

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration U.S. CENSUS BUREAU FORM

IN-51701 (01/31/2007)

## **2007 ECONOMIC CENSUS**

**Cable and Other Program Distribution** 

OMB No. 0607-0934: Approval Expires 12/31/2008

## DUE DATE FEBRUARY 12, 2008

Mail your completed form to:

U.S. CENSUS BUREAU 1201 East 10th Street Jeffersonville, IN 47134-0001

**Please read** the accompanying information sheet(s) before answering the questions.

Need help or have questions about filling out this form?

Visit www.census.gov/econhelp

**Call** 1-800-233-6136, between 8:00 a.m. and 6:00 p.m., Eastern time, Monday through Friday.

- OR -

**Write** to the address above. Include your 11-digit Census File Number (CFN) printed in the mailing address.

IN-51701

## INFORMATION COPY DO NOT USE TO REPORT

(Please correct any errors in this mailing address.)

<b>YOUR RESPONSE IS REQUIRED BY LAW.</b> Title 13, United States Code, requires businesses and other organization that receive this questionnaire to answer the questions and return the report to the U.S. Census Bureau. By the same law, <b>YOUR CENSUS REPORT IS CONFIDENTIAL.</b> It may be seen only by persons sworn to uphold the confidential of Census Bureau information and may be used only for statistical purposes. Further, copies retained in respondents' files are immune from legal process.	lity
se blue or black ballpoint pen. • Please center numbers in their respective boxes. Examples:	
and we would be felt time and a Demot mutual sales through 0 and 7	

<u> </u>												
• Use blue or black ballpoint pen. • Please center numbers in their respective boxes.	Exan	nples:										
<ul> <li>Do not use pencil or felt-tip pen.</li> <li>Do not put slashes through 0 or 7.</li> </ul>	$\boxtimes$	0 1	2	3 4	5	6 7	R	9				
• Place an "X" inside the box.		0 /		J 4		0 /						
The reporting unit for this form is an establishment. An <b>establishment</b> is generally a single physical location where business is conducted or where services or industrial operations are performed. For further clarification, see information sheet(s).												
1 EMPLOYER IDENTIFICATION NUMBER Is the Employer Identification Number (EIN) shown in the mailing address the same as the one used for this establishment on its latest 2007 Internal Revenue Service Form 941, Employer's Quarterly Federal Tax Return?												
0021 Yes - Go to 2 0022 No - Enter current EIN (9 digits)	<b>→</b> 0025		-				ı					
PHYSICAL LOCATION  A. Is this establishment's physical location the same as shown in the mailing add (P.O. Box and rural route addresses are not physical locations.)  10031 Yes - Go to line B	PHYSICAL LOCATION  A. Is this establishment's physical location the same as shown in the mailing address?  (P.O. Box and rural route addresses are not physical locations.)											
0035 Number and street								-				
0032 No - Enter		1										
location 0036 City, town, village, etc. 0037	State	0038 ZI	IP Co	de								
			 	<u> </u>	-	<u>'</u>	<u>'</u>					
<b>B.</b> Is this establishment physically located inside the legal boundaries of the city, (Mark "X" only ONE box.)	town,	village	, etc	.?								
0041 ☐ Yes 0042 ☐ No 0043 ☐ No legal boundaries 0044		Do not	knov	٧				Ī				
C. In what type of municipality is this establishment physically located? (Mark "X"	" only	ONE b	ox.)									
0046 City, village, or borough 0047 Town or township 0048		Other	002	4 🔲	Do	not l	nov	v				

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3	Which O	ONAL STA ONE of the t 'Y" only ON	follow	_	t descri	ibes this	s establis	shment's	operationa	l statı	us at	the	end o	of 2007	'?			
	0011	In operation	ion					0013	Temporar	ly or	seas	ona	lly ina	ctive				
	0014	Ceased op	peration	on - <i>Giv</i>	e date a	at right							<b></b>	Mont	h Da	ау	Yea	ır
	0015	Sold or le AND ente and Empl	er nam	ne and a	ddress	of new	owner c	or operat	or				0018				· ·	
		0060 Name	e of ne	w owner	or oper	rator							0061 E	IN (9 d	igits)			
													-					
		0062 Mailir	ing add	Iress (Nu	mber an	ıd street,	P.O. Box	z, etc.)						<u>'</u>				
		0063 City,	town,	village, e	tc.					006	64 St	ate	0065 Z	IP Cod	e		1 1	
																-	1 1	
	0016	Other - Sp	pecify		0815 													
4		S IN OPERA														if	ark "X" None	2007 Jumber
	Number	of months	s in op	eration	during	2007 (11	f none, n	nark "X"	and go to s	<i>•</i> .) .			_			02	Ш	
	HOW TO		Do <b>th</b>	llar figu <b>ousand</b>	res sho <b>s</b> of do	ould be ollars.	rounde	<b>d</b> to				rk "X None		1. 1	Mil.		Thou.	Dol.
	REPORT DOLLAR FIGURES		lf a	a figure	is <b>\$1,0</b>	)25,628	3.79:		Report —		•				1	0	2 6	
	TIGOTILS		lf a	a value i	s "0" (c	or less tl	han \$500	0.00):	Report —		<b>→</b>	X					· ·	
5	SALES, S	SHIPMENT	ΓS, RE	CEIPTS,	OR RE	VENUE					Ma	rk "X	, <sub>11</sub>		20	007		
												None		l. I	Mil.	$\overline{}$	Thou.	Dol.
	Operatin	g receipts								. 010	00							
6	Not App	licable.																
7	EMPLOY Include:	'MENT ANI :	ID PAY	/ROLL														
	• Fuli Ser	l- and part-	941, E	mploye	r's Qua	arterly F	ederal T	ax Retur	nt whose pa n, and filed	ayroll unde	was er the	rep Em	orted ploye	on Int r Iden	ernal tificat	Rev tion	renue Numbe	er
	Exclude • Ten	e: nporary sta	affina	obtaine	d from	a staffii	na servid	ce.										
	• Cor	ntractors, s	subcor	ntractors	, or inc	depende	ent contr	actors.	ed under an	ampl	lovos	loo	cina c	omna	nu'o l	⊏INI		
	• Pur	rchased or	mana	ged serv	vices, s	uch as j	ianitorial	l, guard,	or landscap	e ser	vices	s.	sing c	отпра	iy 5 i	LIIV.		F
									firm, such a nting servic		ttwai	re						
	For furth	ner clarifica	ation, :	see info	rmation	n sheet(:	s).							Mark "メ if None		N	2007 lumber	
	<b>A.</b> Num	ber of emp	ployee	s for pa	y perio	d includ	ling Mar	ch 12 .					0320					
	B. Pavro	oll before d	deduct	ions (Fy	clude 4	employ4	er's cost	for frinc	e benefits.)			rk "X None		1   1	20 Mil.	007	Thou.	Dol.
	·	nnual payr							e beneme.,				ΨΒΙ	11	<b>∀111</b> 1		, nou,	501.
													+	+	+		-	
	<b>2.</b> Fi	ırst quarter	r payro	oli (Janu	iary-IVIa	arcn, 200	υ/)			. 03.	10	Ш						

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If not shown, please Number (CFN) from t		er your 11-digit Census File nailing address.							
8-18 Not Applicab	le.								
Which ONE of the	(Mark "X" only ONE box.)								
Cable and othe	rpr	ogram distribution							
<sup>0700</sup> 517 510 00 6		Cable television distribution systems							
517 510 00 7		Public access cable television							
517 510 00 8		Direct broadcast satellite (DBS) and other direct to home (television) satellite services							
517 510 00 9		Multipoint distribution services, including MMDS, LMDS, and MDS							
517 510 00 A		Other pay television distribution service, including SMATV, VOD, Uplink, and Closed Circuit television - Specify type							
0701									
Cable and othe	ersu	bscription programming							
515 210 00 4		Cable television networks							
516 110 00 7		Internet broadcasting - providing access to "webcasts" of concerts, sporting events, radio/television broadcasts, music, video, games, and related content "exclusively" over the Internet							
777 517 01 1		Other subscription programming services - Specify							
0701									
Other kind of b	usii	ness or activity							
518 111 10 2		Internet Service Providers - broadband ISPs (i.e., cable, DSL system providers)							
518 111 20 1		Internet Service Providers - ISPs providing services via client supplied telecommunications connections (i.e., dial-up)							
237 130 00 3		Cable television line construction - contractor							
238 210 00 5		Cable television hookup - contractor							
517 910 00 3		Satellite terminal stations, excluding carriers							
532 490 20 5		Cable equipment rental and leasing							
423 690 10 3		Cable equipment wholesalers							
773 000 00 1		Other kind of business or activity - Specify							
0701									

51701035



20	CLASS OF CUSTOMER				
	Estimate the percentage of receipts (reported in 🧐) by class of customer.		2	2007	
		W	hole of r	e perd eceip	ent ts
	1. Residential	L			%
	<b>2.</b> All other	L			%
	3. TOTAL	1	0	0	%
_					

Not Applicable.

HOW TO REPORT **PERCENTS** 

				2007			
			Estimate	es are acce	otable.		
			Report d	ollars OR p	ercent	3.	
		\$ Bil.	Mil.	Thou.	Dol.	Perce	ent
If figure is <b>38.76%</b> of total sales:	Report whole percents					3	9

22 DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE

(Report receipts by source either as a dollar figure or as a whole percent of total receipts (reported in 📵). See HOW TO REPORT DOLLAR FIGURES on page 2 and HOW TO REPORT PERCENTS above. Do not combine data for two or more receipts lines.)

- Line 1a Report receipts from audio and/or video programming on a subscription basis in analog or digital mode by using a cable, satellite, or wireless terrestrial network, including fiber optic and digital subscriber line technologies. The programming is provided in packages that consist of a set of predefined channels or one time viewing packages.
- Line 1a(1) Report receipts from subscriber access to a basic range of programming services generally for a monthly fee. This package contains the minimum number of channels available to subscribers, as defined by each cable, satellite, or MDS operator, and must be purchased to obtain any higher-level programming package.
- Line 1b Report receipts from television air time to clients for broadcasting both advertising and program content, on television stations, networks, cable, and other subscription television program systems. Include air time for advertising content, such as advertising messages, real estate listings, infomercials, etc., and air time for non-commercial programs, such as news, financial, religious, educational programs, etc.
- Line 3a Report receipts from wired or wireless telecommunications facilities to originate, terminate, or transit calls for another telecommunications service provider, including transoceanic telecommunications. Include interconnection and settlement charges for the termination of domestic or international calls, charges to long distance carriers for calls originating at a payphone or within another carriers local network, charges for jointly used facilities, such as pole attachments, and charges for the exclusive use of circuits. Satellite operators/carriers should report on the carrier services line if their customers are telecommunication companies. Non-telecommunications companies should report on line 4, Private network services.
- Line 3b Report receipts from the public switched telephone network (PSTN) for the transmission and switching of voice, data, and video within a local calling area. Include related local services, such as connection charges, 911 services, operator services, and local directory assistance; and subscriber line services to end user customers.
- Lines 3b(1) and 3b(3) Include call services that are self-defined in the carriers tariffs or other documents detailing the terms of service.
- Line 3d Report receipts from transmitting and switching of voice, data, and video over the public switched telephone network between local calling areas and where the call is made from a fixed customer location and is paid for by the caller.
- Line 3e Report receipts from calls made from a fixed customer location which are paid for by the call recipient.
- Line 4 Report receipts from wired or wireless (satellite, microwaves, cellular, etc.) telecommunication link(s) between specified points for the exclusive use of the client. Exclude the provision of private links to telecommunication service providers
- Line 5 Report receipts from providing a direct connection to the Internet, wired or wireless, for the transmission of voice or data to fixed local telephone locations on the public switched telephone network. May include 911 service and a number to mimic a local fixed telephone number for the purpose of receiving calls from local fixed telephone users in the same local calling area. Include voice over Internet protocol (VOIP) and related Internet telephony services.
- Line 7 Report receipts from granting permission to use content protected as industrial property (i.e., by patent or trademark) owned or controlled by this establishment. Exclude outright sale of rights in perpetuity.

CONTINUE WITH 2 ON PAGE 5

	ot shown, please enter your 11-digit Census File nber (CFN) from the mailing address.						
22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued						
					2007		
	Description of sales, shipments, receipts, or revenue	Cen- sus			es are acce <sub>l</sub> Iollars OR pe		
	Description of sales, simplifients, receipts, of revenue	use	\$ Bil.	Mil.	Thou.	Dol.	Percent
0723		0720	0721				0722
1.	Cable and other program distribution						
	a. Multichannel programming distribution services (analog and digital)						
	(1) Basic programming package (Include startup and reconnect fees.)	, 36031					
	(2) Premium programming package	. 36032					
	(3) Pay-per-view	. 36033					
	(4) Sum lines 1a(1) through 1a(3)	. 36030					
	<b>b.</b> Air time - Program distribution networks ( <i>Include local, regional, and national.</i> )						
	(1) Advertising	. 36041					
	(2) Programs	. 36042					
	(3) Sum lines 1b(1) and 1b(2)	. 36040			' '		
2.	Program distribution related services						
	a. Installation services for connections to program distribution networks	. 36470					
	<b>b.</b> Rental of program distribution equipment	, 39516					
	c. Resale of program distribution equipment	. 39673					
	<b>d.</b> Other program distribution related services - Specify						
			I	1 1	l l		l l
		36480					
3.	Telecommunication services					·	
	a. Carrier services and Internet backbone services (Include network access services to other telecommunication carriers.)	. 35840					
	<b>b.</b> Basic fixed local telephony services (Include subscriber line services to end user.)						
	(1) Residential	. 35851			1 1		
	(2) Business	. 35852					
	(3) Public	, 35853					
	(4) Sum lines 3b(1) through 3b(3)	. 35850					
	c. Calling features - Fixed telephony (Include call waiting, caller ID, voice mail, etc.)	. 35860			1 1		
	CONTINUE WITH <b>②</b> ON PAGE 6			,			

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22	DETAIL OF SALES, SHIPMENTS, RECEIPTS, OR REVENUE - Continued									
		C			2007					
	Description of sales, shipments, receipts, or revenue	Cen- sus	Report dollars OR percents							
	besomption of sules, simplicines, receipts, of revenue	use	\$ Bil.	Mil.	Thou.	Dol.	Percent			
0723		0720	0721			1	0722			
3.	Telecommunication services - Continued									
	d. Basic fixed long distance telephony - Outbound	35870								
	e. Basic fixed long distance telephony - Inbound	35880								
	f. Basic fixed all distance telephony (Include both local and long distance calls.)	35890								
4.	Private network services	35900								
   <sub>5.</sub>	Internet telephony									
"			I	1 1	1 1					
	a. Residential	35981								
	<b>b.</b> Business	35982	1							
6.	Internet access services									
	<b>a.</b> Broadband (i.e., always-on)	36011								
	<b>b.</b> Narrowband (i.e., dial-up)	36012								
	c. Sum lines 6a and 6b	36010								
7.	Licensing of rights to use intellectual property protected as industrial property	39402								
8.	Resale of other merchandise - Specify									
			I	1 1	1 1		1 1			
		39615								
9.	All other receipts - Specify if more than 10 percent of total receipts									
		39714								
10.	TOTAL RECEIPTS - Sum of lines should equal <b>9</b> if reporting in dollars	39850					1 0 0			
23	and 24 Not Applicable.									
25	EXPORTED SERVICES									
	<b>NOTE</b> - An exported service is a product (e.g., service performed, license agreement) that is performed for, or sold or transferred to, a customer or client (individual, government, business establishment, etc.) located <b>outside</b> the United States (i.e., outside the 50 States, District of Columbia, U.S. Commonwealth Territories, or U.S. possessions). Include products provided to unaffiliated and affiliated foreign firms (e.g., foreign parent firms, subsidiaries, branches). Exclude products provided to domestic subsidiaries of foreign firms.									
	A. Did the receipts or revenue (reported in 3) include any amounts for ex	kporte	ed servi	ces?						
	O911 Yes - Go to line B									
	<sub>0912</sub>			<b>4.5</b> 11	20		5 :			
	0312 🗀 140 00 10 🖢			\$ Bil.	Mil.	i in	ou. Dol.			
	<b>B.</b> Amount of receipts or revenue for exported services		• • 09	14						

Thank you for completing your 2007 ECONOMIC CENSUS form.

PLEASE PHOTOCOPY THIS FORM FOR YOUR RECORDS AND RETURN THE ORIGINAL.

Date completed