Stephanie D. Marsh

Senior Analyst – Regulatory Compliance 4005 N Rodney Parham Road Little Rock, AR 72212 t: 501-748-7897 f:501-748-6583

e-mail: stephanie.d.marsh@windstream.com



January 17, 2024

Executive Secretary Georgia Public Service Commission 244 Washington Street Atlanta, Georgia 30334

RE: Docket No. 36946 Administration of Lifeline Georgia Assistance Programs for Low-Income Consumers (FCC Form555)

### Dear Sir or Madam:

Enclosed please find copies of the Windstream Telecommunications Annual Lifeline Eligible Telecommunications Carrier Certification Forms (FCC Form 555); the originals were filed with the Universal Service Administrative Company and FCC via online submission on January 16, 2024.

Pursuant to Section 54.410 of the Federal Communications Commission's rules, the 2023 annual reporting requirements and certifications for the following Windstream Study Areas:

Company	SAC
Windstream Georgia, LLC	220357
Windstream Georgia Telephone, LLC.	220364
Windstream Standard, LLC.	220386
Windstream Accucomm, LLC.	220395
Georgia Windstream, LLC	223036
Windstream Georgia Communications, LLC.	223037

Should you have any questions regarding this submission, please contact me at (501) 748-7897 or via email at stephanie.d.marsh@windstream.com.

Sincerely,

Stephanie D. Marsh

Stephanie D. Marsh

**Enclosures** 

# IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

220357		143030766
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
Eligible Telecommunications Carrie	r (ETC) must provide a certific	ation form for <b>each SAC</b> that provides Lifeline service).
2023	GA	Windstream Communications, LLC
Recertification Year	State	ETC Name
		Windstream Holdings, Inc.
		Halding Company Name
DBA, Marketing, or Other Branding	y Name	Holding Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
220364	Windstream Communications, LLC
223037	Windstream Communications, LLC
223036	Windstream Communications, LLC
220395	Windstream Communications, LLC
220386	Windstream Communications, LLC

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL
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#### **Annual Recertification Results**

Report the results of recertification efforts for the current calendar year.

Do not leave blocks empty. If the National Verifier is responsible for conducting recertification, enter zero for blocks A - F. If the state Lifeline Administrator is responsible for conducting recertification, report the results for each block.

A. Subscribers eligible for recertification within current calendar year	
B. Subscribers de-enrolled prior to recertification attempts	
C. Total number of subscribers required to be recertified (A-B)	
D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: \_\_ state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL	

No Subscribers Certification Complete this section if ETC claimed no Lifeline subscribers.

Initial		

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

### Is the ETC subject to the non-usage requirements? Yes $\underline{\hspace{1cm}}$ No $\underline{\hspace{1cm}}$

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

G	Н
Month	Subscribers De-Enrolled for Non-Usage
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December	
Total Subscribers	0

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

By signing below, I certify that the information provided above. I am authorized to make this certification for this	I is true and accurate. I am an officer of the company names SAC.
Signed,	
Tim Loken	Tim Loken - Director
Signature of Officer	Printed Name and Title of Officer
tim.p.loken@windstream.com	01-16-2024
Email Address of Officer	Date
Stephanie D. Marsh	501-748-7897
Person Completing This Certification Form	Contact Phone Number

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220364		143030766
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Recertification Year	State	ETC Name
		Windstream Holdings, Inc.
		Holding Company Nama
DBA, Marketing, or Other Branding	y Name	Holding Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
220357	Windstream Communications, LLC
223037	Windstream Communications, LLC
223036	Windstream Communications, LLC
220395	Windstream Communications, LLC
220386	Windstream Communications, LLC

I certify that the company listed above:

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Initial TL
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D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: \_\_ state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL	

No Subscribers Certification Complete this section if ETC claimed no Lifeline subscribers.

Initial		

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

### Is the ETC subject to the non-usage requirements? Yes $\underline{\hspace{1cm}}$ No $\underline{\hspace{1cm}}$

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

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By signing below, I certify that the information provided is true and accurate. I am an officer of the company named above. I am authorized to make this certification for this SAC.		
Signed,		
Tim Loken	Tim Loken - Director	
Signature of Officer	Printed Name and Title of Officer	
tim.p.loken@windstream.com	01-16-2024	
Email Address of Officer	Date	
Stephanie D. Marsh	501-748-7897	
Person Completing This Certification Form	Contact Phone Number	

# IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

220386		143030766
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
Eligible Telecommunications Carrie	r (ETC) must provide a certific	eation form for <b>each SAC</b> that provides Lifeline service).
2023	GA	Windstream Communications, LLC
Recertification Year	State	ETC Name
		Windstream Holdings, Inc.
		Holding Company Name
DBA, Marketing, or Other Branding	Name	riolding Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
220364	Windstream Communications, LLC
220357	Windstream Communications, LLC
223037	Windstream Communications, LLC
223036	Windstream Communications, LLC
220395	Windstream Communications, LLC

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL
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#### **Annual Recertification Results**

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C. Total number of subscribers required to be recertified (A-B)	
D. Subscribers successfully recertified	
E. Subscribers de-enrolled for failed recertification	
F. Percentage de-enrolled for failed recertification (E/C)	

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: \_\_ state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL	

No Subscribers Certification Complete this section if ETC claimed no Lifeline subscribers.

Initial		

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

### Is the ETC subject to the non-usage requirements? Yes $\underline{\hspace{1cm}}$ No $\underline{\hspace{1cm}}$

If yes, record the number of subscribers de-enrolled for non-usage by month in Block H below.

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By signing below, I certify that the information provided above. I am authorized to make this certification for this	I is true and accurate. I am an officer of the company names SAC.
Signed,	
Tim Loken	Tim Loken - Director
Signature of Officer	Printed Name and Title of Officer
tim.p.loken@windstream.com	01-16-2024
Email Address of Officer	Date
Stephanie D. Marsh	501-748-7897
Person Completing This Certification Form	Contact Phone Number

# IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

220395		143030766
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
Eligible Telecommunications Carrie	r (ETC) must provide a certific	ation form for <b>each SAC</b> that provides Lifeline service).
2023	GA	Windstream Communications, LLC
Recertification Year	State	ETC Name
		Windstream Holdings, Inc.
		Holding Company Nama
DBA, Marketing, or Other Branding	Name	Holding Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
220364	Windstream Communications, LLC
220357	Windstream Communications, LLC
223037	Windstream Communications, LLC
223036	Windstream Communications, LLC
220386	Windstream Communications, LLC

I certify that the company listed above:

- Has policies and procedures in place to ensure that its Lifeline subscribers are eligible to receive Lifeline services; and
- Is in compliance with all federal Lifeline certification procedures; and
- Is in compliance with the minimum service levels set forth in 47 C.F.R. § 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL
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#### **Annual Recertification Results**

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I certify that the company listed above has procedures in place to recertify consumer eligibility by relying upon notice of eligibility from: \_\_ state Lifeline administrator X National Verifier

I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial TL	

No Subscribers Certification Complete this section if ETC claimed no Lifeline subscribers.

Initial		

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

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Signed,	
Tim Loken	Tim Loken - Director
Signature of Officer	Printed Name and Title of Officer
tim.p.loken@windstream.com	01-16-2024
Email Address of Officer	Date
Stephanie D. Marsh	501-748-7897
Person Completing This Certification Form	Contact Phone Number

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Deadline: January 31st (Annually)

223036		143030766
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
Eligible Telecommunications Carrie	r (ETC) must provide a certifica	tion form for each SAC that provides Lifeline service).
2023	GA	Windstream Communications, LLC
Recertification Year	State	ETC Name
		Windstream Holdings, Inc.
DBA, Marketing, or Other Branding	Name	Holding Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
220364	Windstream Communications, LLC
220357	Windstream Communications, LLC
223037	Windstream Communications, LLC
220395	Windstream Communications, LLC
220386	Windstream Communications, LLC

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Initial TL
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Initial TL	

No Subscribers Certification Complete this section if ETC claimed no Lifeline subscribers.

Initial		

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

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Tim Loken	Tim Loken - Director	
Signature of Officer	Printed Name and Title of Officer	
tim.p.loken@windstream.com	01-16-2024	
Email Address of Officer	Date	
Stephanie D. Marsh	501-748-7897	
Person Completing This Certification Form	Contact Phone Number	

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223037		143030766
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		Holding Company Name
DBA, Marketing, or Other Branding	y Name	riolaing Company Name

## Does the reporting company have affiliated ETCs? Yes $\underline{X}$ No $\underline{\hspace{1cm}}$

Affiliated ETC's SAC	Affiliated ETC's Name
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Signature of Officer	Printed Name and Title of Officer
tim.p.loken@windstream.com	01-16-2024
Email Address of Officer	Date
Stephanie D. Marsh	501-748-7897
Person Completing This Certification Form	Contact Phone Number