INSPECTION AND SUPERVISION FEES REPORT to the ALABAMA PUBLIC SERVICE COMMISSION

PLEASE REMIT TO:

ALABAMA PUBLIC SERVICE COMMISSION FINANCE SECTION

P.O. Box 304260 Montgomery, AL 36130-4260

100 North Union Street Montgomery, AL 36104

If the amount on line 11 is over	But not over	Enter on line 12	of the amount over
\$0	\$100,000	0.285%	\$0
\$100,000	\$1,000,000	\$285 + 0.235%	\$100,000
\$1,000,000		\$2,400 + 0.185%	\$1,000,000

INSTRUCTIONS for completing Inspection and Supervision Fees Report to the Alabama Public Service Commission for the twelve months ended September 30, 2024.

- The report is to be completed for the twelve months that end September 30, 2024 unless the receipts meet the qualifications in Alabama Code Section 37-2-41(a) for filing and reporting quarterly (gross receipts in excess of \$60,000,000 per calendar quarter).
- Lines 1-6 should be completed based upon, and supported by, information from your legal financial records for the reporting period.
- Line 7 is to be used to deduct that portion of gross receipts reported in lines 1-6 above that
 - o are not regulated by the Commission and/or
 - o Represents receipts that are earned when engaged in multistate business during the reporting period.
- Line 10 is to be used to deduct that portion of gross receipts reported on line 9 that represents the COCOT revenues earned from those instruments in which the COCOT election allowed in Alabama Code Section 37-2-41(b) will be taken.
- Line 12 is the calculated liability due using the rate table provided above.
- Line 13 is where the \$10.00 per instrument fee is calculated for those instruments that accounted for the receipts deducted on Line 10 above.
- Line 14 represents the Total Inspection and Supervision Fee Liability due to the Commission, which in no case may be less than the \$25.00 minimum inspection and supervision fee as per Alabama Code Section 37-2-41(a).

Federal EIN #	

INSPECTION AND SUPERVISION FEES REPORT to the ALABAMA PUBLIC SERVICE COMMISSION

Federal EIN #		DAMA DIDITO CONT	OF COMPATORS	NAT.	
	ALA	BAMA PUBLIC SERVI	UE COMMISSIC	JN	
Legal Name:					
Trade Name:					
Street:					
City,State,Zip					
Check all Cert	ificates of Authority	granted to this leg	al entity:		
ILEC	COCOT/PSP		CLEC	IXC	Railroad
Commission with respect to 1, of each year, a fee for to Sec. 37-2-41(d), pay over	(a), each transportation company, to its rates and service regulations shather inspection and supervision of sure the total fees due for the preceding ar quarter must pay quarterly based (by Aug. 1).	nall pay quarterly to PSC, beginning ch business during the next preced g fiscal year on November 1 of eac	each November 1 and ing fiscal year. Any tra ch year. Transportation	on each quarter there nsportation company n companies with mo	eafter, February 1, May 1, August may, at their own election under re than \$60,000,000 of Alabama
		Computation of			
	during the twelve (12) n				
	eginning,				
 Local Ser 	rvice Revenues				
2. Access Ro	evenues				
3. Toll Serv	ice Revenues			. •	
4. All Other	Gross Receipts				
5. Less: Un	collectible or Bad Debts			.] ()
6. Total Gr	oss Receipts per Fina	ncial Records. Add lir	nes 1 through 5.		
Deductions	when engaged in multist	ate business during rep	orting period:		
7. Interstat	e Portion (itemization requ	uired – use attachments if	necessary):		
a					
b					
8. Total De	eductions. Add lines 7a	, 7b, and 7c			
9. Adjusted	d Gross Receipts. Subt	tract line 8 from line 6			
10. Less Alak	oama COCOT revenues,	if Sec. 37-2-41(b) election	n made		
	a Gross Receipts. Subt				
	n and Supervision Fee (U				
=	Sec. 37-2-41(b) election:				
	e liability . Add lines 12				
15. Payment	s: 25% each quarter or m	ay elect to remit all on l	November 1		
a. Novem	ber 1, 2024 : 25% of line	14, not less than \$25.00)		
b. Febru a	ary 1, 2025 : Subtract lin	e 15a from 50% of line 1	4		
• ,	2025: Subtract lines 15a				
d. Augus t	t 1, 2025: Subtract lines	15a, 15b, 15c from line 1	14		

UNDER PENALTIES OF PERJURY, I declare that I have examined this report and accompanying schedules and statements and, to the best of my knowledge and belief, it is true, correct, and complete. Declaration of paid preparer (other than reporting entity) is based on all information of which preparer has any knowledge.

Name of officer/partner/owner (PLEASE PRINT) Signature of officer/partner/owner Date Title Phone

PLEASE REMIT TO: ALABAMA PUBLIC SERVICE COMMISSION | If the amount on line 11 is But not | But not

P.O. BOX 304260 MONTGOMERY, AL 36130-4260

100 NORTH UNION STREET, SUITE 950 MONTGOMERY, AL 36104

11116 1 1 15	But not		amount
over	over	Enter on line 12	over
\$0	\$100,000	0.285%	\$0
\$100,000	\$1,000,000	\$285 + 0.235%	\$100,000
\$1,000,000		\$2,400 + 0.185%	\$1,000,000