

<sup>&</sup>lt;sup>2</sup> For information about the Missouri USF assessment see <u>www.missouriusf.com.</u> Form Page 2

Annual	Report of	Onvov.	LLC

for the calendar year of January 1 - December 31, 2024

7. Please provide the following revenue information:

If no revenue was collected for any box insert \$0.

	If no revenue was collected for any box insert \$0.	SE23371		- Salada S	100.5	T	1-5097	22568	Tre
Row	RETAIL END USER REVENUES	**	Missouri Intrastate (Column A)	**	**	Missouri Interstate & International (Column B)	**	**	Missouri Total Company <sup>3</sup> (Column C)
1.	Voice Local Service (Basic local telecommunications service, IVoIP service <sup>4</sup> including revenue with other features associated with these services. Includes any bundled service whereby these services are bundled with other non-regulated services. <sup>5</sup> )		REDACTED		251	REDACTED			REDACTED
2.	Interexchange Service (Message toll services, 800 services, interexchange operator services).		REDACTED			REDACTED			REDACTED
_	Non-Switched Services <sup>6</sup> (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 6).		REDACTED		,	REDACTED			REDACTED
4.	Retail Uncollectibles. (Amount is typically a negative number.)		REDACTED			REDACTED			REDACTED
	RETAIL END-USER TOTAL (Row 1+2+3+4) Revenue in Column A will be provided to Missouri USF Administrator for assessment purposes.)	9981	REDACTED			REDACTED			REDACTED
	WHOLESALE AND UNIVERSAL SERVICE FUND REVENUES					The second secon			
6.	Wholesale Revenue <sup>7</sup>		REDACTED			REDACTED			REDACTED
7.	Wholesale Uncollectibles, (Amount is typically a negative number.)		REDACTED			REDACTED			REDACTED
8,	Federal USF Revenue (This revenue will be usually listed in Column B; however, list in column A any Connect America Fund Intercarrier Compensation funding used to replace revenue caused by mandatory intrastate switched access rate reductions.)		REDACTED			REDACTED			REDACTED
9.	State USF Revenue	2013	REDACTED				Opinion Opinion		REDACTED
10.	TOTAL REVENUES (Row 5+6+7+8+9) 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	41.0	0.10 10 10 10 10 10 10 10 10 10 10 10 10 1	REDACTED			REDACTED

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For use when filing under seal.

<sup>&</sup>lt;sup>3</sup> Total Company Revenue (Column C) = Column A revenue + Column B revenue.

<sup>&</sup>lt;sup>4</sup> 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 of 35.1% intrastate and 64.9% interstate or as otherwise adjusted by the FCC.

percentage of 35.1% intrastate and 64.9% interstate or as otherwise adjusted by the FCC.

Bundled Service Revenue: 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.

<sup>&</sup>lt;sup>6</sup> Retail Non-Switched Private Line Service Revenue: If 10% of more of the customer's private line network traffic is considered interstate traffic then 100% of the customer's non-switched private line service revenue can be classified as interstate traffic.

Wholesale Revenue: Revenue from telecommunications or IVoIP services sold to other service providers including revenue associated with switched access service, special access service, billing and collection and any remaining carrier's carrier revenue provided in FCC Form 4994, Blocks. NECA settlements should be reported in Column B.

for the calendar year of January 1 - December 31, 2024

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

	Line Quantities (as of December 31, 2024)*								
Exchange	**	Residential	**	**	Business	**			
REDACTED		REDACTED	The state of		REDACTED				
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for the calendar year of January 1 - December 31, 2024

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

Parameter (Control of Control of	Line Quantities (as of December 31, 2024)*										
Exchange	**	Residential	**	**	Business	**					
REDACTED		REDACTED	7,000		REDACTED						
REDACTED	100000	REDACTED			REDACTED						
REDACTED		REDACTED		33793	REDACTED						
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Totals:	5-6					50-75 (10 60-75 (10 61-75 (10 61-75 (10)					

<sup>\*</sup> Line quantities can be provided for a date other than December 31, 2024 if the date is within the month of December.

#### Clarifications about reporting line quantities:

- 1. Report line quantities for basic local telecommunications service and/or IVoIP service as those terms are defined in Section 386.020(4) and (23), RSMo.
- 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 estimate of the number of voice grade equivalent lines used for voice service.
- 3. Exchange refers to areas as listed in ILEC tariffs.
- 4. IVoIP line quantities must be filed on a confidential basis per Section 392.550(7)(c) RSMo. See instructions for how to file on a confidential basis.

Public

For use when filing under seal.

### **VERIFICATION**

Note: Prefer Affiant to be President, Treasurer, General Manager or Receiver of Company \*

Onvoy, LLC Company Name: Annual Report for calendar year 2024 **Affiant Information Andrew M Lancaster** Name Title Sr. Regulatory Manager Chicago, IL City, State Under penalty of perjury, I declare the information contained in this annual report is true and correct to the best of my knowledge and belief. \* If Affiant is not the President, Treasurer, General Manager or Receiver of the company then explain Affiant's ability to verify the accuracy of the information presented: Affiant is responsible for state regulatory filings and has access to revenue and surcharge by state information for calendar year 2024.

03/18/25 Signature of Affiant Date

(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, day of

this

OFFICIAL SEAL

**ELIZABETH DELL** Notary Public - State of Illinois My Commission Expires 04/25/2026

Signature of Notary Public

(If electronic signatures are used, you must use "/s/" before the name.)

**Notary Commission Number** 

Missouri Revised Statutes §392.210, §393.140 and §509.030