FEDERAL COMMUNICATIONS COMMISSION

Information and Instructions

Est. Avg. Burden Per Response: 2 Hrs

LICENSE QUALIFICATION REPORT FOR MULTIPOINT DISTRIBUTION SERVICE

NOTICE TO INDIVIDUALS REQUIRED BY THE PRIVACY ACT OF 1974 AND THE PAPERWORK REDUCTION ACT OF 1995

We have estimated that each response to this collection of information will take on average 2 hours. Our estimate includes the time to read the instructions, look through existing records, gather and maintain required data, and actually complete and review the form or response. If you have any comments on this estimate, or on how we can improve the collection and reduce the burden it causes you, please write the Federal Communications Commission, AMD-PERM, Washington, DC 20554, Paperwork Reduction Project (3060-0105). We will also accept your comments via the Internet if you send them to Judith-B.Herman@fcc.gov. *Please do not send completed application forms to this address.*

You are not required to respond to a collection of information sponsored by the Federal government, and the government may not conduct or sponsor this collection unless it displays a currently valid OMB control number with this notice. This collection has been assigned OMB control number 3060-0105.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the personal information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or potential violation of a statute, FCC regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government, is a party to a proceeding before the body or has an interest in the proceeding.

As of December 3, 2001, all parties and entities doing business with the Commission must obtain a unique identifying number called the FCC Registration Number (FRN) and supply it when doing business with the Commission. Failure to provide the FRN may delay the processing of the application. This requirement is to facilitate compliance with the Debt Collection Improvement Act of 1996 (DCIA). The FRN can be obtained electronically through the FCC webpage at http://www.fcc.gov or by manually submitting FCC Form 160. FCC Form 160 is available from the FCC's web site at http://www.fcc.gov or by manually submitting FCC Form 160. FCC Form 160 is available from the FCC's web site at http://www.fcc.gov/formpage.html, by calling the FCC's Forms Distribution Center 800-418-FORM (3676), or from Right Fax by dialing (202) 418-0177.

This notice is required by the Privacy Act of 1974, Public Law 93-579, December 31, 1974, 5 U.S.C. Section 552a(e)(3) and the Paperwork Reduction Act of 1995, Public Law 104-13, October 1, 1995, 44 U.S.C. 3507.



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INSTRUCTIONS FOR FCC 430

A. The "Filer" of this report is defined to include:

(1) An applicant, where this report is submitted in connection with an application for a new authorization, assignment of license or transfer of control of a Multipoint Distribution Service authorization as required for such applications; or (2) A licensee or conditional licensee, where this report is required by the Commission's Rules to be submitted on an annual basis. See 47 C.F.R. Section 21.11

Also, enter the applicant's ten-digit FCC Registration Number (FRN) assigned by the Commission Registration System (CORES). The FRN is a unique entity identifier for everyone doing business with the Commission and is mandatory effective December 3, 2001. The FRN can be obtained electronically through the FCC webpage at https://www.fcc.gov (click on Commission Registration System) or by manually submitting FCC Form 160. FCC Form 160 is available for downloading from http://www.fcc.gov/formpage.html, by calling 800-418-FORM (3676), or from Fax Information System by dialing (202) 418-0177. Note: Licensees should then associate their WTB call sign(s) electronically http://wireless.fcc.gov/uls/ (click on CORES/CALL SIGN REGISTRATION) or by manually submitting FCC Form 606. FCC Form 606 can also be obtained from any of the aforementioned locales as FCC Form 160.

- B. Submit an original and one copy (signed original only) to the Federal Communications Commission, 445 12th St. SW, Room 2A-861Washington DC 20554 Attn: Consuela Kearney. If this report is being submitted in connection with an application for assignment of license or transfer of control, attach it to that application.
- C. Do not submit a fee with this report.

FCC WIRELESS TELECOMMUNICATIONS BUREAU LICENSE QUALIFICATION REPORT FOR MULTIPOINT DISTRIBUTION SERVICE

Legal Name of Filer				FCC Registration Number (FRN)				
Mai	ing Address							
City			State or C	State or Country (if foreign address)			ZIP Code	
Telephone Number (include area code)				E-Mail Address (if available)				
Cor	tact Representative (if oth	er than Filer)		Firm or Company Name				
Telo	phone Number (include a	rea code)		E-Mail Address (if available)				
	If this report supersedes	s a previously filed report	, specify its d	late:				
8.	The Filer is a(n): (check	one)						
	Individual General Partnership			Limited Partnership				
	Corporation	Association		Other				
	If the "Other" box is checked, attach as Exhibit I a statement describing the nature of the Filer, the laws under which it is organized, and the names and addresses of the owners, principals, officers and I Exhibit No. I							
	Under the laws of what S	State (or other jurisdiction	n) is the Filer	organized?				
	List the Multipoint Distribution Service and Instructional Television Fixed Service licenses or conditional licenses in which Filer directly or indirectly has an interest, through ownership or control.							
	licenses in which Filer di	rectly or indirectly has an	n interest, thro		ndition	Exhibit	No.	
	licenses in which Filer di	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro		ndition	Exhibit		
	licenses in which Filer di If additional space is nee	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro	ough ownership or control.		Exhibit II		
	licenses in which Filer di If additional space is nee	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro	ough ownership or control.		Exhibit II		
	licenses in which Filer di If additional space is nee	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro	ough ownership or control.		Exhibit II		
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C,	licenses in which Filer di If additional space is nee ALL SIGN/BTA NUMBER Has the Filer or any part revoked or had any app	rectly or indirectly has an eded, attach as Exhibit II. LOCATION (CITY	n interest, thro (/STATE) any FCC stat ewal denied t	ough ownership or control. FILE NUMBER		EXPIRATIO	N DATE	
<u>C</u> , (a).	licenses in which Filer di If additional space is nee ALL SIGN/BTA NUMBER Has the Filer or any part revoked or had any app If YES, attach as Exhibit license revoked and rela Has any court finally adj of unlawfully monopolizi	rectly or indirectly has an eded, attach as Exhibit II. LOCATION (CITY LOCATION (n interest, thro (/STATE) any FCC stat ewal denied t e call sign an erson directly lly to monopo	ough ownership or control. FILE NUMBER tion license or conditional license by the Commission?	junt junt junt junt junt junt junt junt	EXPIRATIC EXPIRATIC YES Exhibit III YES	N DATE	
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<u>C</u> ,	Icenses in which Filer di If additional space is need ALL SIGN/BTA NUMBER Has the Filer or any part revoked or had any app If YES, attach as Exhibit license revoked and relat Has any court finally adj of unlawfully monopolizit indirectly, through contro other means of unfair means If YES, attach as Exhibit Has the Filer, or any part ever been convicted of a	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro (/STATE) (/STATE) any FCC state ewal denied to e call sign an erson directly ly to monopo of radio appa the facts. any person di ederal court?	The second secon	jonal guilty or ent, or	Exhibit II EXPIRATIC YES Exhibit III YES Exhibit IV	N DATE	
(b).	Icenses in which Filer di If additional space is need ALL SIGN/BTA NUMBER Has the Filer or any part revoked or had any app If YES, attach as Exhibit license revoked and relat Has any court finally adj of unlawfully monopolizit indirectly, through contro other means of unfair mo If YES, attach as Exhibit Has the Filer, or any part ever been convicted of a If YES, attach as Exhibit Is the Filer, or any perso	rectly or indirectly has an eded, attach as Exhibit II.	n interest, thro <u>(STATE)</u> <u>(STATE)</u> any FCC state e any FCC state e call sign an erson directly ly to monopo of radio appa the facts. any person di rederal court? he facts. he facts.	The second secon	ional guilty or ent, or	Exhibit II EXPIRATIC YES Exhibit III YES Exhibit IV YES Exhibit	N DATE	

7. Is the Filer, directly or indirectly, through stock ownership, contract or otherwise, currently interested in the ownership or control of any other radio stations licensed by the Commission?

If YES, attach as Exhibit VII the name of each such licensee and the licensee's relation to the Filer.

If Filer is an Individual (sole proprietorship) or partnership, answer the following and Item 10:

- 8(a). Full Legal Name and Residential Address (Number, Street, City, State and Zip Code) of Individual or Partners:
- (b). Is individual or each member of a partnership a citizen of the United States?
- (c). Is individual or each member of a partnership a representative of an alien or of a foreign government?

If Filer is a corporation, answer the following and Item 10:

- 9(a). Attach as Exhibit VIII the names, addresses, and citizenship of those stockholders owning of record and/or voting 5 percent or more of the Filer's voting stock and the percentages so held. In the case of fiduciary control, indicate the beneficiary(ies) or class of beneficiaries.
- (b). List below, or attach as Exhibit IX the names and addresses of the officers and directors of the Filer.
- (c). Is the Filer directly or indirectly controlled by any other corporation?

If YES, attach as Exhibit X a statement (including organizational diagrams where appropriate) which fully and completely identifies the nature and extent of control. Include the following: (1) the address and primary business of the controlling corporation and any intermediate subsidiaries; (2) the names, addresses, and citizenship of those stockholders holding 5 percent or more of the controlling corporation's voting stock; (3) the approximate percentage of total voting stock held by each such stockholder; and (4) the names and addresses of the president and directors of the controlling corporation.

- (d). Is any officer or director of the Filer an alien?
- (e). Is more than one-fifth of the capital stock of the Filer owned of record or voted by aliens or their representatives, or by a foreign government or representative(s) thereof, or by a corporation

organized under the laws of a foreign county?

- (f). Is the Filer directly or indirectly controlled: (1) by any other corporation of which any officer more than one-fourth of the directors are aliens, or (2) by any foreign corporation or corporation of which more than one-fourth of the capital stock is owned or voted by aliens or their representatives, or by a foreign government or representatives thereof?
- (g). If any answer to questions (d), (e) or (f) is YES, attach as Exhibit XI a statement identifying the aliens or foreign entities, their nationality, their relationship to the Filer, and the percentage of stock they own or vote.

10. CERTIFICATION

This report constitutes a material part of any application which cross-references it, and all statements made in the attached exhibits are a material part thereof. The ownership information contained in this report does not constitute an application for, or Commission approval of, any transfer of control or assignment of radio facilities. The undersigned, individually and for the Filer, hereby certifies that the statements made herein are true, complete and correct to the best of the Filer's knowledge and belief, and are made in good faith. The undersigned, individually and for the Filer, certifies that neither the applicant nor any other party to the application is subject to a denial of federal benefits that includes FCC benefits pursuant to §5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. §862, because of a conviction for possession or distribution of a controlled substance.

Filer (must correspond with that shown in Item 1):	Typed or Printed Name						
Signature	Title	Date					
WILLFUL FALSE STATEMENTS MADE ON THIS FORM OR ANY ATTACHMENTS ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. Code, Title 18, § 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. Code, Title 47, § 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, § 503).							



NO

NO

YES



YES	NO
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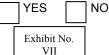




Exhibit No.

IX

Exhibit No.

X

YES