

Form 990
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax
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.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2018, and ending 06-30-2019

- B Check if applicable
Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization
Cable Television Laboratories Inc
% MIKE MEHRTENS
Doing business as
CABLELABS
Number and street (or P O box if mail is not delivered to street address) Room/suite
858 COAL CREEK CIRCLE
City or town, state or province, country, and ZIP or foreign postal code
LOUISVILLE, CO 800279750

D Employer identification number
04-3012897
E Telephone number
(303) 661-9100
G Gross receipts \$ 74,080,053

F Name and address of principal officer
PHIL MCKINNEY
858 COAL CREEK CIRCLE
LOUISVILLE, CO 800279750

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
If "No," attach a list (see instructions)
H(c) Group exemption number

I Tax-exempt status
501(c)(3) 501(c) ( 6 ) (insert no ) 4947(a)(1) or 527

J Website: WWW.CABLELABS.COM

K Form of organization
Corporation Trust Association Other

L Year of formation 1988

M State of legal domicile DE

Part I Summary

1 Briefly describe the organization's mission or most significant activities
CABLELABS IS A RESEARCH AND DEVELOPMENT CONSORTIUM CREATING INNOVATIVE IDEAS THAT IMPACT ITS MEMBERS' BUSINESS BY DRIVING SCALE, REDUCING COSTS & CREATING COMPETITION

Table with 2 columns: Description, Amount. Rows include: 2 Check this box, 3 Number of voting members (14), 4 Number of independent voting members (14), 5 Total number of individuals employed (201), 6 Total number of volunteers (17), 7a Total unrelated business revenue (253,825), 7b Net unrelated business taxable income (38,683).

Table with 4 columns: Description, Prior Year, Current Year, End of Year. Rows include: 8 Contributions and grants, 9 Program service revenue, 10 Investment income, 11 Other revenue, 12 Total revenue, 13 Grants and similar amounts paid, 14 Benefits paid, 15 Salaries, 16a Professional fundraising fees, 17 Other expenses, 18 Total expenses, 19 Revenue less expenses, 20 Total assets, 21 Total liabilities, 22 Net assets or fund balances.

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
Signature of officer: MIKE MEHRTENS CFO
Date: 2020-06-24

Paid Preparer Use Only
Print/Type preparer's name: KPMG LLP
Preparer's signature
Date: 2020-06-24
Check if self-employed
Firm's EIN
Firm's address: 1225 17TH STREET SUITE 800 DENVER, CO 80202
Phone no: (612) 305-5608

**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

CABLELABS CO-INNOVATES UNEXPECTED SOLUTIONS THAT TRANSFORM AND INSPIRE OUR INDUSTRY WE STRIVE TO DELIVER INNOVATIONS THAT ENABLE OUR MEMBERS TO BE THE PROVIDER OF CHOICE IN THEIR MARKETS

**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

If "Yes," describe these new services on Schedule O

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

If "Yes," describe these changes on Schedule O

**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 \$ including grants of \$ ) (Revenue \$ )  
See Additional Data

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
See Additional Data

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
See Additional Data

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

**4e** Total program service expenses ▶

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Contains 22 main questions and sub-questions (a-f) regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 23 through 38 regarding compensation, bond issues, escrow accounts, 501(c)(3) organizations, and other IRS filings.

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, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .	<b>2a</b>	201			
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>	Yes			
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . .	<b>3a</b>	Yes			
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . .	<b>3b</b>	Yes			
<b>4a</b> At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . .	<b>4a</b>	Yes			
<b>b</b> If "Yes," enter the name of the foreign country ►HK See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
<b>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	<b>5a</b>		No		
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>		No		
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .	<b>5c</b>				
<b>6a</b> Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	<b>6a</b>		No		
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>				
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>					
<b>a</b> Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	<b>7a</b>				
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>				
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>				
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>				
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>				
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	<b>7f</b>				
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>				
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .	<b>7h</b>				
<b>8 Sponsoring organizations maintaining donor advised funds.</b>					
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .	<b>8</b>				
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . .	<b>9a</b>				
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	<b>9b</b>				
<b>10 Section 501(c)(7) organizations.</b> Enter					
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>				
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>				
<b>11 Section 501(c)(12) organizations.</b> Enter					
<b>a</b> Gross income from members or shareholders . . . . .	<b>11a</b>				
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .	<b>11b</b>				
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?					
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>				
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>					
<b>a</b> Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	<b>13a</b>				
<b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . .	<b>13b</b>				
<b>c</b> Enter the amount of reserves on hand . . . . .	<b>13c</b>				
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .	<b>14a</b>		No		
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . .	<b>14b</b>				
<b>15</b> Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .	<b>15</b>		No		
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .	<b>16</b>		No		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following; 8a The governing body?; 8b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 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 Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [ ] Own website [ ] Another's website [x] Upon request [ ] Other (explain in Schedule O); 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. MIKE MEHRTENS 858 COAL CREEK CIRCLE LOUISVILLE, CO 80027 (303) 661-3714





**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
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>			
	<b>b</b> Membership dues . . . . .	<b>1b</b>			
	<b>c</b> Fundraising events . . . . .	<b>1c</b>			
	<b>d</b> Related organizations . . . . .	<b>1d</b>			
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b>			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b>			
	<b>g</b> Noncash contributions included in lines 1a - 1f \$ _____				
<b>h Total.</b> Add lines 1a-1f . . . . .		0			

<b>Program Service Revenue</b>			Business Code				
	<b>2a</b> Membership Dues		541900	59,145,522	59,145,522		
<b>b</b> ADMIN & OPERATIONS SUPPORT		651000	4,025,333	4,025,333			
<b>c</b> ROYALTY ADMIN FEE-MPEG LA, LLC		541900	1,953,733	1,953,733			
<b>d</b> CONFERENCE FEES		525990	996,381	996,381			
<b>e</b> OTHER TECHNICAL SERVICES		541900	807,479	807,479			
<b>f</b> All other program service revenue			267,575	13,750	253,825		
<b>g Total.</b> Add lines 2a-2f . . . . .			67,196,023				

<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .			32,319			32,319
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .			0			
	<b>5</b> Royalties . . . . .			6,530,250	1,331,928		5,198,322
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less rental expenses	320,181					
	<b>c</b> Rental income or (loss)	139,104					
	<b>d</b> Net rental income or (loss) . . . . .	181,077	0	181,077			181,077
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		1,280		
	<b>b</b> Less cost or other basis and sales expenses		10,161				
	<b>c</b> Gain or (loss)		-8,881				
	<b>d</b> Net gain or (loss) . . . . .			-8,881			-8,881
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .	<b>a</b>	0				
	<b>b</b> Less direct expenses . . . . .	<b>b</b>	0				
	<b>c</b> Net income or (loss) from fundraising events . . . . .			0			
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .	<b>a</b>	0				
<b>b</b> Less direct expenses . . . . .	<b>b</b>	0					
<b>c</b> Net income or (loss) from gaming activities . . . . .			0				
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	0					
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>	0					
<b>c</b> Net income or (loss) from sales of inventory . . . . .			0				
<b>11a</b> Miscellaneous Revenue		Business Code					
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .			0				
<b>12 Total revenue.</b> See Instructions . . . . .			73,930,788	68,274,126	253,825	5,402,837	

**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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	357,330			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
<b>4</b> Benefits paid to or for members.	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	5,691,396			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
<b>7</b> Other salaries and wages.	30,046,805			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	3,253,247			
<b>9</b> Other employee benefits.	2,205,016			
<b>10</b> Payroll taxes.	1,673,588			
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management.	0			
<b>b</b> Legal.	1,809,599			
<b>c</b> Accounting.	265,245			
<b>d</b> Lobbying.	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	0			
<b>f</b> Investment management fees.	0			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	10,506,561			
<b>12</b> Advertising and promotion.	500			
<b>13</b> Office expenses.	1,700,482			
<b>14</b> Information technology.	416,632			
<b>15</b> Royalties.	0			
<b>16</b> Occupancy.	3,560,108			
<b>17</b> Travel.	2,097,528			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
<b>19</b> Conferences, conventions, and meetings.	3,955,643			
<b>20</b> Interest.	8,479			
<b>21</b> Payments to affiliates.	0			
<b>22</b> Depreciation, depletion, and amortization.	2,807,530			
<b>23</b> Insurance.	487,352			
<b>24</b> 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.)				
<b>a</b> TECHNICAL SERVICES SUPPORT	3,557,082			
<b>b</b> SERVICE CONTRACTS	3,247,900			
<b>c</b> HIRING COSTS	497,972			
<b>d</b> PROFESSIONAL DEVELOPMENT	175,812			
<b>e</b> All other expenses	117,484			
<b>25</b> Total functional expenses. Add lines 1 through 24e.	78,439,291			
<b>26</b> 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 IX

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	10,245,976	<b>1</b>	8,469,908
	<b>2</b> Savings and temporary cash investments . . . . .	7,556,974	<b>2</b>	0
	<b>3</b> Pledges and grants receivable, net . . . . .	0	<b>3</b>	0
	<b>4</b> Accounts receivable, net . . . . .	3,181,233	<b>4</b>	7,782,591
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> 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 . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	4,048,240	<b>9</b>	2,359,336
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	26,580,232		
	<b>b</b> Less accumulated depreciation	21,167,582		
	<b>11</b> Investments—publicly traded securities . . . . .	2,418,376	<b>11</b>	2,895,350
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .	317,027	<b>12</b>	317,027
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .	3,978,533	<b>13</b>	3,978,533
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets See Part IV, line 11 . . . . .	1,437,717	<b>15</b>	4,776,264
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	40,880,551	<b>16</b>	35,991,659	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	6,446,213	<b>17</b>	6,112,865
	<b>18</b> Grants payable . . . . .	0	<b>18</b>	0
	<b>19</b> Deferred revenue . . . . .	1,073,132	<b>19</b>	1,167,496
	<b>20</b> Tax-exempt bond liabilities . . . . .	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D	0	<b>21</b>	0
	<b>22</b> 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 . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b> 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	4,847,168	<b>25</b>	4,545,325
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	12,366,513	<b>26</b>	11,825,686
<b>Net Assets or Fund Balances</b>	<b>27 Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b> Unrestricted net assets	28,514,038	<b>27</b>	24,165,973
	<b>28</b> Temporarily restricted net assets . . . . .	0	<b>28</b>	0
	<b>29</b> Permanently restricted net assets	0	<b>29</b>	0
	<b>30 Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33 Total net assets or fund balances . . . . .</b>	28,514,038	<b>33</b>	24,165,973
	<b>34 Total liabilities and net assets/fund balances . . . . .</b>	40,880,551	<b>34</b>	35,991,659

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	73,930,788
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	78,439,291
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	-4,508,503
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	28,514,038
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	160,438
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	24,165,973

**Part XII Financial Statements and Reporting**

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

- 1** Accounting method used to prepare the Form 990  Cash  Accrual  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  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** 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  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- c** 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?
- b** 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

	Yes	No
<b>2a</b>		No
<b>2b</b>	Yes	
<b>2c</b>	Yes	
<b>3a</b>		No
<b>3b</b>		

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 04-3012897

**Name:** Cable Television Laboratories Inc

Form 990 (2018)

---

**Form 990, Part III, Line 4a:**

SEE SCHEDULE O, GENERAL STATEMENT 2

---

**Form 990, Part III, Line 4b:**

SEE SCHEDULE O, GENERAL STATEMENT 2

---

**Form 990, Part III, Line 4c:**

SEE SCHEDULE O, GENERAL STATEMENT 2

---

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(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			
DR HANNES AMETSREITER ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
LOUIS AUDET ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
HAKIM BOUBAZINE ..... DIRECTOR THRU 10/18/18	1 0 ..... 0 0	X						0	0	0
MANON BROUILLETTE ..... DIRECTOR THRU 12/01/18	1 0 ..... 0 0	X						0	0	0
MANUEL CUBERO ..... DIRECTOR THRU 06/30/19	1 0 ..... 0 0	X						0	0	0
RONALD DUNCAN ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
MICHAEL FRIES ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
HIROHIKO IMURA ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
JULIE LAULIS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
PAT MCADARAGH ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(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			
JOHN PASCARELLI ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
JEAN-FRANCOIS PRUNEAU ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
EDWARD ROGERS ..... DIRECTOR	1 0 ..... 0 0	X						0	0	0
DAVID WATSON ..... CHAIRMAN	1 0 ..... 0 0	X		X				0	0	0
PATRICK ESSER ..... VICE CHAIR	1 0 ..... 0 0	X		X				0	0	0
THOMAS RUTLEDGE ..... TREASURER	1 0 ..... 0 0	X		X				0	0	0
BRAD SHAW ..... SECRETARY	1 0 ..... 0 0	X		X				0	0	0
RACHEL BEISEL ..... SVP, CHIEF MARKETING OFFICER	40 0 ..... 0 0			X				313,513	0	82,749
RALPH BROWN ..... SVP, RESEARCH AND DEVELOPMENT	40 0 ..... 0 0			X				597,430	0	107,073
ISAAC ELLIOTT ..... CHIEF STRATEGY OFFICER	40 0 ..... 0 0			X				587,328	0	104,131

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(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			
BELAL HAMZEH ..... CHIEF TECHNOLOGY OFFICER	40 0 ..... 0 0			X				333,910	0	92,885
CHRISTOPHER LAMMERS ..... CHIEF OPERATING OFFICER	40 0 ..... 0 0			X				753,132	0	109,833
PHIL MCKINNEY ..... PRESIDENT & CEO	40 0 ..... 0 0			X				1,771,662	0	95,895
LEE ZIEROTH ..... SVP & GENERAL COUNSEL	40 0 ..... 0 0			X				518,050	0	102,793
LUIS CAMPOS ..... FELLOW	40 0 ..... 0 0					X		428,632	0	104,374
JUDSON CARY ..... DEPUTY GENERAL COUNSEL	40 0 ..... 0 0					X		438,587	0	86,456
JEFF CHEN ..... SENIOR VICE PRESIDENT	40 0 ..... 0 0					X		523,422	0	93,758
ANJU AHUJA ..... VP, MKT DVLPMT & PRODUCT MGMT	40 0 ..... 0 0					X		342,007	0	36,588
BERNARDO HUBERMAN ..... FELLOW & VP NEXT GEN SYSTEMS	40 0 ..... 0 0					X		504,753	0	38,500
MITCHELL ASHLEY ..... OFFICER THRU 12/31/17	0 0 ..... 40 0						X	0	451,520	95,015

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(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				
KAREN METZ ..... OFFICER THRU 5/2016	0 0 .....						X	150,549	0	0	
GLENN RUSSELL ..... OFFICER THRU 5/2013	40 0 ..... 0 0						X	324,420	0	70,519	

**SCHEDULE C**  
(Form 990 or 990-EZ)  
  
Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527  
  
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.  
▶Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
  
**2018**  
**Open to Public Inspection**

**If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**  
 ● Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C  
 ● Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B  
 ● Section 527 organizations Complete Part I-A only  
**If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**  
 ● Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B  
 ● Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A  
**If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then**  
 ● Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Cable Television Laboratories Inc	<b>Employer identification number</b> 04-3012897
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities (see instructions) \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Yes  No
- 4a Was a correction made?  Yes  No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year?  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
1				
2				
3				
4				
5				
6				

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check  if the filing organization checked box A and "limited control" provisions apply

**Limits on Lobbying Expenditures**  
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a If zero or less, enter -0-
- i** Subtract line 1f from line 1c If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?


Yes  No

**4-Year Averaging Period Under section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	<b>1</b> Yes	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	<b>2</b> Yes	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year?	<b>3</b>	No

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year	<b>2a</b>
<b>b</b> Carryover from last year	<b>2b</b>
<b>c</b> Total	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
------------------	-------------

**SCHEDULE D**  
(Form 990)  
  
Department of the Treasury  
Internal Revenue Service

# Supplemental Financial Statements

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

▶ **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.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

**Name of the organization**  
Cable Television Laboratories Inc

**Employer identification number**  
04-3012897

**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.

	(a) Donor advised funds	(b) Funds and other accounts
<b>1</b> Total number at end of year		
<b>2</b> Aggregate value of contributions to (during year)		
<b>3</b> Aggregate value of grants from (during year)		
<b>4</b> Aggregate value at end of year		
<b>5</b> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>6</b> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

**1** Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

**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

	Held at the End of the Year
<b>a</b> Total number of conservation easements	<b>2a</b>
<b>b</b> Total acreage restricted by conservation easements	<b>2b</b>
<b>c</b> Number of conservation easements on a certified historic structure included in (a)	<b>2c</b>
<b>d</b> Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	<b>2d</b>

**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?       Yes  No

**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)?       Yes  No

**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.

**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

**b** 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 |
|--|--------|
| <b>c</b> Beginning balance             |        |
| <b>d</b> Additions during the year     |        |
| <b>e</b> Distributions during the year |        |
| <b>f</b> Ending balance                |        |
- 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 in 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
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> 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
- |  |     |    |
|--|-----|----|
| <b>(i)</b> unrelated organizations . . . . .   | Yes | No |
| <b>(ii)</b> related organizations . . . . .  |     |    |
| <b>b</b> If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . . |     |    |
- 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
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		5,553,875	3,438,240	2,115,635
<b>d</b> Equipment . . . . .		14,094,085	11,839,828	2,254,257
<b>e</b> Other . . . . .		6,932,272	5,889,514	1,042,758
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				5,412,650

**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)		
<b>Total.</b> (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) NETWORKFX INC	3,608,533	C
(2) CABLELABS ASIA LTD	370,000	C
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 13 )	3,978,533	

**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) INTERCOMPANY RECEIVABLES	3,451,827
(2) LONG-TERM DEPOSITS	78,984
(3) MPEG LA RECEIVABLE	1,228,733
(4) INCOME TAX RECEIVABLE	16,720
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15 )	4,776,264

**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.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
DEFERRED COMPENSATION	2,895,350
DEFERRED RENT	1,513,701
LEASE OBLIGATIONS	136,274
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25 )	4,545,325

**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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>		
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .		<b>5</b>	

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>		
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .		<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .		<b>3</b>	
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .		<b>4c</b>	
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .		<b>5</b>	

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

**Part XIII** Supplemental Information *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 04-3012897

**Name:** Cable Television Laboratories Inc

## Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2 ASC 740 FOOTNOTE	AS AN ORGANIZATION DESCRIBED IN INTERNAL REVENUE CODE (IRC) SECTION 501(C)(6), CABLELABS IS EXEMPT FROM FEDERAL INCOME TAX UNDER IRC SECTION 501(A) ON INCOME FROM ACTIVITIES RELATED TO ITS EXEMPT FUNCTION. CABLELABS HAD NO MATERIAL AMOUNTS OF UNRELATED BUSINESS INCOME DURING ITS FISCAL YEARS ENDED JUNE 30, 2019 AND 2018. CABLELABS' WHOLLY OWNED SUBSIDIARY, KYRIO IS A TAXABLE C CORPORATION, BUT ALSO HAD NO MATERIAL AMOUNTS OF TAXABLE INCOME FOR THE FISCAL YEARS ENDED JUNE 30, 2019 AND 2018. THE COMPANY'S EFFECTIVE RECORDED TAX RATE DIFFERS FROM THE FEDERAL STATUTORY RATE BECAUSE A SUBSTANTIAL PORTION OF THE COMPANY'S ACTIVITIES ARE EXEMPT FROM INCOME TAX. THE COMPANY DID NOT HAVE ANY TAX POSITIONS THAT WERE CONSIDERED UNCERTAIN DURING THE FISCAL YEARS ENDED JUNE 30, 2018 AND 2019. THE COMPANY IS NO LONGER SUBJECT TO FEDERAL, STATE, AND LOCAL EXAMINATIONS BY THE TAX AUTHORITIES IN MOST JURISDICTIONS FOR YEARS ENDED BEFORE JUNE 30, 2013.

**SCHEDULE F  
(Form 990)**  
  
Department of the Treasury  
Internal Revenue Service

# Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047  
**2018**  
**Open to Public Inspection**

Name of the organization  
Cable Television Laboratories Inc

**Employer identification number**  
04-3012897

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
<b>3a</b> Sub-total		164			2,522,382
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)		164			2,522,382

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ \_\_\_\_\_
- 3 Enter total number of other organizations or entities . . . . . ▶ \_\_\_\_\_



**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)*  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)*  Yes  No

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

**990 Schedule F, Supplemental Information**

Return Reference	Explanation
PART I, LINE 3, ITEMS 1-7 GENERAL INFORMATION ON ACTIVITIES OUTSIDE US	THE ONLY TYPES OF EXPENDITURES CABLELABS INCURS OUTSIDE THE U S ARE FOR TRAVEL, MEMBERSHIP DUES, CONFERENCE FEES, CONSULTING, AND EQUIPMENT OR SOFTWARE PURCHASES

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 04-3012897

**Name:** Cable Television Laboratories Inc

### Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	See Sch F Part V	1,624,707
East Asia and the Pacific			Program Services	See Sch F Part V	361,487

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America		164	Program Services	See Sch F Part V	101,617
Middle East and North Africa			Program Services	See Sch F Part V	57,741

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia			Program Services	See Sch F Part V	6,830
East Asia and the Pacific			Investments	N/A	370,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments and Individuals in the United States**

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Department of the  
Treasury  
Internal Revenue Service

Name of the organization

Cable Television Laboratories Inc

Employer identification number

04-3012897

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 11

3 Enter total number of other organizations listed in the line 1 table ▶

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

**Part IV Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2 GENERAL INFORMATION ON GRANTS AND OTHER ASSISTANCE	CABLELABS DOES NOT MAKE GRANTS THAT REQUIRE ANY TYPE OF REPORTING OR MONITORING OF THE USE OF GRANT FUNDS THE GRANTS WERE MADE TO SUPPORT OPERATIONS OF THESE ORGANIZATIONS

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 04-3012897  
**Name:** Cable Television Laboratories Inc

### Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UC REGENTS - UC CA AT SAN DIEGO 9500 GILMAN DRIVE STE 100 LA JOLLA, CA 92093	95-6006144	501(c)(3)	100,000				To support optical research
NYU WIRELESS 370 JAY ST 9TH FL BROOKLYN, NY 11201	13-5562308	501(c)(3)	100,000				To research 5G wireless research center

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
PRINCETON UNIVERSITY 698 CARNEGIE CENTER SUITE 445 PRINCETON, NJ 08537	21-0634501	501(c)(3)	30,000				Internet of Things ("IoT") research
EMMA L BOWEN FOUNDATION 297 NEW JERSEY AVE NW SUITE 700 WASHINTON, DC 20001	22-2635292	501(c)(3)	20,000				To support students in paid internships

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
CABLE CENTER 2000 BUCHTEL BLVD STE 700 DENVER, CO 80210	20-0315238	501(c)(3)	20,000				To support cable industry association
WALTER KAITZ FOUNDATION 25 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	94-2666764	501(c)(3)	18,000				To support telecom industry foundation

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA CAMPUS BOX 2200 CHAPEL HILL, NC 27599	59-1711424	501(c)(3)	16,650				To support of PNM related research
UNIVERSITY OF COLORADO FOUNDATION UCB 401 BOULDER, CO 80309	64-6049811	501(c)(3)	15,100				To support tech research and innovation

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WOMEN IN CABLE TELECOMMUNICATIONS ROCKY MOUNTAIN 1995 BUCHTEL BLDV DENVER, CO 80309	36-3550542	501(c)(3)	13,500				To support Rocky Mountain chapter
TECHNOLOGY POLICY INSTITUTE 1333 GRAINVIEW AVE STE 445 BOULDER, CO 80210	20-5835776	501(c)(3)	10,000				To support technology policy research

**Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.**

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
DUKE UNIVERSITY 324 BLACKWELL ST WASHIN BLDG DURHAM, NC 27701	56-0532129	501(c)(3)	8,350				To support of PNM related research

**Schedule J**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

## Compensation Information

**For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**  
▶ **Attach to Form 990.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No 1545-0047

# 2018

**Open to Public Inspection**

Name of the organization  
Cable Television Laboratories Inc

Employer identification number  
04-3012897

### Part I Questions Regarding Compensation

		Yes	No		
<p><b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel  <input type="checkbox"/> Travel for companions  <input checked="" type="checkbox"/> Tax indemnification and gross-up payments  <input type="checkbox"/> Discretionary spending account                 </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p><b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	<b>1b</b>	Yes			
<p><b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	<b>2</b>	Yes			
<p><b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee  <input type="checkbox"/> Independent compensation consultant  <input type="checkbox"/> Form 990 of other organizations                 </td> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Written employment contract  <input type="checkbox"/> Compensation survey or study  <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p><b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p>					
<p><b>a</b> Receive a severance payment or change-of-control payment?</p>	<b>4a</b>	Yes			
<p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	<b>4b</b>		No		
<p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	<b>4c</b>		No		
<p><b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b></p>					
<p><b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p>					
<p><b>a</b> The organization?</p>	<b>5a</b>				
<p><b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III</p>	<b>5b</b>				
<p><b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p>					
<p><b>a</b> The organization?</p>	<b>6a</b>				
<p><b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III</p>	<b>6b</b>				
<p><b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	<b>7</b>				
<p><b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	<b>8</b>				
<p><b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	<b>9</b>				



**Part III Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

<b>Return Reference</b>	<b>Explanation</b>
PART I, LINES A1 AND 1B TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	CABLELABS GROSSES UP THE VALUE OF EMPLOYEE RECOGNITION AWARDS (E.G. GIFT CARDS) FOR ALL EMPLOYEES. CERTAIN NEW HIRES ARE OFFERED A RELOCATION ALLOWANCE TO COVER ELIGIBLE RELOCATION EXPENSES UP TO 15% OF BASE SALARY TO ENTICE THEM TO ACCEPT OUR JOB OFFER. TAXABLE RELOCATION REIMBURSEMENTS ARE GROSSED UP. THE RELOCATION ALLOWANCE IS DOCUMENTED IN OUR RECRUITMENT POLICY WHICH WAS APPROVED BY THE COMPANY'S CHIEF OPERATING OFFICER AND VICE PRESIDENT OF HUMAN RESOURCES.

<b>Return Reference</b>	<b>Explanation</b>
PART I, LINE 4A SEVERANCE OR CHANGE OF CONTROL PAYMENTS	THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS, IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THEIR SEVERANCE AGREEMENT GLENN RUSSELL \$268,583 MAY 31, 2019 THIS PAYMENT WAS IN CONSIDERATION OF THE EMPLOYEE'S ACKNOWLEDGEMENT THAT THE PAYMENTS EXCEED ANY AMOUNT THAT HE WOULD OTHERWISE BE ENTITLED TO RECEIVE UPON SEPARATION OF EMPLOYMENT, AND AGREEMENT TO 1) RELEASE CABLELABS AND ITS DIRECTORS, OFFICERS AND EMPLOYEES FROM ALL POTENTIAL CLAIMS ARISING OUT OF HIS EMPLOYMENT OR SEPARATION OF EMPLOYMENT, 2)CONTINUE TO ABIDE BY ALL CONFIDENTIALITY AND NON-DISCLOSURE OBLIGATIONS OWED TO CABLELABS AND 3) REFRAIN FROM MAKING ANY FALSE OR DISPARAGING COMMENTS ABOUT CABLELABS' DIRECTORS, OFFICERS, EMPLOYEES OR ITS BUSINESS



**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 04-3012897  
**Name:** Cable Television Laboratories Inc

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
RACHEL BEISEL SVP, CHIEF MARKETING OFFICER	(i)	238,274	73,588	1,651	33,845	48,904	396,262	0
	(ii)	-----	-----	-----	0	0	0	0
RALPH BROWN SVP, RESEARCH AND DEVELOPMENT	(i)	450,780	139,626	7,024	38,500	68,573	704,503	0
	(ii)	-----	-----	-----	0	0	0	0
ISAAC ELLIOTT CHIEF STRATEGY OFFICER	(i)	442,046	140,837	4,445	38,500	65,631	691,459	0
	(ii)	-----	-----	-----	0	0	0	0
BELAL HAMZEH CHIEF TECHNOLOGY OFFICER	(i)	236,238	95,756	1,916	34,091	58,794	426,795	0
	(ii)	-----	-----	-----	0	0	0	0
CHRISTOPHER LAMMERS CHIEF OPERATING OFFICER	(i)	567,654	175,846	9,632	38,500	71,333	862,965	0
	(ii)	-----	-----	-----	0	0	0	0
PHIL MCKINNEY PRESIDENT & CEO	(i)	888,155	861,014	22,493	38,500	57,395	1,867,557	0
	(ii)	-----	-----	-----	0	0	0	0
LEE ZIEROTH SVP & GENERAL COUNSEL	(i)	385,841	119,954	12,255	38,500	64,293	620,843	0
	(ii)	-----	-----	-----	0	0	0	0
MITCHELL ASHLEY OFFICER THRU 12/31/17	(i)	-----	-----	-----	0	0	0	0
	(ii)	278,550	168,151	4,819	38,500	56,515	546,535	0
LUIS CAMPOS FELLOW	(i)	302,491	121,874	4,267	38,500	65,874	533,006	0
	(ii)	-----	-----	-----	0	0	0	0
JUDSON CARY DEPUTY GENERAL COUNSEL	(i)	332,515	102,472	3,600	38,500	47,956	525,043	0
	(ii)	-----	-----	-----	0	0	0	0
JEFF CHEN SENIOR VICE PRESIDENT	(i)	386,851	124,399	12,172	38,500	55,258	617,180	0
	(ii)	-----	-----	-----	0	0	0	0
KAREN METZ OFFICER THRU 5/2016	(i)	0	0	150,549	0	0	150,549	0
	(ii)	-----	-----	-----	0	0	0	0
GLENN RUSSELL OFFICER THRU 5/2013	(i)	241,965	78,989	3,466	33,986	36,533	394,939	0
	(ii)	-----	-----	-----	0	0	0	0
ANJU AHUJA VP, MKT DVLPMT & PRODUCT MGMT	(i)	259,845	80,256	1,906	36,588	0	378,595	0
	(ii)	-----	-----	-----	0	0	0	0
BERNARDO HUBERMAN FELLOW & VP NEXT GEN SYSTEMS	(i)	401,506	101,904	1,343	38,500	0	543,253	0
	(ii)	-----	-----	-----	0	0	0	0

**SCHEDULE O**  
(Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

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](http://www.irs.gov/Form990) for the latest information.

Department of the Treasury

Name of the organization

Cable Television Laboratories Inc

Employer identification number

04-3012897

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990 PART III LINE 1 ORGANIZATION'S MISSION	CABLELABS CO-INNOVATES UNEXPECTED SOLUTIONS THAT TRANSFORM AND INSPIRE OUR INDUSTRY WE STRIVE TO DELIVER INNOVATIONS THAT ENABLE OUR MEMBERS TO BE THE PROVIDER OF CHOICE IN THEIR MARKETS

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
PART III, LINE 4 STATEMENT OF PROGRAM SERVICES	<p>FOUNDED IN 1988 BY CABLE OPERATING COMPANIES, CABLE TELEVISION LABORATORIES, INC (CABLELABS OR THE COMPANY) IS A NONPROFIT INNOVATION AND R&amp;D LAB THAT IS DEDICATED TO CREATING AND LEVERAGING INNOVATIVE IDEAS THAT SIGNIFICANTLY IMPACT ITS CABLE OPERATOR MEMBERS' BUSINESSES THROUGHOUT THE WORLD BY ALLOWING THEM TO BE THE PROVIDERS OF CHOICE IN THE MARKETS THEY SERVE. THE COMPANY'S KEY OBJECTIVES ARE TO PROVIDE A CENTRAL SOURCE OF TIMELY INFORMATION ABOUT TECHNICAL DEVELOPMENTS OF INTEREST TO THE INDUSTRY, PLAN, PERFORM, AND FUND INNOVATION AND RESEARCH AND DEVELOPMENT PROJECTS THAT ALIGN WITH THE OVERALL INTERESTS OF THE CABLE INDUSTRY, FACILITATE THE TRANSFER OF RELEVANT TECHNOLOGY AND BEST PRACTICES FOR DEPLOYING NEW TECHNOLOGY TO MEMBER COMPANIES AND PROVIDERS TO THE INDUSTRY, AND PROVIDE SERVICES THAT PROMOTE INTEROPERABILITY OF RELEVANT TECHNOLOGIES SO THAT THEY ARE SUCCESSFULLY DEPLOYED BY MEMBER COMPANIES. CABLELABS MEMBERSHIP COMPRISES MAJOR CABLE OPERATORS WORLDWIDE. THE BOARD OF DIRECTORS COMPRISES 14 VOTING REPRESENTATIVES WITH TEN DESIGNATED EACH BY ONE OF THE TEN U.S. AND CANADIAN MEMBER COMPANIES PAYING THE LARGEST AMOUNT OF DUES, TWO DESIGNATED EACH BY ONE OF THE TWO GLOBAL MEMBER COMPANIES PAYING THE LARGEST AMOUNT OF DUES, AND TWO ELECTED BY ALL MEMBERS OF THE MEMBERSHIP VOTING AT LARGE, WITH THREE NONVOTING EXOFFICIO REPRESENTATIVES. THE COMPANY'S ACTIVITIES INCLUDE THE FOLLOWING MAJOR INITIATIVES: (A) STRATEGY AND INNOVATION. THE STRATEGY AND INNOVATION TEAM IS FOCUSED ON DEVELOPING NEW INNOVATIONS, PERFORMING ANALYSIS PROJECTS, AND ENGAGING THE TECHNOLOGY STARTUP COMMUNITY. THIS GROUP RESEARCHES THE TECHNOLOGIES THEMSELVES, ALONG WITH THE ECONOMIC AND MARKET VIABILITY OF THE TECHNOLOGIES BOTH IN TERMS OF UNIT COSTS AND COMPETITIVE ALTERNATIVES. THE GROUP SPONSORS AND PROMOTES THE IDENTIFICATION AND DEVELOPMENT OF INNOVATIONS THAT CAN DELIVER MARKET AND TECHNOLOGICAL BREAKTHROUGHS. THE FOCUS OF THE INNOVATION WORK IN THE GROUP IS THE PURSUIT OF IDEAS WITH TRANSFORMATIONAL MARKET POTENTIAL IN THE NEXT THREE TO EIGHT YEARS. (B) WIRED TECHNOLOGIES. WIRED TECHNOLOGIES ACTIVITIES RELATE PRIMARILY TO WIRELINE COMMUNICATIONS, DEFINED AS COMMUNICATION TECHNOLOGIES WHICH ARE DEPENDENT UPON A WIRE, CABLE OR FIBER TO FACILITATE THE TRANSFER OF INFORMATION FROM ONE LOCATION TO ANOTHER. WIRELINE COMMUNICATIONS IS A BROAD CATEGORY THAT, FOR PURPOSES OF WIRED TECHNOLOGIES, ENCOMPASSES FIXED NETWORK INFRASTRUCTURE IN BOTH THE ACCESS NETWORK AND IN-HOME NETWORK. ACCESS NETWORK WIRELINE COMMUNICATIONS INCLUDES THE DEVELOPMENT OF SPECIFICATIONS AND SOLUTIONS FOR DOCSIS 3.1, DOCSIS 4.0, DISTRIBUTED ACCESS ARCHITECTURES, PROACTIVE NETWORK MAINTENANCE, POINT-TO-POINT COHERENT OPTICS, AND PASSIVE OPTICAL NETWORKING (PON). IN-HOME NETWORKING ACTIVITIES FOCUS ON THE USE OF MULTIMEDIA OVER COAX ALLIANCE (MOCA) TECHNOLOGIES OR OTHER SOLUTIONS FOR DELIVERING ETHERNET OVER COAXIAL NETWORK (EOC). WIRED TECHNOLOGIES ALSO FOCUSES ON SOLUTIONS RELATED TO BACKHAUL.</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
<p>PART III, LINE 4 STATEMENT OF PROGRAM SERVICES</p>	<p>ND FRONT-HAUL TO AND FROM WIRELESS ACCESS POINTS (C) WIRELESS TECHNOLOGIES WIRELESS TECHN OLOGIES ACTIVITIES FOCUS ON DRIVING THE TECHNOLOGY DEVELOPMENT OF WIRELESS TECHNOLOGIES FO R THE CABLE ECOSYSTEM IN PARTICULAR AND THE WIRELESS ECOSYSTEM AS A WHOLE WIRELESS TECHNO LOGIES CURRENTLY OF FOCUS INCLUDE WI-FI, 3G/4G/LTE, AND 5G TECHNOLOGIES, IN ADDITION TO EM ERGING WIRELESS TECHNOLOGIES IN THE INTERNET OF THINGS (IOT) SECTOR WI-FI EFFORTS ARE FOC USED ON IMPROVING THE WI-FI EXPERIENCE FOR BOTH END-USERS AND CABLE OPERATORS THROUGH SUPP ORT OF INDUSTRY INITIATIVES, INCLUDING CARRIER GRADE WI-FI, PASSPOINT, AND HOTSPOT 2 0 IN ADDITION, THERE IS FOCUS ON INTEGRATION WITH MOBILE TECHNOLOGIES SUCH AS WI-FI FIRST, IN WHICH THE WI-FI LINK IS THE PREFERRED METHOD FOR BROADBAND AND VOICE CONNECTIVITY THE PRI MARY AREA OF FOCUS FOR MOBILE WIRELESS TECHNOLOGIES IS ON DRIVING MOBILE TECHNOLOGIES INTO THE UNLICENSED BAND AND DRIVING COEXISTENCE FEATURES INTO THE TECHNOLOGY TO FACILITATE FA IR SHARING OF THE UNLICENSED SPECTRUM WITH INCUMBENT TECHNOLOGIES SUCH AS WI-FI 5G WIRELE SS RESEARCH BASED ON LOW BAND, MID-BAND AND MILLIMETER WAVE TECHNOLOGIES TARGETING LOW LAT ENCY MULTI GBPS WIRELESS PERFORMANCE IS ALSO A SIGNIFICANT FOCUS AREA, INCLUDING THE FEASI BILITY OF USING FIXED 5G TECHNOLOGIES TO DELIVER HIGH-SPEED DATA SERVICES TO END-USERS AD DITIONALLY, NETWORK CONVERGENCE BETWEEN WIRED AND WIRELESS TECHNOLOGIES IS A GROWING FOCUS AREA, WITH THE GOAL OF DRIVING ENHANCEMENTS AND CAPABILITIES INTO WIRED INFRASTRUCTURE AN D LEVERAGING THE WIRED INFRASTRUCTURE TO ENHANCE THE CAPABILITIES AND PERFORMANCE OF MOBIL E NETWORKS (D) SECURITY TECHNOLOGIES SECURITY TECHNOLOGIES LEADS A NUMBER OF TECHNICAL PR OJECTS AIMED AT ENHANCING THE SECURITY OF SERVICES DELIVERED BY CABLE OPERATORS THESE PRO JECTS INCLUDE MAINTAINING AND IMPROVING THE COMPANYS PUBLIC KEY INFRASTRUCTURE (PKI), WHI C H ALLOWS CABLE OPERATORS TO AUTHENTICATE DEVICES CONNECTED TO THEIR NETWORKS AND ENABLES T HE SECURE DELIVERY OF CABLE SERVICES TO SUBSCRIBERS IT ALSO INCLUDES IMPROVEMENTS TO THE SECURITY CONTROLS IN DOCSIS, CONSUMER AND MEDICAL IOT SECURITY, NEW HOME AND BUSINESS NETW ORK ARCHITECTURES TO IMPROVE SECURITY, DISTRIBUTED DENIAL OF SERVICE AND BOTNET MITIGATION TECHNOLOGIES, AND INFORMATION SECURITY DATA SHARING SECURITY TECHNOLOGIES INVESTIGATES E MERGING SECURITY TECHNOLOGIES, INCLUDING BLOCKCHAIN APPLICATIONS, SOFTWARE-DEFINED NETWORK S, NETWORK FUNCTION VIRTUALIZATION (SDN/NFV), IMAGE SECURITY INTEGRITY, ENHANCEMENTS TO PK I PROTOCOLS, AND CRYPTOGRAPHIC RESEARCH A STRATEGIC GOAL OF SECURITY TECHNOLOGIES IS TO C ONTINUALLY IMPROVE THE SECURITY OF CABLE VOICE, VIDEO, DATA, AND WEB SERVICES THROUGH INNO VATIVE AND STANDARDS-BASED SECURITY SOLUTIONS (E) FUTURE INFRASTRUCTURE THE FUTURE INFRAS TRUCTURE TEAM IS ENGAGED IN TWO FUNDAMENTAL SETS OF ACTIVITIES 1)SOFTWARE DEVELOPMENT THA T SUPPORTS THE PROJECT ACTIVITIES OF THE WIRED, WIRELESS, SECURITY AND INNOVATION OFFICE E NGINEERING TEAMS AND 2) ENGINE</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
PART III, LINE 4 STATEMENT OF PROGRAM SERVICES	ERING INFRASTRUCTURE PROJECTS OR OPEN SOURCE INITIATIVES TO PROVIDE TOOLS, SYSTEMS, AND SOFTWARE THAT FURTHER THE OVERALL GOALS AND CAPABILITIES OF CABLELABS' ENGINEERING DEPARTMENTS AND ITS MEMBERS (F) TECHNOLOGY POLICY THE TECHNOLOGY POLICY TEAM DRIVES AND SUPPORTS CABLE PRIORITIES OF SUBSTANTIAL STRATEGIC CONSEQUENCE THROUGH TECHNOLOGY POLICY AND STANDARDS TO ENABLE MARKET SUCCESS (G) STRATEGIC PLANNING AND METRICS THE STRATEGIC PLANNING AND METRICS TEAM SUPPORTS LEADING R&D ACTIVITIES BY ADMINISTERING AND PUBLISHING TECHNICAL PAPERS, INCLUDING SPECIFICATIONS AND REPORTS, AS WELL AS BY DISTRIBUTING KEY TECHNICAL INFORMATION TO MEMBERS AND TECHNOLOGY PARTNERS TO FURTHER CABLE TECHNOLOGIES

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
(H) Kyrio	<p>THE COMPANY FORMED NETWORK FX, INC (DBA KYRIO), A WHOLLY OWNED FOR-PROFIT SUBSIDIARY, EFF ECTIVE FEBRUARY 14, 2012 KYRIO PROVIDES TECHNOLOGY AND ONLINE BASED SERVICES TO NETWORK C OMMUNICATIONS PROVIDERS, DEVICE MANUFACTURERS, AND INDUSTRY TRADE ASSOCIATIONS KYRIO'S SE RVICES ARE COMPRISED OF FIVE ACTIVITIES LAB SERVICES, NETWORK EQUIPMENT PERFORMANCE TESTI NG, WI- FI ROAMING ACROSS NETWORKS, EXTENDED SECURITY MANAGEMENT ACROSS INDUSTRIES, AND AN IMPROVED ONLINE BUYING EXPERIENCE FOR HOME-BASED, AND BUSINESS SERVICES EFFECTIVE JULY 1, 2017, THE LAB SERVICES GROUP WAS TRANSFERRED FROM THE COMPANY TO KYRIO VIA AN ASSET PURCH ASE AGREEMENT THE TESTING SERVICES GROUP'S PRIMARY ACTIVITIES ARE CERTIFICATION/QUALIFICA TION TESTING, INTEROPERABILITY EVENTS, MEMBER-DEVICE TESTING, AND DEVELOPMENT LAB SERVICES THE GROUP ALSO SUPPORTS THE COMPANY'S RESEARCH AND DEVELOPMENT INITIATIVES, PROVIDING EX PERTISE FOR DEVELOPMENT OF NEW TECHNOLOGIES AND DEVELOPING LABORATORY AND FIELD PROCESSES FOR TESTING THESE NEW TECHNOLOGIES THE GROUP TESTS AND EVALUATES EQUIPMENT FOR COMPLIANCE WITH THE APPLICABLE COMPANY SPECIFICATIONS USING PROCEDURES THAT HAVE BEEN DEVELOPED IN C OOPERATION WITH THE MANUFACTURERS OF THE EQUIPMENT, ALL DEVELOPED PURSUANT TO SUCH SPECIFI CATIONS AND MEMBERS' REQUIREMENTS THE LAB SERVICES GROUP IS RESPONSIBLE FOR THE LABORATOR Y FACILITIES AT THE COMPANY'S TEST HOUSE IN THORNTON, CO, AS WELL AS OTHER TESTING RELATED ACTIVITIES OUTSIDE OF THE LAB THIS INCLUDES HOSTING INTEROPERABILITY EVENTS WHICH ARE DE SIGNED TO PROVIDE NEUTRAL GROUND FOR MANUFACTURERS TO TEST HOW EFFECTIVELY THEIR PRODUCTS INTEGRATE WITH EACH OTHER, AND HOSTING DEVELOPMENT LAB ACTIVITIES TO ACCELERATE MANUFACTUR ERS' PRODUCT DEVELOPMENT OR PROVIDE ACCESS TO EQUIPMENT THEY DO NOT HAVE IN THEIR OWN LABS TO IMPROVE PRODUCT READINESS, STABILITY, PERFORMANCE, AND SYSTEM INTEROPERABILITY KYRIO PROVIDES A VARIETY OF PERFORMANCE, CHARACTERIZATION, INTEROPERABILITY, AND DIAGNOSTIC TEST ING OF NETWORKED DEVICES SERVICES INCLUDE TESTING OF WI-FI TECHNOLOGIES (STANDALONE AND E MBEDDED ACCESS POINTS), ANTENNA AND HARDWARE DESIGNS, HANDSETS, AND EQUIPMENT HOUSINGS KY RIO ALSO TESTS HFC-BASED AND SDN TECHNOLOGIES, INCLUDING DOCSIS AND PACKETCABLE CERTIFICAT ION, FIBER, NETWORK PROTOCOLS, AND NETWORK VIRTUAL FUNCTION SOFTWARE KYRIO MANAGES PKI DI GITAL CERTIFICATES FOR INDUSTRY TRADE ASSOCIATIONS AND COMMUNICATIONS PROVIDERS KYRIO SER VICES PROVIDE THE DESIGN, IMPLEMENTATION, PROVISIONING, REVOCATION, AND GOVERNANCE OF DIGI TAL CERTIFICATES FOR WI-FI PASSPOINT HOTSPOT 2 0, SET-TOP BOXES, CABLE MODEMS, WEB SERVERS , ENERGY DEMAND MANAGEMENT DEVICES, IOT, WIRELESS AND OTHER NETWORKED DEVICES KYRIO PROVI DES THE GO2BROADBAND ONLINE LEAD MANAGEMENT SERVICE CONNECTING BROADBAND, VIDEO, AND VOICE SERVICE PROVIDERS WITH CHANNEL RESELL PARTNERS THROUGH AN ONLINE PORTAL AND PREDEFINED A PIS, THE GO2BROADBAND CLOUD-BASED SERVICE FACILITATES END CUSTOMERS' INQUIRY ABOUT THE SER VICEABILITY OF THEIR LOCATION,</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
(H) Kyrno	<p>REVIEW, AND SELECTION OF DESIRED SERVICES AND SCHEDULE INSTALLATION OF SERVICES (I) KYRIO MEDICAL SERVICES EFFECTIVE FEBRUARY 10, 2016, KYRIO FORMED KYRIO MEDICAL, INC (KYRIO MEDICAL), A WHOLLY OWNED SUBSIDIARY KYRIO MEDICAL PROVIDES PKI DESIGN AND MANAGED SERVICES, DIGITAL CERTIFICATES, AND CODE VERIFICATION CERTIFICATES TO INDUSTRY TRADE ASSOCIATIONS AND SUPPLIERS IN THE MEDICAL DEVICE INDUSTRY (J) UPRAMP EFFECTIVE FEBRUARY 23, 2016, KYRIO FORMED UPRAMP, INC (UPRAMP), A WHOLLY OWNED SUBSIDIARY, TO OFFER STARTUPS RELATED TO THE CABLE INDUSTRY A PROGRAM CALLED FITERATOR, WHICH IS AN ACCELERATOR THAT IS A GRADUATE PROGRAM FOR LATER STAGE STARTUPS THAT ALREADY HAVE A PRODUCT, AND ARE LOOKING FOR PRODUCT OR MARKET FIT IN THE GLOBAL CABLE OR BROADBAND INDUSTRY IN RETURN FOR THE SERVICES UPRAMP PROVIDED UNDER THE FITERATOR PROGRAM, THE COMPANY RECEIVES WARRANTS TO PURCHASE STOCK IN THE PARTICIPANT COMPANIES, RANGING FROM 2% TO 3% OF THE COMPANIES' EQUITY ON A FULLY-DILUTED BASIS IN 2019, 2018 AND 2017 THE EXERCISE PRICES FOR THE WARRANTS IS EQUAL TO THE FAIR VALUE PER SHARE OF THE UNDERLYING EQUITY SECURITIES AND THEY HAVE EXERCISE TERMS RANGING FROM 4 TO 5 YEARS UPRAMP ACCOUNTS FOR THE RECEIPT OF THE WARRANTS AS A NON-MONETARY TRANSACTION AND VALUES THE WARRANTS USING THE BLACK-SCHOLES MODEL AS A RESULT, IT RECORDED \$1,289,800 AND 289,084 AS REVENUE INCLUDED IN OTHER INCOME FROM THE FITERATOR PROGRAM DURING THE YEARS ENDING JUNE 30, 2019 AND 2018, RESPECTIVELY, WITH A CORRESPONDING INCREASE IN INVESTMENTS UPRAMP EVALUATES THE WARRANTS FOR IMPAIRMENT AT EACH REPORTING DATE AND RECORDS AN IMPAIRMENT, IF NECESSARY, EQUAL TO THE DIFFERENCE BETWEEN THE FAIR VALUE OF THE WARRANT AND ITS CARRYING VALUE UPON EXPIRATION OF THE WARRANTS, ANY REMAINING CARRYING VALUE ASSOCIATED WITH THE UNEXERCISED WARRANTS WILL BE WRITTEN OFF BASED ON ITS EVALUATION, UPRAMP RECORDED IMPAIRMENT EXPENSE OF \$250,980 AND \$550,000 FROM THE FITERATOR PROGRAM DURING THE YEARS ENDING JUNE 30, 2019 AND 2018, RESPECTIVELY, WITH A CORRESPONDING DECREASE IN INVESTMENTS</p>

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
PART VI, SECTION A, LINES 6 AND 7A GOVERNING BODY AND MANAGEMENT	CABLELABS IS A NON-STOCK MEMBERSHIP CORPORATION ORGANIZED AND EXISTING UNDER THE LAWS OF THE STATE OF DELAWARE THE MEMBERSHIP OF CABLELABS IS DIVIDED INTO THREE CLASSES OF MEMBERS AS FOLLOWS - CLASS US MEMBERS ARE OPERATORS OF CABLE TELEVISION SYSTEMS IN THE UNITED STATES - CLASS CA MEMBERS ARE OPERATORS OF CABLE TELEVISION SYSTEMS IN CANADA - CLASS G MEMBERS ARE OPERATORS OF CABLE TELEVISION SYSTEMS NOT IN THE UNITED STATES OR CANADA THE MEMBERS HAVE THE POWER TO DESIGNATE AND ELECT CERTAIN MEMBERS OF THE BOARD OF DIRECTORS AS ITS GOVERNING BODY, BASED ON THE CLASSES NOTED ABOVE EACH OF THE TEN CLASS US AND CANADA MEMBERS, PAYING THE LARGEST AMOUNT OF DUES AS OF THE END OF THE FISCAL QUARTER IMMEDIATELY PRECEDING THE ELECTION OF DIRECTORS, IS ENTITLED TO DESIGNATE ONE DIRECTOR FOR A TOTAL OF TEN CLASS US AND CANADA DIRECTORS EACH OF THE TWO CLASS G MEMBERS, PAYING THE LARGEST AMOUNT OF DUES AS OF THE END OF THE FISCAL QUARTER IMMEDIATELY PRECEDING THE ELECTION OF DIRECTORS, IS ENTITLED TO DESIGNATE ONE DIRECTOR FOR A TOTAL OF TWO CLASS G DIRECTORS TWO AT-LARGE DIRECTORS ARE ELECTED BY CLASS US, CLASS CA, AND CLASS G MEMBERS VOTING TOGETHER AS A SINGLE CLASS ALL OTHER RIGHTS, DUTIES AND POWERS ARE VESTED IN THE BOARD OF DIRECTORS THE CHAIRMAN OF THE BOARD, VICE CHAIRMAN, PRESIDENT, TREASURER AND SECRETARY ARE ELECTED BY THE BOARD OF DIRECTORS VOTING ON THE BASIS OF ONE VOTE FOR EACH DOLLAR OF DUES PAID BY EACH VOTING DIRECTOR'S MEMBER COMPANY TO THE CORPORATION AS OF THE END OF THE FISCAL QUARTER OF THE CORPORATION IMMEDIATELY PRIOR TO THE ELECTION OF SUCH OFFICERS

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
PART VI, SECTION B, LINE 11 POLICIES	THE ORGANIZATION ENGAGES A PAID PREPARER EXPERIENCED IN THE PREPARATION OF THE FORM 990 TO PREPARE THE FORM ACCOUNTING DEPARTMENT STAFF, THE VICE PRESIDENT OF FINANCE AND GENERAL COUNSEL WORK CLOSELY WITH THE PAID PREPARER IN THE PREPARATION OF THE RETURN, AND THE VICE PRESIDENT OF FINANCE AND GENERAL COUNSEL REVIEW THE RETURN AS PREPARED BY THE PREPARER A COPY OF THE FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE, A SUBCOMMITTEE OF THE BOARD OF DIRECTORS, BEFORE IT IS FILED

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
PART VI, SECTION B, 12C POLICIES	AN ANNUAL ACKNOWLEDGEMENT OF THE CODE OF ETHICS FOR DIRECTORS CONTAINING CONFLICT OF INTEREST PROVISIONS IS ADOPTED BY THE BOARD OF DIRECTORS EACH BOARD MEMBER IS REQUIRED TO COMPLY WITH THE TERMS AND CONDITIONS OF THE CODE AND DISCLOSE TO THE CHAIRMAN OF THE BOARD OR CHAIRMAN OF THE AUDIT COMMITTEE ANY INTERESTS THAT COULD GIVE RISE TO CONFLICTS OF INTEREST, INCLUDING WITHOUT LIMITATION ANY FAMILY RELATIONSHIP OR BUSINESS RELATIONSHIP WITH ANY OTHER OFFICER, DIRECTOR OR KEY EMPLOYEE THE BOARD SHALL DETERMINE APPROPRIATE ACTIONS TO BE TAKEN IN THE EVENT THAT THIS CODE IS VIOLATED APPROPRIATE ACTIONS SHALL BE REASONABLY DESIGNED TO DETER WRONGDOING AND TO PROMOTE ACCOUNTABILITY FOR ADHERENCE TO THE CODE SUCH ACTIONS MAY INCLUDE BUT ARE NOT LIMITED TO REMOVAL OF A BOARD MEMBER FROM THE BOARD FOR A VIOLATION OF THE CODE THE COMPANY'S EMPLOYEE HANDBOOK STATES THAT EMPLOYEES MUST NOT HAVE ANY PERSONAL INTERESTS WHICH CONFLICT WITH THOSE OF COMPANY OR WHICH MIGHT INFLUENCE OR APPEAR TO INFLUENCE ONE'S JUDGMENT OR ACTIONS WHILE EMPLOYED AT COMPANY IF AN EMPLOYEE VIOLATES THIS POLICY, COMPANY, IN ITS DISCRETION, MAY TAKE WHATEVER STEPS AND/OR DISCIPLINARY ACTIONS IT BELIEVES APPROPRIATE TO REMEDY THE VIOLATION, UP TO AND INCLUDING DISMISSAL

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
PART VI, SECTION B, LINES 15A & 15B POLICIES	<p>CABLELABS IS A 501(C)(6) TRADE ASSOCIATION WHOSE PRIMARY OBJECTIVES ARE TO GATHER, ASSESS, AND DISSEMINATE TECHNICAL INFORMATION OF STRATEGIC IMPORTANCE TO THE CABLE TELEVISION INDUSTRY, TO IDENTIFY, PLAN, ENGAGE IN AND FUND THE DEVELOPMENT OF NEW TECHNOLOGIES FOR THE BENEFIT OF THE INDUSTRY, DIRECTLY OR IN PARTNERSHIP WITH OTHERS, AND TO TRANSFER SUCH TECHNOLOGIES TO THE INDUSTRY THROUGH REPORTS, SEMINARS, WORKSHOPS, LICENSES, LOANS OF PERSONNEL AND OTHER APPROPRIATE MEANS THE HIGHLY TECHNICAL AND SPECIALIZED NATURE OF THESE ACTIVITIES REQUIRES THE COMPANY TO HIRE HIGHLY EDUCATED AND TRAINED PROFESSIONALS EXPERIENCED IN THE INDUSTRY FROM A VERY COMPETITIVE EMPLOYMENT POOL OFFERING CANDIDATES SIMILAR OPPORTUNITIES AT MARKET SALARIES THE HUMAN RESOURCES TEAM OF THE COMPANY LOOKS AT THE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER OF ANOTHER INDUSTRY TRADE ASSOCIATION ALONG WITH CERTAIN SENIOR TECHNICAL POSITIONS (E G CHIEF TECHNOLOGY OFFICER) PUBLISHED BY THIRD PARTY COMPENSATION EXPERTS WHEN OUR CEO WAS HIRED, THE COMPENSATION COMMITTEE ALSO REVIEWED AN INDUSTRY EXECUTIVE COMPENSATION SURVEY FOR COMPARABLE POSITIONS AND CREATED CONTEMPORANEOUS SUBSTANTIAL DOCUMENTATION OF COMPENSATION IN AN EXECUTED EMPLOYMENT AGREEMENT WHICH WAS ALSO REVIEWED BY THE CHAIRMAN OF THE AUDIT COMMITTEE ANNUAL SALARY INCREASES AND BONUSES, IF APPLICABLE, ARE DETERMINED BY THE HUMAN RESOURCES AND EXECUTIVE TEAMS, AND THE IMMEDIATE SUPERVISOR OF EACH EMPLOYEE THE CHIEF EXECUTIVE OFFICER'S ANNUAL SALARY ADJUSTMENTS AND INCENTIVE BONUS ARE ALSO REVIEWED ANNUALLY BY THE AUDIT COMMITTEE WHICH INCLUDES THE CHAIRMAN, VICE CHAIRMAN, TREASURER, AND SECRETARY OF THE COMPANY SALARY INCREASES ARE BASED ON MARKET CONDITIONS AND GENERALLY RANGE BETWEEN 2 AND 3 PERCENT THE CHIEF EXECUTIVE OFFICER DETERMINES THE COMPENSATION OF THE ORGANIZATION'S EXECUTIVE TEAM, INCLUDING THE CHIEF OPERATING OFFICER, CHIEF TECHNICAL OFFICER, CHIEF R&amp;D OFFICER, CHIEF MARKETING OFFICER, CHIEF STRATEGY OFFICER, VP OF HUMAN RESOURCES AND GENERAL COUNSEL COMPENSATION FOR THE OTHER OFFICERS AND KEY EMPLOYEES IS SET BY THE CHIEF EXECUTIVE OFFICER, CHIEF OPERATING OFFICER, AND THE VICE PRESIDENT OF HUMAN RESOURCES COMPREHENSIVE SALARY SURVEYS ARE COMPLETED EVERY FEW YEARS IN THE INTERVENING YEARS, SALARY ADJUSTMENTS ARE BASED ON GENERAL MARKET TRENDS AND SURVEYS PUBLISHED BY THIRD PARTY COMPENSATION EXPERTS</p>

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
PART VI, SECTION C, LINE 19 DISCLOSURE	CABLELABS DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE GENERAL PUBLIC

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990 PART IX LINE 11G	DESCRIPTION Temps & Interns TOTAL FEES 289701

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990 PART IX LINE 11G	DESCRIPTION Consultants TOTAL FEES 8816511

**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990 PART IX LINE 11G	DESCRIPTION Contractors TOTAL FEES 1400349

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2018**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**  
 ▶ **Attach to Form 990.**  
 ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
Cable Television Laboratories Inc

**Employer identification number**

04-3012897

**Part I Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
<b>(1)</b> HC Accelerator Fund LLC 2060 Broadway Street Suite B1 Boulder, CO 80302 82-1755934	Development	DE	0	0	CableLabs

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
<b>(1)</b> NETWORKFX INC 858 COAL CREEK CIRCLE LOUISVILLE, CO 80027 45-4849026	COMPUTER INFRTN	DE	CABLELABS	C Corp	0	3,915,647	100 000 %	Yes	
<b>(2)</b> KYRIO MEDICAL INC 858 COAL CREEK CIRCLE LOUISVILLE, CO 80027 81-1425201	TECHNICAL SVCS	DE	NETWORKFX	C Corp	0	232,561	100 000 %	Yes	
<b>(3)</b> UPRAMP INC 858 COAL CREEK CIRCLE LOUISVILLE, CO 80027 81-1430734	DEVELOPMENT	DE	NETWORKFX	C Corp	0	417,315	100 000 %	Yes	
<b>(4)</b> CABLELABS ASIA LIMITED UNIT 503 5/F TOWER 2 LIPPO CENTRE QUEENSWAY HK 000000000	TECHNICAL SVS	HK	CABLELABS	C Corp	0	68,266	100 000 %	Yes	

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .	<b>Yes</b>	
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .		<b>No</b>
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		<b>No</b>
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		<b>No</b>
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		<b>No</b>
<b>f</b> Dividends from related organization(s) . . . . .		<b>No</b>
<b>g</b> Sale of assets to related organization(s) . . . . .		<b>No</b>
<b>h</b> Purchase of assets from related organization(s) . . . . .		<b>No</b>
<b>i</b> Exchange of assets with related organization(s) . . . . .		<b>No</b>
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .	<b>Yes</b>	
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		<b>No</b>
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .	<b>Yes</b>	
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .	<b>Yes</b>	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	<b>Yes</b>	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	<b>Yes</b>	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		<b>No</b>
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .		<b>No</b>
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		<b>No</b>
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .	<b>Yes</b>	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved



**Part VII**    **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

<b>Return Reference</b>	<b>Explanation</b>

## Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 04-3012897  
**Name:** Cable Television Laboratories Inc

### Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	NetworkFX Inc	a(i)	253,825	FMV
(1)	NetworkFX Inc	l	17,776	FMV
(2)	NetworkFX Inc	n	729,963	FMV
(3)	UpRamp Inc	n	14,675	FMV
(4)	NetworkFX Inc	o	3,449,727	FMV
(5)	UpRamp Inc	o	638,448	FMV
(6)	NetworkFX Inc	q	3,307,082	FMV
(7)	UpRamp Inc	s	250,000	FMV