

RULE 8 ANNUAL REPORT - LCATV - 2018

for Vermont Access Management Organization (Version 3.0 – 09/26/17)

Reporting Deadlines

As defined in a Waiver ordered by the Public Utility Commission (formerly the Public Service Board) on March 9, 2017 in Docket No. 8890, Vermont Access Management Organizations are expected to complete and submit their annual report within 150 days of the end of their fiscal year. The Waiver, requested by VANjs, intended to allow enough time for an AMO to complete and attach its IRS Form 990 along with this Annual Report Form.

If you need an extension beyond these 150 days, please contact the Department of Public Service and your cable operator(s) prior to the date on which the report is due.

Instructions

Instructions for filling out this form may be found at:

<http://VermontAccess.Net/documents/rule-8-amo-reporting-instructions/>

Attachments

Please attach additional pages for information that will not fit in the space provided.

Filing

It is required that each Access Management Organization sends a paper copy of its Report to:

Clerk of the Commission

Vermont Public Utility Commission
112 State Street
Montpelier, VT 05620-2701

Vermont Public Service Department

Clay Purvis, Director, Telecommunications and Connectivity Division
112 State Street
Montpelier, VT 05620-2601

Vermont Access Network

PO Box 4041
Burlington, VT 05406-4041

Cable Operator(s)

See your PEG Access Agreement for Mailing information.

- *If all Attachments are digital, also e-mail electronic copies to:*
Info@VermontAccess.net & clay.purvis@Vermont.gov
- *Be sure to Attach your Depreciation or Fixed Asset Schedule (Sec. 10a) and Financials (Sec. 15c).*

The FISCAL YEAR REPORTING: 12/31/2018

(Please enter the date your Fiscal Year ENDED)

1. Organization Name & Address

Lake Champlain Access Television, Inc.

Legal Name/ Corporate Name

Doing Business as (D/B/A) Name & Call Letters

63 Creek Farm Plaza, Suite 3, Colchester, VT 05446

Mailing Address

Location Address (if different than Mailing Address)

www.lcatv.org

Website Address

2. Contact Information

2a. Individual Completing this Form

Kevin Christopher

Name

Executive Director

Position

802-862-5724

Phone Number

802-871-5583

Fax Number

info@lcatv.org

Email Address

2b. Executive Director/Manager/CEO

Kevin Christopher

Name

802-871-5583

Phone

802-871-5583

Fax Number

info@lcatv.org

Email Address

3. Corporate Status - Open Meetings Law – 8.422(J)

- Is the AMO recognized by the IRS as a 501 (c)(3) Non-Profit Corporation? YES NO
- Year Incorporated in State of Vermont: 1993
- Is the AMO current with its biennial Secretary of State nonprofit corporate registration?
 YES NO
- Does AMO comply with applicable parts of VT's Open Meeting Law?
 Warns Board Meetings? Posts Board Minutes?

4. Service Territories/Communities Served

Service Territory	Name of Cable Operator	Communities (Municipalities) Served	Changes from Previous Fiscal Year
1	Comcast	Colchester, Milton, Georgia, Fairfax, Westford, South Hero, Grand Isle, North Hero	none
2			
3			

5. Current PEG Capacity & Applications – 8.422(B)

5a. Channel(s), by Cable Operator(s)

Name of Cable Operator 1	<u>Comcast</u>
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Channel Number (and Call Letters or Name)	SD or HD	Type of Access (Public, Educational, Governmental)
LCATV 15	SD	Public
LCATV 15	SD	Educational
LCATV 15	SD	Governmental

Name of Cable Operator 2 _____		
Channel Number (and Call Letters or Name)	SD or HD	Type of Access (Public, Educational, Governmental)

Name of Cable Operator 3 _____		
Channel Number (and Call Letters or Name)	SD or HD	Type of Access (Public, Educational, Governmental)

5b. Additional Application(s) – 8.404(B)

Describe Additional Application(s) the AMO uses that the cable operator has provided to your system capacity or facilities, in a form other than a Channel, in order to support the distribution of PEG Access content to cable subscribers. Examples of Operator-provided applications might include access to the Interactive Program Guide, the Level or Class of broadband service (Commercial/Business/etc), a Static IP, Remote Origination Site equipment, an E-mail domain, cloud storage, etc. Please state whether the Operator is charging you for any of these.

AMO uses a website for distribution of PEG information and content, maintains a static IP, subscribes to Comcast Business Class Deluxe 25 broadband service, and uses various pieces of hardware and applications for the live-streaming of content from remote locations. All of these additional applications are at the expense of the AMO.

6. Outreach Strategies – 8.422(C)

Note: If an exact number is unknown for any activity in 6a or 6b below, please provide an estimate. (Check N/A if you have not engaged in a particular activity or did not track it this year.)

6a. Outreach/Marketing: Activities

Activity	Number Done	N/A (✓)
Print Ad Placements	13	<input type="checkbox"/>
Online Ad Placements		<input checked="" type="checkbox"/>
Newsletters (print or email)	13	<input type="checkbox"/>
Events at your AMO (open house, gallery openings, etc.)	5	<input type="checkbox"/>
AMO participation in community events (parades, booths, etc)	4	<input type="checkbox"/>
Presentations at community meetings (Chamber, clubs, etc)		<input checked="" type="checkbox"/>
Video contests/competitions held		<input checked="" type="checkbox"/>
Self-promotional PSAs, Bumpers, etc.		<input checked="" type="checkbox"/>
Social Media Postings	20	<input type="checkbox"/>

6b. (OPTIONAL) Outreach/Marketing: Social Media/Other

Note: Please describe other activities that were intended to market or promote your AMO, or to inform or attract the public, educational and/or governmental sectors to your AMO. These might include the type and extent of your use of social media platforms, bill stuffers, video competitions entered, Technical assistance to Institutions, NGOs, schools, etc., or other outreach/marketing efforts not outlined in 6a above.

Included among LCATV's Marketing & Outreach activities: various instances of advertising programs and events in our local newspapers; distribution of quarterly programming and information guides to a variety of public locations; distribution of a monthly e-newsletter; hosting an annual holiday open house including a live programming component; mostly numerous public gallery receptions through the year; informative postings on both our website and our Facebook page; and our participation in 4 community events via booths and/or demonstration of services.

We also provided assistance to local institutions, including: technical trouble-shooting visits to several local government offices; classroom technical support for high school production courses; and the facilitation of remote presentations of three high school graduations for overflow seating and local events for backstage monitoring.

6c. (OPTIONAL) Volunteerism & Users

Note: In this Optional section, if the exact number is unknown, you may estimate.

If you track, by category, non-staff (unpaid) people involved with your AMO, you may provide that data in the Comments section.

If you do not track any of this data, you may either check N/A or leave the entire section blank.

Total, all unpaid, non-staff	Number	N/A (✓)
Volunteers, Board, Community Producers, Student Interns & Other Users	50	<input type="checkbox"/>

Comments:

The above estimated Volunteer/User number includes 7 Board of Directors members, 2 student interns, and numerous Community Producers.

7. Training & Provision of Facilities – 8.422(C)

Note: We recognize that there are many ways to track or classify training and facilities usage at an AMO, and so we’ve provided options and narrative opportunities to accommodate these variations. In Sections a, b and c, below, if exact number is unknown, please provide an estimate. Check N/A if you have not engaged in a particular activity or have not tracked it this year.

7a. Orientations

Activity	Number Oriented	N/A (✓)
Orientation to Individuals	5	<input type="checkbox"/>
Orientation to Organizations	7	<input type="checkbox"/>

7b. Structured Training

Note: “Structured Training” (e.g., classes, seminars, workshops) does not include the on-going, on-demand instruction or guidance you provide to producers while they work on their programs. Describe that type of training, if you wish, in the narrative space provided below. Check N/A if you have not engaged in a particular activity or have not tracked it this year.

Types of <u>Structured</u> Training Provided (Your classifications of types)	Number Trained	N/A (✓)
Camps	77	<input type="checkbox"/>
Workshops	55	<input type="checkbox"/>
In-School Class Collaboration	50	<input type="checkbox"/>
Student Job Shadowing	2	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
GRAND TOTAL:	184	<input type="checkbox"/>

If necessary, please use the following space to expand or explain how you deliver your unstructured training, including, if you wish, assistance provided to producers as they work on their productions.

UNSTRUCTURED Training:

We provide ongoing support for all Community Producers in the production of content, including studio production, editing, and audio/video support in the field. This support varies from basic editing guidance or camera training to directing studio productions for users.

7c. (OPTIONAL) Community Use of Facilities

Note: In this Optional section, if the exact number is unknown you may estimate. If you do not track any of this data, you may either check N/A or leave the entire section blank.

Type of Facilities Usage	If applicable, provide detail here, or in Notes, below.	# of Checkouts / Usages.	N/A (✓)
Field Gear Checkouts (specify)	(number represents hours of usage)	15	<input type="checkbox"/>
Studio Production Use	(number represents hours of usage)	340	<input type="checkbox"/>
Editing Systems Use	(number represents hours of usage)	171	<input type="checkbox"/>
Other Lendings (specify)			<input checked="" type="checkbox"/>

NOTES:

LCATV tracks community usage of facilities and equipment by hours rather than instances.

8. Programming Data - Rule 8.422 (C)

Note: In the following sections, who “Produced” a program is determined by that person or entity that is legally responsible for the content of the program.

8a. Programming Information

*Please provide annual data for the following **FIRST-RUN, NON-REPEAT** program plays. Please avoid data for Programs that are simulcast on two or more of your channels.*

Type of Programming	# of Programs	# of Hours
Locally-Produced, First-Run Programs <i>(produced by, for or at your AMO)</i>	778	914.0
AMO-Produced PSAs, Bumpers, etc. <i>(if tracked & not included above)</i>		
“Imported” via VMX or other Vermont sources <i>(e.g., AMOs, local producers)</i>	830	973.0
“Imported” from other sources <i>(e.g. satellite programming)</i>	504	479.0
COLUMN TOTAL	2,112	2,366.0

8b. (OPTIONAL) Local Programming Breakdown

Note: In this Optional section, if the exact number is unknown, you may estimate. If you do not track any of this data, you may leave the entire section blank.

Locally-Produced, first-run Programs	# of Programs	# of Hours
Produced by your AMO Staff	580	785.0
Produced by clients/users/volunteers	198	129.0

8c. (OPTIONAL) Bulletin Board

If you offer an on-screen Community Bulletin Board, you might track the total number of individuals and/or entities that have submitted one or more messages, or you may count the total annual number of unique “pages” of bulletin board information. Or both. In this Optional section, if the exact numbers are unknown, estimate. If you do not track any of this data, you may leave the entire section blank.

Community Bulletin Board Data	Total Number
Number of individuals or entities who have submitted one or more “pages” over the course of the year	21
Number of unique “pages” submitted & shown	132

8d. Remote Origination Sites

Site Location (Entity Name, Town)	Frequency of Use (# of uses per month or per year)	Type of Use (e.g., P, E or G)	Cable Operator Providing Site	RF Modulator? Optical Xmtr? Video over IP? (please specify)

8e. Additional Information

Provide additional information about your programming (if you feel it's necessary) in narrative form:

Programming produced at the LCATV Studio included: live and recorded volunteer series programming; candidate forums and statements, budget and bond presentations, and live election coverage; video production camp projects; live concerts. In addition to distribution via one of our three channels, much of this studio content was also streamed live using video-over-IP technology.

LCATV has no activated traditional remote origination sites. However, we regularly stream content live from remote locations using video-over-IP technology and at our expense. During the reporting year, we live-streamed 83 meetings and events.

Other LCATV-produced programming included: regular coverage of various municipal and school meetings for all of our member towns, including select boards, school boards, planning commissions, development review boards, annual town/school meetings, etc.; coverage of annual elementary, middle and high school graduation ceremonies; local library and historical society speakers and presentations; regular coverage of speakers and events for the Colchester-Milton Rotary Club; promotional videos for artists displaying work at the Gallery at LCATV; several regular concert series and other community arts presentations.

9. Complaint Tracking – Rule 8.422(D)

Summarize details of any complaints, how your AMO responded to them, and their current status. Include both any complaints made to your AMO and your AMO's complaints to other entities, such as cable operators (Service Quality complaints should be address in the next Section, 10).

No formal complaints. A formal complaint procedure is in place.

10. Service Quality Issues – Rule 8.422(L)

Please describe major service quality issues that required or require attention of the cable operator or the Vermont Public Service Department. Include your use of the “Procedures for Addressing PEG Access Facilities’ Issues, Problems and Complaints” and the outcome or on-going status at the close of the Fiscal Year.

2018 COMCAST TICKETS:

TICKET JB21451713

- Channel 17 outage
- Reported 04/10/2018
- Resolution: signal return by the evening of 4/10 with no communication from technicians.

TICKET JB24016829

- No Channel 17 audio (audio out from LCATV is good; negligible return signal)
- Noticed on evening of 09/14/2018 and reported on morning of 09/15/2018
- No resolution as of the morning of 09/17/2019. Called local management center again and was informed that no ticket had been opened for the account. New tickets was opened. Comcast technician checked in twice- once to ask for a reboot of LCATV’s Radiant transmitter and again to note that the issue was resolved with a reboot of the receiver at the Milton hub.

11. Facilities Summary/Description of Facilities – Rule 8.422(E)

11a. Depreciation Schedule

Attach your Depreciation Schedule from your IRS Form 990 (long form) or your Fixed Asset Schedule.

11b. Changes in Equipment Inventory/ General Statement of Improvements

Describe generally major changes in equipment inventory during this reporting year. (A general statement of improvements in equipment and facilities.)

Routine capital purchases included: LED lighting kit; on-camera monitor; wireless intercom system; UAV package; field audio package; laptop and desktop PCs; licensing of post-production software suite for a number of PCs; and website upgrades.

LCATV also leased a commercial passenger van and used capital reserve funding for the purchase of three camcorders and peripheral equipment for use in field production.

12. Organizational Leadership: Rosters of Key Staff & Board – Rule 8.422(F)

12a. Key Staff as of the end of the Fiscal Year

Position / Job Title	Name
Executive Director	Kevin Christopher
Production Manager	Buddy Meilleur
Channel Coordinator	Rebecca Padula
Outreach Coordinator	Stephanie Soules
Assistant Production Manager	Michael Wright

12b. Board Members as of the end of Fiscal Year

Director's Name	Phone Number/ Email Address	Community Affiliation (if stated)
Samuel Conant	802-862-5724 / info@lcatv.org	Milton
Greg Drew	802-862-5724 / info@lcatv.org	Georgia
Jeffrey Hathaway	802-862-5724 / info@lcatv.org	Georgia
Carol Jones	802-862-5724 / info@lcatv.org	Georgia
Richard Pecor	802-862-5724 / info@lcatv.org	Colchester
Kenneth Rocheleau	802-862-5724 / info@lcatv.org	South Hero
Robert Shea	802-862-5724 / info@lcatv.org	Fairfax
Curt Taylor	802-862-5724 / info@lcatv.org	Colchester

13. Changes in Organizational Structure – Rule 8.422(G)

Detail here any significant changes in organizational structure during the Fiscal Year; for example, bylaws, style of governance, corporate form, dissolution, etc.

None.

14. Planning Considerations – Rule 8.422(K)

In this section, please provide your planning considerations and expectations for how community needs will be identified and met for current and future fiscal years. Include new programs or services you plan to offer over the next 3 years; how those relate to your community’s needs and interests; and the process you used to identify those needs and interests. Attach additional pages if necessary.

Note that regulators and the cable operator may regard this section as your PEG Access Plan.

Please see attached Planning Considerations document.

15. Financial Documents – Rule 8.422 (H), (I) and (M)

15a. AMO Revenue Report

"The Report shall distinguish between funds provided by the Cable Operator as PEG funding and funds obtained from other sources."

Describe other revenue sources the AMO relies upon to support its services. (Other Sources might include memberships, production fees, interest income; and fundraising activities such as grants, annual campaigns and capital campaigns.)

CABLE OPERATOR FUNDING					
Cable Operator 1:			Cable Operator 2:		
Operating	Capital	Spike	Operating	Capital	Spike
\$ 571,503.00	\$ 57,166.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
OTHER SOURCES OF REVENUE (Identify)					
Media Sales	Interest Income	Donations & Other	Non-PEG Related	TOTAL	
\$ 3,525.00	\$ 4,018.00	\$ 7,970.00	\$ 0.00	\$ 644,182.00	

15b. AMO Expense Report

"The Report shall clearly distinguish between expenditures that support production and distribution of PEG content to cable television subscribers, and expenditures for other purposes not related to the production and distribution of PEG content to cable television subscribers, if any." List expenses as they apply to each of the AMO's PEG and Non-PEG services.

AMO Services	Operating Expenses	Capital Expenses	Total Expenses
PEG Access Services	\$ 485,823.00	\$ 182,804.00	\$ 668,627.00
Non PEG-related Services	\$ 0.00	\$ 0.00	\$ 0.00
Total PEG & Non-PEG Expenses	\$ 485,823.00	\$ 182,804.00	\$ 668,627.00

15c. Statement of Cable Operator Funds

A statement of total Operating and Capital funding received from the operator(s), and whether any funds were carried forward from the prior year.

Please click the check box (✓) if the following documents are attached to this Report, and confirm that taken together these can be used to determine any funds that were carried forward from the prior year.

- Income/Expense Statement (a.k.a., Profit & Loss Statement) for this Fiscal Year
- Balance Sheet on the final day of the Fiscal Year (listing assets & liabilities)
- Current year Operating and Capital Budgets
- Annual Tax Return (990 or 990-EZ)
- Audit or Financial Review prepared during the Fiscal Year (If one done, optional)

NOTES:

Please see attached Planning Considerations document for information on planned spending of earmarked reserve funds.

Statement of Certification

I,

(print / type name):
Kevin Christopher

hereby certify that

(name of AMO):
Lake Champlain Access Television, Inc.

is (or has a parent organization that is) a non-profit organization in good standing with the State of Vermont (i.e., has filed a Vermont Nonprofit Biennial report in a timely manner) and maintains the following documents on our premises that are available to the public upon request:

- Bylaws or other governing documents
- Rules and operating procedures
- Complaint and dispute resolution procedures
- Contract(s) with Cable Operator(s)
- Evidence of conducting meetings consistent with Open Meeting Law

Kevin Christopher

Digitally signed by Kevin Christopher
Date: 2019.05.22 10:58:21 -04'00'

SIGNATURE OF PERSON COMPLETING FORM

5/22/19

DATE

Buddy Meilleur

Digitally signed by Buddy Meilleur
Date: 2019.05.22 11:00:33 -04'00'

SIGNATURE OF WITNESS

Buddy A. Meilleur

NAME OF WITNESS (print/type)



PLANNING CONSIDERATIONS 2019 – 2021

(Per Rule 8 Annual Report 13. Planning Considerations - 8.422K)

NOTE: *The following Planning Considerations do not account for the potential impact of the Federal Communications Commission's proposed rulemaking (MB Docket 05- 311) which, through reinterpretation of the Cable Act of 1984, would give cable providers the ability to charge back against PEG funding certain obligations for the public good. LCATV recognizes that radical changes in staffing, services, and operations would have to occur if Comcast were to take advantage of the FCC's order when and if it is issued. The LCATV Staff and Board of Directors are developing an internal plan to respond to the possible defunding in addition to the planning within this document.*

COMMUNITY NEEDS – 2019 - 2021

The following is a summary of community needs based upon both a multi-year Community Needs Assessment conducted by LCATV and an independent consultant and the resulting long-term Access Plan. Also included are approved Fiscal Year 2019 Operating and Capital Budgets, anticipated 2020 and 2021 Budgets, and a six-year Goals & Objectives summary which resulted from our Community Needs Assessment work.

ANTICIPATED COMMUNITY NEEDS

- Increased partnerships with local organizations, governments, libraries, and schools and the facilitation of the telling of their stories through short- and long-form content.
- The transfer of LCATV's legacy content (currently only existing as physical media) to a digital format and the availability of that content via our website.
- Exploration of the sustainability of LCATV's services in the face of changing technology, consumer trends, and regulatory threats both current and future.
- Increases awareness by individual and organizational members of LCATV of the equipment, services, and other resources that we offer beyond coverage of community meetings and events.
- Development of current and future budgets and financial plans to best respond to our changing communities.

MEASUREMENT OF COMMUNITY NEEDS

- Continued referral to the results of our Community Needs assessment, which included a phone survey of community leaders, a public online survey, and one-on-one interviews to inform LCATV's future planning.
- Meet with local boards, municipal leaders and organizations to gauge progress and look to areas of improvement.
- Work within the organization on a Board level to discover new ways to partner with member communities.
- Conversations with our membership: fielding comments and questions and eliciting opinions from those we serve.

MEETING COMMUNITY NEEDS

- Develop the duties of and preferred qualifications for the fulltime positions of Creative Content Producer, tasked with collaborating with our member organizations to produce content which furthers our collective mission. Begin the process of filling that position.
- Acquire materials and arrange for temporary staffing for an analog-to-digital archive project to be deployed over multiple years and stages.
- In concert with LCATV's Board of Directors, examine potential changes in structure and delivery of services to ensure the organization's sustainability through regulatory, technological, and consumer changes.
- Discuss working with an outside firm or consultant on a strategic marketing plan to raise awareness of LCATV within its member communities and which could be integrated with other outreach initiatives.
- Collaboratively negotiate an operating contract which benefits LCATV and its membership and recognizes the valuable resource that is provided to cable subscribers.
- Control budget and expenditures to facilitate long-term goals for maintaining our Operating Reserve and funding special capital projects; determine what the capital projects are and how best to structure them in terms of community need, organizational capacity, and financial planning.
- Evaluate achievement of previous year's objectives and refer to our new comprehensive PEG Access Plan and to guide LCATV's work for a number of years.
- Identify Board of Directors and staffing needs which will help achieve future goals.

BUDGETING – 2019 - 2021

FY 2019 OPERATING BUDGET:

EXPENSE	2019 BUDGET
Labor Compensation	\$325,800.00
Payroll Taxes	\$ 24,450.00
Unemployment Taxes	\$ 2,250.00
Health/Dental Insurance	\$ 44,500.00
Workers Comp. Insurance	\$ 2,750.00
Accounting Fees	\$ 7,500.00
Legal/Professional Fees	\$ 15,000.00
Telephone	\$ 2,150.00
Internet & Website	\$ 4,000.00
Utilities	\$ 11,500.00
Bank Fees	\$ 50.00
Office Supplies	\$ 6,250.00
Dues & Subscriptions	\$ 4,800.00
Postage & Shipping	\$ 900.00
Advertising & Promotion	\$ 6,000.00
Meals & Entertainment	\$ 2,250.00
Travel	\$ 6,000.00
Printing & Copying	\$ 400.00
Contributions	\$ 5,000.00
Education & Conferences	\$ 3,000.00
Pension Expense	\$ 7,000.00
Business Insurance	\$ 4,100.00
Facilities Rent	\$ 48,550.00
Facilities Maintenance	\$ 4,050.00
Blank Video Media	\$ 600.00
Total Expenses	\$538,850.00

FY 2019 CAPITAL BUDGET:

EXPENSE	2019 BUDGET
Vehicle Expense	\$ 7,070.00
Equipment Maintenance/Repairs	\$ 2,000.00
Technical Supplies	\$ 6,750.00
Field Production Equipment	\$ 7,000.00
Facility Upgrades	\$ 2,250.00
System Upgrades	\$26,150.00
Website Upgrade	\$ 5,000.00
Total Expenses	\$56,220.00

2019 CAPITAL EXPENDITURES

- Equipment maintenance and repairs
- Facility maintenance and repairs
- Vehicle leasing and maintenance
- Purchase of routine technical items
- Routine hardware and software purchases
- Multiple personal computer replacements
- Archival programming storage
- Field audio kit
- Website work

FY 2020 OPERATING BUDGET:

EXPENSE	2020 BUDGET
Labor Compensation	\$355,000.00
Payroll Taxes	\$ 26,650.00
Unemployment Taxes	\$ 2,450.00
Health/Dental Insurance	\$ 47,550.00
Workers Comp. Insurance	\$ 3,300.00
Accounting Fees	\$ 7,500.00
Legal/Professional Fees	\$ 10,000.00
Telephone	\$ 2,250.00
Internet & Website	\$ 4,200.00
Utilities	\$ 11,600.00
Bank Fees	\$ 50.00
Office Supplies	\$ 6,250.00
Dues & Subscriptions	\$ 5,000.00
Postage & Shipping	\$ 900.00
Advertising & Promotion	\$ 6,000.00
Meals & Entertainment	\$ 2,250.00
Travel	\$ 6,000.00
Printing & Copying	\$ 500.00
Contributions	\$ 5,000.00
Education & Conferences	\$ 5,000.00
Pension Expense	\$ 8,400.00
Business Insurance	\$ 4,250.00
Facilities Rent	\$ 50,100.00
Facilities Maintenance	\$ 4,050.00
Blank Video Media	\$ 500.00
Total Expenses	\$574,750.00

FY 2020 CAPITAL BUDGET:

EXPENSE	2020 BUDGET
Vehicle Expense	\$ 8,000.00
Equipment Maintenance/Repairs	\$ 3,000.00
Technical Supplies	\$ 7,000.00
Field Production Equipment	\$ 8,000.00
Facility Upgrades	\$ 7,000.00
Studio Upgrades	\$ 7,000.00
System Upgrades	\$10,000.00
Website Upgrade	\$ 5,000.00
Total Expenses	\$55,000.00

2020 ANTICIPATED CAPITAL EXPENDITURES

- Equipment maintenance and repairs
- Facility maintenance and repairs
- Vehicle leasing and maintenance
- Purchase of routine technical items
- Routine hardware and software purchases
- Routine equipment replacement
- Possible facilities and/or system upgrades
- Website work

FY 2021 OPERATING BUDGET:

EXPENSE	2021 BUDGET
Labor Compensation	\$362,000.00
Payroll Taxes	\$ 27,150.00
Unemployment Taxes	\$ 2,500.00
Health/Dental Insurance	\$ 49,000.00
Workers Comp. Insurance	\$ 3,500.00
Accounting Fees	\$ 8,000.00
Legal/Professional Fees	\$ 10,000.00
Telephone	\$ 2,500.00
Internet & Website	\$ 4,500.00
Utilities	\$ 11,700.00
Bank Fees	\$ 50.00
Office Supplies	\$ 6,500.00
Dues & Subscriptions	\$ 5,200.00
Postage & Shipping	\$ 1,000.00
Advertising & Promotion	\$ 6,500.00
Meals & Entertainment	\$ 2,300.00
Travel	\$ 6,000.00
Printing & Copying	\$ 600.00
Contributions	\$ 5,000.00
Education & Conferences	\$ 6,000.00
Pension Expense	\$ 8,600.00
Business Insurance	\$ 4,500.00
Facilities Rent	\$ 52,650.00
Facilities Maintenance	\$ 4,050.00
Blank Video Media	\$ 500.00
Total Expenses	\$590,300.00

FY 2021 CAPITAL BUDGET:

EXPENSE	2021 BUDGET
Vehicle Expense	\$ 8,000.00
Equipment Maintenance/Repairs	\$ 5,000.00
Technical Supplies	\$ 7,000.00
Field Production Equipment	\$10,000.00
Facility Upgrades	\$10,000.00
Studio Upgrades	\$ 4,000.00
System Upgrades	\$10,000.00
Website Upgrade	\$ 5,000.00
Total Expenses	\$59,000.00

2021 ANTICIPATED CAPITAL EXPENDITURES

- Equipment maintenance and repairs
- Facility maintenance and repairs
- Vehicle leasing and maintenance
- Purchase of routine technical items
- Routine hardware and software purchases
- Routine equipment replacement
- Possible facilities and/or system upgrades
- Website work

LCATV TEMPORARILY RESTRICTED FUND BALANCE BUDGET GOALS
2019 - 2021

Represents some planned and anticipated uses for the current Temporarily Restricted Fund Balance and any future Fund Balance accumulation.

CATEGORY	AMOUNT
Operating Reserve	\$350,000.00
Outreach Programs	
• Digital Media Program library partnerships	
• Others to be identified	\$ 75,000.00
Analog-to-Digital Archiving Project	\$ 60,000.00
Marketing	\$ 25,000.00
TOTAL	\$510,000.00

LCATV GOALS & OBJECTIVES

2018 - 2023

MAJOR GOAL	Objective Description LCATV will . . .	Physical Measure	Date Measure
1.0 LCATV improves the quality, quantity, diversity and immediacy of programming and production.			
1.01	...improve the capacity of the LCATV Studio to meet user demand and attract new volunteer production	increase in-studio live and recorded programming by 25% per year	by second quarter, 2018
1.02	... solicit for and publicize training sessions by bulletin board and ad placements and other means	at least <u>ONCE</u> quarterly	by first quarter, 2018
1.03	...digitally archive and catalog VHS/DVD programming for ease of access by users and ease of duplication by staff	all physical media digitized and places in a central storage area	by end of 2020
1.04	... offer live video-over-IP coverage to Condition 22 site users who do not currently utilize such	at least 1 site per year	beginning in 2018
1.05	... carry live and taped programs produced at St. Mike's-- including Elley-Long --	at the rate of at least two per quarter	by end of 2019
1.06	... Increase the percentage of all LCATV programming that is volunteer-produced	by 10% annually	beginning in 2018
1.07	...collaborate with area NPOs on production opportunities	at least 1 new collaboration per year per county served	beginning in 2018
1.08	... investigate need, mechanisms and procedures to enable two-way interactivity during field production...	using email, telephone, website, etc.	2018-19, then reevaluate
1.09	...upgrade staff field production equipment based upon usage and deterioration of existing equipment and production needs	6-7 complete A/V kits	beginning in 2018
1.10	...explore need for addition PT or FT production staffing to achieve the objectives herein	TBD	for FY 2019
LCATV structures the nature and accessibility of its resources across its service territory such that each distinct community and entity therein has a fair and reasonable opportunity to collaborate and partner with LCATV.			
2.01	...increase the capacity of the quality/delivery method of online content to ensure that "un-cabeled" portions of the service territory have reasonable access to content and to achieve parity with other online content	determined by periodic review	beginning in 2018
2.02	...determine need for renewed/expanded usage of LCATV's Mobile Video Lab to serve more rural areas or provide new services	any renewed efforts should average 2 uses per month	by end of January 2018
2.03	... determine need for continuation of the Digital Media Program partnership with community libraries and its nature going forward	measures to be determined in conjunction with libraries	by second quarter, 2018
2.04	... co-ordinate/collaborate with schools, youth centers, family centers, other orgs on educational and outreach activities...	at least 1 new collaboration per year per county served	beginning in 2018
2.05	... continue to integrate use of social media platforms and other appropriate communication technologies/applications	5 instances per month	beginning in 2018
2.06	... expand other capabilities of the LCATV website (in addition to video content)	determined by periodic review	ongoing
2.07	...conduct search for and hire addition PT or FT outreach staffing to achieve the objectives herein	TBD	by mid-2018

3.0 To adapt with intellectual agility, LCATV continually redefines and re-imagines its services and resources as community needs change and emerge.

3.01	...institute an ongoing outreach program	Review of community needs, interviews, surveys and meetings with civic leaders	by end of 2020
3.02	...participate in state, regional, and national organizations and activities to stay aware of evolving technologies and regulatory developments	ongoing	immediate
3.03	...attend relevant classes / seminars / workshops / conferences or engage in other educational activities to increase and strengthen staff skill sets	at least 1 instance per staff member per year	starting in 2018
3.04	...collaborate with other Community Media Centers on production and development projects	at least 1 time per year	starting in 2018
3.05	... hire and train field producers . . .	proportionally commensurate with other objectives. . .	ongoing
3.06	... provide training to organizations in improving their communication techniques--social media, video, etc...	as requested	ongoing
3.07	... acquire additional A/V equipment to lend to organizational members . . .	such as portable PA system, video/data projector & screen,	as need arises
3.08	... explore new media training initiatives for adult and youth users...	research needs for media literacy training and citizen journalism	starting in 2019

4.0 LCATV maintains organizational strength through responsible administrative and fiduciary best practices in funding, internal development, strategic planning and evaluation.

4.01	... review our facilities needs, and apply for a Capital Spike Payment if funding is required . . .	once during the term of our Comcast contract	TBD
4.02	...explore alternative funding streams and mechanisms dependent upon predicted trends in the level of cable operator funding.	that raises a TBD minimum percentage of our total annual operating and capital revenues	by the end of 2023
4.03	... conduct a review of our comprehensive PEG Access Plan and revise our Planning Considerations.	with Rule 8.00 Annual Report	annually
4.04	... maintain strong financial policies, accounting procedures and bookkeeping methods...	in conjunction with accountant	ongoing
4.05	... maintain and implement strong personnel policies . . .	possibly in conjunction with a human resources firm	ongoing
4.06	... maintain Operating/Capital Reserve fund . . .	to at least 50% of budgeted Operating + Capital dollars	ongoing
4.07	...work to identify and recruit potential Board of Directors members with skill sets that complement LCATV's mission and goals and who are geographically and demographically diverse.	12-15 members for a full BOD	by the end of 2018
4.08	...revise and maintain the Temporarily Restricted Fund Balance plan to spend operating and capital reserves in accordance with current and future activities and community needs	ongoing	immediate
4.09	... be in compliance with various Human Resources and Americans with Disabilities Act requirements, guidelines, and laws.	where applicable	ongoing

Return of Organization Exempt From Income Tax

2018

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning <u>2018</u> , and ending <u>20</u>																			
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization LAKE CHAMPLAIN ACCESS TV</td> <td>D Employer identification no. 03-0340350</td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number (802) 862-5724</td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) 63 CREEK FARM PLAZA SUITE 3</td> <td>G Gross receipts \$ 644,182</td> </tr> <tr> <td colspan="2">Room/suite</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code COLCHESTER, VT 05446</td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: RICHARD PECOR 2808 MIDDLE RD, COLCHESTER, VT 05446</td> <td>H(c) Group exemption number ▶</td> </tr> </table>	C Name of organization LAKE CHAMPLAIN ACCESS TV		D Employer identification no. 03-0340350	Doing business as		E Telephone number (802) 862-5724	Number and street (or P.O. box if mail is not delivered to street address) 63 CREEK FARM PLAZA SUITE 3		G Gross receipts \$ 644,182	Room/suite		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	City or town, state or province, country, and ZIP or foreign postal code COLCHESTER, VT 05446		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	F Name and address of principal officer: RICHARD PECOR 2808 MIDDLE RD, COLCHESTER, VT 05446		H(c) Group exemption number ▶
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I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																			
J Website: ▶ WWW.LCATV.ORG																			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1993 M State of legal domicile: VT																		

Part I Summary				
1 Briefly describe the organization's mission or most significant activities: PUBLIC EDUCATION AND GOVERNMENT ACCESS TV				
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	8	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	7	
	5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	15	
	6 Total number of volunteers (estimate if necessary)	6		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
	7b Net unrelated business taxable income from Form 990-T, line 38	7b	0	
Revenue			Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)			0
	9 Program service revenue (Part VIII, line 2g)	657,129		628,669
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,954		4,018
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,386		11,495
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	663,469		644,182	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)			0
	14 Benefits paid to or for members (Part IX, column (A), line 4)			0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	349,353		367,948
	16a Professional fundraising fees (Part IX, column (A), line 11e)			0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶	0		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	222,419		300,678
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	571,772		668,626
19 Revenue less expenses. Subtract line 18 from line 12	91,697		(24,444)	
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	823,749		796,384
	21 Total liabilities (Part X, line 26)	7,639		4,718
22 Net assets or fund balances. Subtract line 21 from line 20	816,110		791,666	

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	KEVIN CHRISTOPHER Signature of officer	Date
	KEVIN CHRISTOPHER, EXECUTIVE DIRECTOR Type or print name and title	

Preparer Use Only	Print/Type preparer's name KEVIN MARCHAND	Preparer's signature	Date 02-14-2019	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01204503
	Firm's name ▶ MGV ASSOCIATES	Firm's EIN ▶		Phone no.	
	Firm's address ▶ 382 HERCULES DR SUITE 6 COLCHESTER VT 05446			802-655-3477	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission: PUBLIC EDUCATION AND GOVERNMENT ACCESS TV

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 561,085 including grants of \$) (Revenue \$) PRODUCTION AND MANAGEMENT OF PUBLIC ACCESS TELEVISION STATION WHICH PROVIDED A FREE FORUM FOR THE EXPRESSION AND EXCHANGE OF IDEAS AND INFORMATION, A LINK TO LOCAL GOVERNMENT AND SCHOOLS, AND A RESOURCE FOR EDUCATION AND TRAINING. TRAINING WAS OFFERED TO POTENTIAL VIDEOGRAPHERS AND COPIES OF AIRED PROGRAMS WERE OFFERED FOR SALE.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 561,085

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows 22-38 cover various IRS requirements regarding grants, compensation, tax-exempt bonds, and organizational structure.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, and Yes/No columns. Rows 1a-1c cover Form 1096 reporting, Form W-2G inclusion, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Rows include questions about employee reporting (2a-2b), unrelated business income (3a-3b), foreign accounts (4a-4b), prohibited tax shelter transactions (5a-5c), annual gross receipts (6a-6b), deductible contributions (7a-7d), sponsoring organizations (8-9), and charitable trusts (12a-12b).

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 5 columns: Question, Line Number, and Yes/No columns. Rows include questions about voting members, family relationships, management delegation, and documentation.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question, Line Number, and Yes/No columns. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and document retention.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records:

MGV ASSOCIATES (802) 862-5724, 382 HERCULES DR SUITE 6, COLCHESTER, VT 05446

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RICHARD PECOR PRESIDENT	7.00	X		X				0	0	0
(2) JEFF HATHAWAY VICE PRESIDENT	2.00	X		X				0	0	0
(3) CURT TAYLOR SECRETARY	2.00	X		X				0	0	0
(4) CAROL JONES TREASURER	2.00	X		X				0	0	0
(5) KEVIN CHRISTOPHER EXEC DIRECTOR	40.00	X		X				0	0	0
(6) GREG DREW BD MEMBER	2.00	X						0	0	0
(7) KENNETH ROCHELEAU BD MEMBER	1.00	X						0	0	0
(8) ROBERT SHEA BD MEMEBER	1.00	X						0	0	0
(9) -----										
(10) -----										
(11) -----										
(12) -----										
(13) -----										
(14) -----										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) -----										
(16) -----										
(17) -----										
(18) -----										
(19) -----										
(20) -----										
(21) -----										
(22) -----										
(23) -----										
(24) -----										
(25) -----										
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)							0	0	0	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f			
	g Noncash contributions included in lines 1a-1f: \$				
	h Total. Add lines 1a-1f ▶				
Program Service Revenue	2a GOVERNMENT ACCESS ADMIN	Business Code 515100	628,669	628,669	
	b				
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f ▶		628,669		
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		4,018		4,018
	4 Income from investment of tax-exempt bond proceeds . . . ▶				
	5 Royalties ▶				
	6a Gross rents	(i) Real (ii) Personal			
	b Less: rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) ▶				
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ▶				
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 a				
	b Less: direct expenses b				
	c Net income or (loss) from fundraising events ▶				
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities ▶				
	10a Gross sales of inventory, less returns and allowances a				
b Less: cost of goods sold b					
c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue		Business Code			
11a DVD/PROGRAM COPIES	515100	3,525	3,525		
b DONATIONS	515100	1,499	1,499		
c GAIN ON ASSET	515100	5,000	5,000		
d All other revenue	515100	1,471	1,471		
e Total. Add lines 11a-11d ▶		11,495			
12 Total revenue. See instructions ▶		644,182	640,164	0	4,018

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	82,237	82,237		
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	215,721	215,721		
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,146	6,146		
9 Other employee benefits	39,826	39,826		
10 Payroll taxes	24,018	24,018		
11 Fees for services (non-employees):				
a Management				
b Legal	4,950		4,950	
c Accounting	6,012		6,012	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	23,309	23,309		
12 Advertising and promotion	4,608		4,608	
13 Office expenses	5,391		5,391	
14 Information technology	86,580		86,580	
15 Royalties				
16 Occupancy	57,919	57,919		
17 Travel	9,855	9,855		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	16	16		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	76,937	76,937		
23 Insurance	5,038	5,038		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TECHNICAL SUPPLIES	4,378	4,378		
b REPAIRS AND MAINT	6,286	6,286		
c CONTRIBUTIONS	9,379	9,379		
d BANK CHARGES	20	20		
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	668,626	561,085	107,541	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash - non-interest-bearing		12,741	1	10,161	
	2	Savings and temporary cash investments		521,945	2	560,288	
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges			9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	952,471			
	b	Less: accumulated depreciation	10b	728,942	286,657	10c	223,529
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, line 11			12		
	13	Investments - program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		2,406	15		2,406
16	Total assets. Add lines 1 through 15 (must equal line 34)		823,749	16		796,384	
Liabilities	17	Accounts payable and accrued expenses		7,639	17	4,718	
	18	Grants payable			18		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25		
	26	Total liabilities. Add lines 17 through 25		7,639	26		4,718
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		816,110	27	791,666	
	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building, or equipment fund			31		
32	Retained earnings, endowment, accumulated income, or other funds			32			
33	Total net assets or fund balances		816,110	33		791,666	
34	Total liabilities and net assets/fund balances		823,749	34		796,384	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	644,182
2	Total expenses (must equal Part IX, column (A), line 25)	2	668,626
3	Revenue less expenses. Subtract line 2 from line 1	3	(24,444)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	816,110
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	791,666

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2018

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

LAKE CHAMPLAIN ACCESS TV

03-0340350

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2014, (b) 2015, (c) 2016, (d) 2017, (e) 2018, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2014, (b) 2015, (c) 2016, (d) 2017, (e) 2018, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 11 Total support. Add lines 7 through 10.

12 Gross receipts from related activities, etc. (see instructions) 12
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)). 14 %
15 Public support percentage from 2017 Schedule A, Part II, line 14 15 %
16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization
17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	118					118
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	547,205	590,698	623,667	657,129	631,269	3,049,968
3 Gross receipts from activities that are not an unrelated trade or business under section 513	4,627	8,945	8,123	3,386	11,495	36,576
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	551,950	599,643	631,790	660,515	642,764	3,086,662
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						3,086,662

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6	551,950	599,643	631,790	660,515	642,764	3,086,662
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,376	1,273	2,302	2,954	4,018	11,923
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,376	1,273	2,302	2,954	4,018	11,923
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,247					1,247
13 Total support. (Add lines 9, 10c, 11, and 12.)	554,573	600,916	634,092	663,469	646,782	3,099,832

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f))	15	99.58	%
16 Public support percentage from 2017 Schedule A, Part III, line 15	16	99.63	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))	17	0.00	%
18 Investment income percentage from 2017 Schedule A, Part III, line 17	18	0.00	%

19a **33 1/3% support tests - 2018.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

b **33 1/3% support tests - 2017.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions

Current Year

- 1 Amounts paid to supported organizations to accomplish exempt purposes
- 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity
- 3 Administrative expenses paid to accomplish exempt purposes of supported organizations
- 4 Amounts paid to acquire exempt-use assets
- 5 Qualified set-aside amounts (prior IRS approval required)
- 6 Other distributions (describe in Part VI). See instructions.
- 7 **Total annual distributions.** Add lines 1 through 6.
- 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.
- 9 Distributable amount for 2018 from Section C, line 6
- 10 Line 8 amount divided by Line 9 amount

Section E - Distribution Allocations (see instructions)

(i)
Excess Distributions

(ii)
Underdistributions
Pre-2018

(iii)
Distributable
Amount for 2018

- 1 Distributable amount for 2018 from Section C, line 6
- 2 Underdistributions, if any, for years prior to 2018 (reasonable cause required - explain in Part VI). See instructions.
- 3 Excess distributions carryover, if any, to 2018
 - a From 2013
 - b From 2014
 - c From 2015
 - d From 2016
 - e From 2017
 - f **Total** of lines 3a through e
 - g Applied to underdistributions of prior years
 - h Applied to 2018 distributable amount
 - i Carryover from 2013 not applied (see instructions)
 - j Remainder. Subtract lines 3g, 3h, and 3i from 3f.
- 4 Distributions for 2018 from Section D, line 7: \$
 - a Applied to underdistributions of prior years
 - b Applied to 2018 distributable amount
 - c Remainder. Subtract lines 4a and 4b from 4.
- 5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.
- 6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.
- 7 **Excess distributions carryover to 2019.** Add lines 3j and 4c.
- 8 Breakdown of line 7:
 - a Excess from 2014
 - b Excess from 2015
 - c Excess from 2016
 - d Excess from 2017
 - e Excess from 2018

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

2018

Attach to Form 990.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

LAKE CHAMPLAIN ACCESS TV

03-0340350

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange programs
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Temporarily restricted endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		267,243	199,909	67,334
d Equipment		685,228	529,033	156,195
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 223,529

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SECURITY DEPOSIT	2,406
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2018

**Open to Public
Inspection**

Employer identification number

03-0340350

LAKE CHAMPLAIN ACCESS TV

01. Form 990 governing body review (Part VI, line 11)

STAFF REVIEW

02. Conflict of interest policy compliance (Part VI, line 12c)

VERBAL MONITORING DURING REGULAR MEETINGS

03. CEO, executive director, top management comp (Part VI, line 15a)

REVIEW BY PERSONNEL COMMITTEE WITH DATA COMPARISON.

04. Other officer or key employee compensation (Part VI, line 15b)

REVIEW BY PERSONNEL COMMITTEE WITH DATA COMPARISON.

05. Governing documents, etc, available to public (Part VI, line 19)

UPON REQUEST

06. General explanation attachment

COMPENSATION REPORTED FOR BOARD MEMBERS IN PART VII SECTION A IS A MILEAGE STIPEND.

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury
Internal Revenue Service (99)

▶ Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return LAKE CHAMPLAIN ACCESS TV	Business or activity to which this form relates FORM 990 - 1	Identifying number 03-0340350
--	--	---

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2017 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2019. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	74,803

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2018	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	<input type="checkbox"/>	

Section B - Assets Placed in Service During 2018 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only-see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		21,335	5	HY	SL	2,134
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C - Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System

20a	Class life		S/L
b	12-year		S/L
c	30-year		S/L
d	40-year		S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions	22	76,937
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

**LAKE CHAMPLAIN ACCESS TV
CASH FLOW SUMMARY
FISCAL YEAR 01/01/2018-12/31/18**

	Operating Account	Capital Account	Total Cash
Beginning Balance Before BOD Transfer	577,165.54	(42,478.64)	534,686.90
BOD Authorized Transfer	(42,478.64)	42,478.64	0.00
Adjust Beginning Balance	534,686.90	0.00	534,686.90
Revenue-Current Year	582,016.63	88,666.27	670,682.90
Expenses less Accrued Expenses	512,323.35	127,202.18	639,525.53
Security deposit Paid	0.00	0.00	0.00
Grant Refund-Georgia, Burl. Library	0.00	0.00	0.00
Accrued Expenses paid/(unpaid)	(4,605.49)	0.00	(4,605.49)
Ending Balance	608,985.67	(38,535.91)	570,449.76
 Net Change in Cash	 31,820.13	 3,942.73	 35,762.86

Summary of Cash Accounts:

Money Market Account-NCFCU	448,589.79	(36,176.55)	412,413.24
Checking Account-NCFCU	10,160.74	0.00	10,160.74
Certificates of Deposit	147,620.54	0.00	147,620.54
Other Cash & Savings Accounts	255.24	0.00	255.24
TOTAL	606,626.31	(36,176.55)	570,449.76

**SUMMARY OF ASSETS AND FUND BALANCES
FISCAL YEAR 01/01/2018-12/31/18**

	Operating Account	Capital/Outreach Account	Total Operation
Cash	606,626.31	(36,176.55)	570,449.76
Net Property & Equipment	0.00	223,529.13	223,529.13
Bldg/Security Deposit	2,406.00	0.00	2,406.00
Total Assets	609,032.31	187,352.58	796,384.89
 Current Liabilities	 4,718.17	 0.00	 4,718.17
Fund Balance-Regular	577,432.78	76,328.15	653,760.93
Operating Reserve	147,350.00	0.00	147,350.00
Digital Media Reserve	15,000.00	0.00	15,000.00
Current Year Net Income	69,693.28	(94,137.49)	(24,444.21)
Total Liabilities & Fund Balance	814,194.23	(17,809.34)	796,384.89

Lake Champlain Access TV
Balance Sheet
December 31, 2018

ASSETS

Current Assets		
Capital Money Market Account	\$	(36,176.55)
Operating Checking Account		10,160.74
Operating Money Market Account		448,589.79
Power Acct & CD's		147,620.54
Savings & Other Cash Accounts		255.24
		<u>570,449.76</u>
Total Cash Accounts		<u>570,449.76</u>
Total Current Assets		570,449.76
Property and Equipment		
Equipment		616,583.74
Accum.Depr-Equipment		(460,389.26)
Leasehold Improvements		267,243.40
Amort-Leasehold Improvements		(199,908.75)
Vehicles		68,643.52
AccumDeprec/Vehicles		(68,643.52)
		<u>223,529.13</u>
Total Property and Equipment		223,529.13
Other Assets		
Security Deposit		2,406.00
		<u>2,406.00</u>
Total Other Assets		<u>2,406.00</u>
Total Assets	\$	<u><u>796,384.89</u></u>

LIABILITIES AND FUND BALANCE

Current Liabilities		
State W/H Payable	\$	(13.14)
VT Unemp Taxes Payable		67.91
NCFCU Card Ending 1694		4,663.40
		<u>4,718.17</u>
Total Current Liabilities		4,718.17
Long-Term Liabilities		
		<u>0.00</u>
Total Long-Term Liabilities		0.00
Total Liabilities		4,718.17
Fund Balance		
Fund Balance-Operating		577,432.78
Fund Balance-Capital		76,328.15
Operating Reserve		147,350.00
Digital Media Program Reserve		15,000.00
Net Income		(24,444.21)
		<u>791,666.72</u>
Total Fund Balance		<u>791,666.72</u>
Total Liabilities & Fund Balance	\$	<u><u>796,384.89</u></u>

Lake Champlain Access TV
Income Statement-Capital Expenditures
 For the Twelve Months Ending December 31, 2018

	Current Month Actual	Year to Date Actual	Year to Date Budget	Variance
Revenues				
Transfer from Oper. to Capital	\$ 0.00	26,500.00	\$ 26,500.00	0.00
Capital Revenue-Cable TV	0.00	57,166.27	56,390.00	776.27
Gain on Asset Sale	0.00	5,000.00	0.00	5,000.00
Total Revenues	0.00	88,666.27	82,890.00	5,776.27
Expenses				
Equipment Maintenance & Repair	0.00	2,648.95	1,500.00	1,148.95
Technical Supplies	388.24	4,377.99	6,000.00	(1,622.01)
Vehicle Expenses	772.93	6,590.97	7,000.00	(409.03)
Vehicle Lease expense	334.58	5,669.16	0.00	5,669.16
Depreciation Expense	76,937.00	76,937.00	0.00	76,937.00
Field Production Equipment	(17,564.73)	1,806.39	14,100.00	(12,293.61)
Studio Upgrade	0.00	8,906.04	0.00	8,906.04
Facility Upgrades	0.00	9,923.50	0.00	9,923.50
System Upgrades	0.00	19,847.00	20,265.00	(418.00)
HD Upgrades	0.00	8,951.49	0.00	8,951.49
Website Upgrade	3,277.50	37,145.27	34,000.00	3,145.27
Total Expenses	64,145.52	182,803.76	82,865.00	99,938.76
Net Income	\$ (64,145.52)	(94,137.49)	\$ 25.00	(94,162.49)

Lake Champlain Access TV
Income Statement-Operations
 For the Twelve Months Ending December 31, 2018

	Current Month Actual	Year to Date Actual	Year to Date Budget	Variance
Revenues				
Oper. Revenue-Cable TV	\$ 0.00	571,503.25	\$ 563,900.00	7,603.25
Dubbing/DVD's Income	0.00	3,524.94	4,000.00	(475.06)
Donation Income	0.00	1,499.00	500.00	999.00
Summer/Winter Camp Income	0.00	1,471.00	400.00	1,071.00
Interest Income	535.41	4,018.44	2,000.00	2,018.44
Total Revenues	535.41	582,016.63	570,800.00	11,216.63
Operating Expenses				
Compensation	30,490.52	297,957.68	290,000.00	7,957.68
Employer FICA Expense	2,326.44	22,731.38	21,850.00	881.38
Unemployment Taxes	29.83	1,286.78	2,000.00	(713.22)
Health & Dental Insurance	1,613.28	37,485.97	43,650.00	(6,164.03)
HSA Expense	0.00	2,340.00	0.00	2,340.00
Pension Expense	465.40	6,145.92	6,150.00	(4.08)
Legal & Other Professional Fees	1,155.00	4,950.00	3,000.00	1,950.00
Accounting Fees	0.00	6,011.88	7,400.00	(1,388.12)
Operating-Capital Transfer	0.00	26,500.00	26,500.00	0.00
Bank Fees	20.00	20.00	50.00	(30.00)
Office Rent	3,981.88	47,562.56	47,500.00	62.56
Facilities Maintenance	185.00	3,637.17	4,050.00	(412.83)
Printing & Copying Expense	0.00	57.03	300.00	(242.97)
Office Supplies/Printing	289.46	5,334.11	6,000.00	(665.89)
Blank Video Media	0.00	484.32	750.00	(265.68)
Dues & Subscriptions	48.94	4,731.19	2,500.00	2,231.19
Postage & Shipping	99.08	683.63	900.00	(216.37)
Telephone Expense	0.00	1,788.32	2,050.00	(261.68)
Utilities	85.60	10,356.17	11,850.00	(1,493.83)
Workers Comp Insurance	0.00	1,936.70	2,500.00	(563.30)
Business Insurance	0.00	3,101.30	4,000.00	(898.70)
Web/Internet Access Fees	196.18	3,212.15	4,250.00	(1,037.85)
Advertising Expense	190.50	4,608.27	5,500.00	(891.73)
Educational Development	0.00	150.00	2,500.00	(2,350.00)
Meals & Entertainment	627.17	2,436.02	2,250.00	186.02
Travel Expense	1,640.61	7,419.09	6,000.00	1,419.09
Interest Expense	9.52	16.41	0.00	16.41
Contribution	0.00	9,379.30	10,500.00	(1,120.70)
Total Operating Expenses	43,454.41	512,323.35	514,000.00	(1,676.65)
Net Income	\$ (42,919.00)	69,693.28	\$ 56,800.00	12,893.28

Lake Champlain Access TV
Income Statement-Total Station
 For the Twelve Months Ending December 31, 2018

	Year to Date Actual	Year to Date Budget	Variance
Revenues			
Transfer from Oper. to Capital	26,500.00	\$ 26,500.00	0.00
Oper. Revenue-Cable TV	571,503.25	563,900.00	7,603.25
Capital Revenue-Cable TV	57,166.27	56,390.00	776.27
Dubbing/DVD's Income	3,524.94	4,000.00	(475.06)
Donation Income	1,499.00	500.00	999.00
Summer/Winter Camp Income	1,471.00	400.00	1,071.00
Interest Income	4,018.44	2,000.00	2,018.44
Gain on Asset Sale	5,000.00	0.00	5,000.00
Total Revenues	670,682.90	653,690.00	16,992.90
Operating Expenses			
Compensation	297,957.68	290,000.00	7,957.68
Employer FICA Expense	22,731.38	21,850.00	881.38
Unemployment Taxes	1,286.78	2,000.00	(713.22)
Health & Dental Insurance	37,485.97	43,650.00	(6,164.03)
HSA Expense	2,340.00	0.00	2,340.00
Pension Expense	6,145.92	6,150.00	(4.08)
Legal & Other Professional Fees	4,950.00	3,000.00	1,950.00
Accounting Fees	6,011.88	7,400.00	(1,388.12)
Operating-Capital Transfer	26,500.00	26,500.00	0.00
Bank Fees	20.00	50.00	(30.00)
Office Rent	47,562.56	47,500.00	62.56
Facilities Maintenance	3,637.17	4,050.00	(412.83)
Equipment Maintenance & Repa	2,648.95	1,500.00	1,148.95
Technical Supplies	4,377.99	6,000.00	(1,622.01)
Printing & Copying Expense	57.03	300.00	(242.97)
Office Supplies/Printing	5,334.11	6,000.00	(665.89)
Blank Video Media	484.32	750.00	(265.68)
Dues & Subscriptions	4,731.19	2,500.00	2,231.19
Postage & Shipping	683.63	900.00	(216.37)
Telephone Expense	1,788.32	2,050.00	(261.68)
Utilities	10,356.17	11,850.00	(1,493.83)
Workers Comp Insurance	1,936.70	2,500.00	(563.30)
Business Insurance	3,101.30	4,000.00	(898.70)
Vehicle Expenses	6,590.97	7,000.00	(409.03)
Vehicle Lease expense	5,669.16	0.00	5,669.16
Web/Internet Access Fees	3,212.15	4,250.00	(1,037.85)
Advertising Expense	4,608.27	5,500.00	(891.73)
Educational Development	150.00	2,500.00	(2,350.00)
Meals & Entertainment	2,436.02	2,250.00	186.02
Travel Expense	7,419.09	6,000.00	1,419.09
Depreciation Expense	76,937.00	0.00	76,937.00
Interest Expense	16.41	0.00	16.41
Contribution	9,379.30	10,500.00	(1,120.70)
Field Production Equipment	1,806.39	14,100.00	(12,293.61)
Studio Upgrade	8,906.04	0.00	8,906.04
Facility Upgrades	9,923.50	0.00	9,923.50
System Upgrades	19,847.00	20,265.00	(418.00)
HD Upgrades	8,951.49	0.00	8,951.49
Website Upgrade	37,145.27	34,000.00	3,145.27
Total Operating Expenses	695,127.11	596,865.00	98,262.11
Net Income	(24,444.21)	\$ 56,825.00	(81,269.21)