

ANNUAL REPORT

OF VERMONT ACCESS MANAGEMENT ORGANIZATION

1. Organization

Year: 2007

Corporate Name	LPCTV, Corp.
Doing business as	LPCTV
Mailing Address	43 Main St. Ludlow, VT 05149
Location address (if different than mailing address)	
Web Address	www.lpctv.org

2. Contact Information

2a. Individual Completing this Form

Name	Patrick Cody
Position	Executive Director
Address	
Phone Number/ Extension	228-8808
Fax Number	228-8807
Email Address	pcody@lpctv.org

2b. Executive Director/ Chief Executive Officer

Name (if different than individual completing the annual report)
Address
Phone/ Extension
Fax Number
Email Address

3. Corporate Status

a. Start of Fiscal Year (month/date)	July 1
b. Is the AMO recognized by the IRS as a not-for-profit organization?	yes
c. Year Incorporated in state of Vermont	2001
d. Is the AMO currently registered as a nonprofit organization with the State of Vermont? <i>The Vermont Secretary of State requires nonprofits to renew their status bi-annually.</i> http://www.sec.state.vt.us/tutor/dobiz/noprof/Nonprofit/forms.htm	yes

4. Service Territories and Communities Served

(If AMO served distinct service territories or operators, please specify)	Name of Operator	Communities Served (As identified in your Contract)
Service Territory 1	Comcast	Ludlow, Plymouth, Cavendish
Service Territory 2	none	Mount Holly

Service Territory 3

5. AMO EXPENSE REPORT

8.422 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.

5a. Please indicate the "program services" of the AMO.

(Non-PEG services may include the operation of low per radio station, community technology center, independent production company, etc.)

5b. Please list total expenses as they apply to each of the AMOs program services

(see Part III a - e of IRS Form 990)

Program Services		Operating & Capital Expense Total
PEG Services		
Operation of PEG Channel(s) & Applications	102824	\$117794
Non PEG Services		
1.		\$
2.		\$
3.		\$
PEG & Non-PEG Expenses		\$117794

5c. Please detail operating and capital expenses as they relate to the AMO's support production and distribution of PEG content to cable television subscribers.

(These total should tie into the organizations P&L statement for the reporting year.)

Expense	Total
Operating Expenses	\$102824
Capital Expenses	\$14970
Total Expenses	\$117794

6. AMO REVENUE REPORT

8.422 The report shall also distinguish between funds provided by the operator as PEG funding and funds obtained from other sources.

6a. Please describe the revenue sources the AMO relies upon to support its program services.

(Other Sources of support may include memberships, earned income, fundraising activities such as grants, annual campaigns, capital campaigns.)

Program Services	CABLE	OTHER SOURCES OF REVENUE	TOTAL REVENUE

PEG Services	Cable Co. 1 Comcast	Cable Co. 2	1. Interest	2. Video Duplication, Equip. sale, & Production Services	3. Memberships / Underwriting	4. Donations / Grants	
Operation of PEG Channel(s) & Applications	\$90858	\$	\$2545	\$2749	\$850	\$4475	\$101477
Non PEG Services							
1.	\$	\$	\$	\$	\$	\$	\$0
2.	\$	\$	\$	\$	\$	\$	\$0
3.	\$	\$	\$	\$	\$	\$	\$0
Total Organization Revenue	\$90858	\$0	\$2545	\$2749	\$850	\$4475	\$101477

The report shall also include the following information:

8.422 (A) Changes in service territory

7. Please describe changes in the AMO's service territory in the past fiscal year.

Change(s) in Service Territories & Communities Served		
(If AMO serves distinct service territories or operators, please specify - See Definition at 8.100 (CC))	Name of Operator	Change in Communities Served (As amended in your Contract)
PEG AMO Service Territory 1	Comcast	
Service Territory 2	none	
Service Territory 3		

8.422 (B) Description of current PEG capacity and applications

8. Current PEG capacity and applications.

Name of Cable Operator #1: Comcast	
Channels (Call letters/Name)	Type of Access (Public, Educational, Govt.)
1.LPCTV Channel 8	Public
2.LPCTV Channel 10	Ed. / Gov.
3.	
Other Application:	Description (e.g., Video-on-Demand, Audio Channels):
Name of Cable Operator #2 (if applicable):	
1.	
2.	
3.	

Other Application:	Description (e.g., Video-on-Demand, Audio Channels):
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8.422 (C) Description of current PEG services, including outreach strategies, training delivery, content production and distribution (for example, hours of original programming, utilization of PEG facilities such as live drops or interconnect):

9. Outreach Strategies

a. Outreach Activity Summary - Rank the importance of AMO *outreach* activities for year of this report.

#	Activity	Frequency (e.g., per month/ ongoing...)	Numbers of Served (select applicable Range)
6	Orientation Workshops	ongoing	1-50
12	One-on-one	ongoing	1-50
1	Open Houses	annual	1-50
1	Community Events	annual	1-50
2	Public presentations	Rotary Club, VT Assoc. of Chamber of Commerce Execs.	1-50
3	PEG Channel Promotional Programming	ongoing	1-50
NA	Bill Stuffers		1-50
6	Print Advertisement	ongoing	1-50
NA	Radio Advertisement		1-50
NA	Cable Avails		1-50
NA	Newsletters		1-50
5	E Newsletter	ongoing	1-50
1	Web site & blog		1-50
NA	List serves		1-50
3	Community Organization Memberships		1-50
NA			1-50
NA			1-50
NA			1-50
NA			1-50
NA			1-50

9b. (Optional) You may also provide information in narrative form:

10. Training Delivery

a. Training Delivery Summary - Please summarize the training delivery of the AMO for the year of this report.

Activity	Frequency	Number of people served
One-on-one training & support	17	24
Workshops	6	23
Camps	1	7
Other (Describe): Youth Video Club	15 weeks	7
Other (Describe): After School program	3 weeks	6

Other (Describe):

b. Narrative - You may provide information in narrative form:

11. Volunteer Contribution

a. Volunteer Value - Please summarize the volunteer contributions utilized by the AMO for the year.

Volunteer Contributions	Estimated Number
Volunteers	2
Volunteer Hours	56
Organizations (that you keep track of) that participate and utilize PEG services	37

b. Narrative - You may provide information in narrative form as an option.

Other Volunteer Hours included: Community Service projects- 5 hours Camera Operation- 17 hours

12. PROGRAMMING DATA (For Channel 1, 2, 3 or other such as Video-on-Demand Channel)

a. Hours of Channel Operation

	Channel 1 LPCTV Channel 8 Comcast	Channel 2 LPCTV Channel 10 Comcast	Channel 3 LPCTV Channel 8 Comcast	Other Application Comcast
How many hours does your channel operate each day (not including bulletin board)?	18	18		
How many hours does your channel operate each year (not including bulletin board)?	6570	6570		

b. Programming Information

<i>Please provide annual data.</i>	Channel 1 LPCTV Channel 8 Comcast		Channel 2 LPCTV Channel 10 Comcast		Channel 3 LPCTV Channel 8 Comcast	
	Number of Hours	Number of Programs	Number of Hours	Number of Programs	Number of Hours	Number of Programs
1. Total, ALL first run, non-repeat programming	1560	1280			582	466
a. Total Locally Produced programming	216	245			328	262
b. Total Imported programming	1344	1320	0	0	254	262
i. Imported from Vermont AMOs	390	520			46	27
ii. Imported from other sources	954	800			208	235

c. Remote Origination Sites

Please Describe the remote Origination sites used by the AMO.

Location of the site	Frequency of Use	Number of Programs Cablecast	Ways these sites are being

Building, Street Address, Municipality	(Specify "per month" or "per year")	from the Site	used (e.g., municipal meetings, graduations)
Ludlow Town Hall; Depot St., Ludlow	1 per year	1	Town Meeting

8.422 (D) Details of complaints and how the AMO responded to them;

13. Complaint Tracking:

a. Please summarize the type and resolution of complaints received by your AMO this year. (Data from Compliant Resolution Form, see below)

Category of Complaint	Number of Complaints	Number of Resolved	Number Pending *
Access to Facilities			
Equipment	1	1	
Programming			
Schedule			
Training			
Other			

b. * Please summarize the pending complaints:

8.422 (E) Description of facilities (equipment and location):

14. Facilities Summary

Category	Equipment Package (General description: Number, type of equipment)
Studio Location 1	3 JVC GY 550 Studio Cameras with CCUs; 1 Panasonic MX 20 Production Switcher; 1 Magni Character Generator; 1 Mackie 1400 Audio Mixer; 6 Lowel Tota & Omni Lights; 5 Audio Technica Lavalier mics; 2 Preview Monitors; 2 Program Monitors; 2 SVHS VTRs; 1 Sony 1500A DVCAM VTR; 1 Panasonic DV2500 mini-dv VTR; 1 Blackburst / Color Bar Generator.
Studio Location 2	
Field Production Equipment (in regular use)	6 mini-dv Field Cameras (4 Canon GL1 and 2 Canon Optura 20); 6 tripods; 3 shotgun microphones; 6 Shure handheld omni-directional microphones; 4 Shure handheld directional microphones; 4 Shure Lavalier Microhones; 1 Audio-Technica AT 101 wireless mic system; 4 microphone mixers 8 mic table stands; 4 mic floor stands 4 Beachtek mic/line adapters; 1 Lowel Light Kit with softbox, lighting fixtures, stands, & accessories.
Editing Facilities	1 Mac Mini with Final Cut Pro Studio, imovie, & Adobe Creative Suite 2 Dell Dimension PCs with Adobe Premiere & Adobe Creative Suite 1 Linear (tape-based) edit station- SVHS / mini-dv / DVCAM
Other Equipment (Please specify):	
Major changes in equipment inventory from previous year (general statement of improvements):	

8.422 (F) Roster of staff and board;

15. Leadership

a. STAFF

Number of FTE	2
Number of PTE	2

b. Key Positions Roster

Please provide name	Full Time	Part Time	Contracted	Volunteer
Executive Director	Patrick Cody			
Station Manager				
Channel Coordinator				
Programming Coordinator				
Training Coordinator				
Outreach Coordinator				
Program Producer				
Other Operations Coordinator	Michelle Stinson			
Other Field Producer / Production Assistant		Joanna Bombadil		
Other Field Producer / Production Assistant		Duncan Love		
Other				

c. List of current Board Members

Current Board Member	Community Affiliation (if stated)
1. Sharon Bixby	
2. George Thomson	Cavendish Town Elementary School
3. Norm Vanasse	
4. Jay Jurkoic	
5. Sue Pollender	Black River High School & Middle School
6. Brigid Sullivan	Black River Area Community Coalition
7. Randy Bixby	
8. Mark Huntley	
9. Jean Morrill	
10.	
11.	
12.	

8.422 (G) Changes in organizational structure;

16. Changes in Organizational Structure

Detail any changes in organizational structure that occurred during the year.

(e.g., bylaws, governance details, corporate form, etc.)

8.422 (H) A statement of total operating and capital funding received from the operator and whether any funds were carried forward from the prior year;

17. Statement of Funds - Operating and Capital Funding Received from the Operator and Whether Any Fund were carried forward from prior year.

	Service Territory 1	Service Territory 2	Service Territory 3
Amount carried forward at prior year.	\$0	\$	\$
Total of Operating Funds recieved from the Cable Operator in fiscal year	\$90858	\$	\$
Capital Funds recieved from the Cable Operator in prior fiscal year	\$0	\$	\$

8.422 (I) Financial reports that include:

18. Financial Reports

	Attached	Name of File
18a. Income and expense statement and balance sheet for year of annual report	yes	Income & Expense report FY 06-07
18b. Projected operating and capital budget for current fiscal year	yes	Budget 07-08

8.422 (J) Certification that AMO has:

19. Certification of Corporate Documents

19a. Bylaws or other governing documents	yes
19b. rules and operating procedures	yes
19c. Compliant and dispute resolution procedures	yes
19d. Evidence of conducting meetings consistent with Open Meeting Law	yes

Be sure to sign this document once you print it out and before you make copies to send to the Vermont Department of Public Service and the Vermont Public Service Board.

Statement of Certification:

I _____ hereby certify that _____ (name of organization) maintain the following documents on our premises and available to the public upon request.

1. Bylaws or other governing documents
2. Rules and operating procedures
3. Complaint and dispute resolution procedures
4. Evidence of conducting meetings consistent with Open Meeting Law

Signee _____ (Name) _____ (Signature)

Witness _____ (Name) _____ (Signature)

Date _____

8.422 (K) Planning considerations and expectations for how community needs will be identified and met for current and future fiscal years;

20. Planning Considerations (Narrative)

(L) Service quality issues requiring attention;

21. Service Quality Issues: (Narrative):

(M) Copy of tax returns, financial reviews or, if available, audited financial statements;

22. Financial Documentation

	Attached	Name of File
a. 990 Returns for FY__	yes	Form 990 FY 06-07
b. Financial Review for FY__	no	
c. Audited Financial Statements for FY__ (if audit was executed)	no	

(N) In the event that the operator requires financial information from an AMO for the purpose of auditing the AMO, or for the purpose of a company audit, the AMO shall make the information available, consistent with other provisions of this section. If an audit is required by the operator, the cost of the audit to the AMO will be borne by the operator, unless ordered otherwise by the Board.

Additional Notes:

COMPLAINT RESOLUTION REPORT	
Date Recieved	
Recieved By	
How recieved (Phone/ Email/ Mail/ In-person)	
Date Resolved	
Handled By	
Complaint from (Name Address Phone Email)	
Nature of complaint (Access to Facilities, Equipment, Programming, Schedule, Training, Other)	
Description of Complaint	
Action Taken to Resolve	
Outcome	